

IN CONFIDENCE – FOR MEMBERS' INFORMATION ONLY

MINUTE: PPC/07/167

Minute of Meeting of the Pharmacy Practices Committee held on Friday, 19th January 2007 in Committee Room 1, NHS Lanarkshire Primary Care Division, Strathclyde Hospital, Airbles Road, Motherwell.

Chairman: Mr Bill Sutherland

Present: Lay Members Appointed by the Board

Mrs Angela Dunbar
Mr William McConnell
Mrs Lynn Wilson

Pharmacist Appointed by The Royal Pharmaceutical Society of Great Britain

Mr Edward H Mallinson

Pharmacist Nominated by Area Pharmaceutical Committee

Mrs Janet Park

Attending: Officers from NHS Lanarkshire - Primary Care

Mr George Lindsay, Chief Pharmacist
Mrs Gillian Forsyth, Administration Manager
Miss Catherine Oates, Administration Team Leader

167 **APPLICATION BY Mr Y VERMA, 97 COALBURN ROAD, COALBURN, ML11 OLS**

(a) There was submitted application by Mr Y Verma, received 15th August 2006, for inclusion on NHS Lanarkshire's Pharmaceutical List.

(b) **Submissions of Interested Parties**

The undernoted documents were submitted:

Letter received 1st September 2006 from Area Pharmaceutical Committee

Letter received 6th September 2006 from Alliance Pharmacy

Letter received by e-mail on 7th September 2006 from Lanarkshire Local Medical Committee

(c) **Procedure**

Prior to arrival of parties the Chairman asked Members to confirm that they had both received and considered the papers relevant to the meeting. The Chairman also asked Members to confirm that they had received the report on Pharmaceutical Services which was sent under separate cover of the Agenda. Having ascertained that no Members had any personal interest in the application the Chairman confirmed that the Oral Hearing would be conducted in accordance with the guidance notes contained within the papers.

(d) **Attendance of Parties**

The applicant and interested parties entered the meeting.

The Chairman introduced himself and the Members, as well as the officers in attendance from NHS Lanarkshire - Primary Care, and asked that attendees confirm that they had received all papers, and additional correspondence, relevant to the application and hearing.

The Chairman explained that the meeting was being convened to determine the application submitted by Mr Y Verma, in respect of 97 Coalburn Road, Coalburn, ML11 0LS, according to the Statutory Test set out in Regulation 5(10) of The National Health Service (Pharmaceutical Services)(Scotland) Regulations, as amended (the Regulations)

The Chairman then continued to explain the procedures to be followed and ascertained that no member of the Committee had any interest in the application. The applicant Mr Verma was in attendance and accompanied by Mrs Verma. From the interested parties who were entitled to attend the hearing, Alliance Pharmacy was represented by Mrs A Irving, and Lanarkshire Medical Committee was represented by Dr V Sonthalia ("Interested Parties")

(e) **Evidence Led**

The Chairman invited Mr Verma to speak first on behalf of the application.

Mr Verma thanked the Committee for the opportunity to attend and make oral representation in support of his application, and read the following prepared statement of case:

The neighbourhood, in my opinion, is the area commonly known as Coalburn. Extending 4 miles to the North of Coalburn is Lesmahagow, 7 miles to the South is Douglas, and Glespin is to the West. The B7078/M74 junction is on the East side, as is Rigside, which is 7 miles away.

The neighbourhood does not have many amenities in the day to day fabric of people's lives. The only amenities available at present are one small convenience store, a primary school and a children's nursery, a miner's social club, the Coalburn Leisure Complex and a hairdresser's which only opens one day a week. In this neighbourhood, there is no pharmacy.

At present the population of Coalburn is 1600. At this time I think a definition of "neighbourhood" is necessary.

Lord Nimmo-Smith said in a judicial review that the word "neighbourhood" in regulation 5(10) of the 1995 Regulations means an area which is relatively near to the premises in question, which need not have any residents, and which can be regarded as a neighbourhood for all purposes.

Lord Justice Banks, in an English case talking about neighbourhoods, quoted "I wish now to consider what is indicated by the expression "neighbourhood". In this connection it is impossible to lay down any general rule. In country districts, people are said to be neighbours, that is to live in the same neighbourhood, who live many miles apart. The same cannot be said of dwellers in a village, where a single street of a single square may constitute a neighbourhood. Again, physical conditions may determine the boundary or boundaries of neighbourhood, as for instance, a range of hills, a river, a railway line, or a line which separated a high class residential district from a district consisting only of artisans or workmen's dwellings"

It is important not to lose sight of the fact that a neighbourhood is a place which can be regarded as a neighbourhood for all purposes. It is a place which has connotations of vicinity and nearness. Neighbourhood must be given its ordinary meaning, and for this reason the neighbouring villages such as Lesmahagow should not be considered as part of the neighbourhood of Coalburn. Anyone who has lived in a small village will be aware of the animosity between neighbouring villages.

With regards to current Services I can only follow the Legal Test, Regulation 5(10), and comment on pharmacies in the neighbourhood and services from pharmacies outwith providing services to the neighbourhood.

At present, there is no pharmacy in Coalburn hence there is no pharmaceutical services provided, apart from the dispensing doctors. The other pharmacies of the neighbourhood are at Lesmahagow and Kirkmuirhill which are 4 and 6 miles away respectively. This again highlights inadequacy of pharmaceutical services in the actual neighbourhood of Coalburn. The dispensing doctors can only provide a dispensing service and not any other pharmaceutical services of a pharmacy. A pharmacy would be able to offer a wide range of services, including provision of Methadone and Subutex, Oxygen, Emergency Contraception, Needle/Syringe Exchange and Compliance Needs Assessments using a specially designed Consultation Room and Personal Advice Area. In addition to this, a Pharmacy would be able to offer collection and delivery of prescriptions which would be beneficial especially to the elderly population of Coalburn. A pharmacy would also provide daily over the counter products such as GSL medicines, P Medicines, Baby foods and related products as well as basic hygiene goods.

The Social Marker of Coalburn paints a poor picture as that of high deprivation. In fact, it must be one of the most deprived communities in South Lanarkshire. According to SCROL Data, the following are statistics comparing Coalburn with the National (Scottish) Average: (Mr Verma read from the undernoted table)

| | COALBURN | SCOTLAND |
|---|-----------------|-----------------|
| Permanently sick/disabled | 9.96% | 7.74% |
| Average age of persons with good health | 29.98% | 32.86% |
| General Health % not good | 12.7% | 10.15% |
| Population under 16 | 20.13% | 19.20% |
| Population 60-74 | 14.92% | 13.98% |
| Unemployment 16-24 years | 38.89% | 27.84% |
| % never worked | 9.26% | 8.92% |
| % rented from council | 44.91% | 21.57% |

The statistics speak for themselves as to how deprived this area is. The village of Coalburn is about to undergo a massive expansion program with the erection of some 600+ new homes. The majority of village folk strongly believe that the village as it is cannot cope with such a major increase in population. The poor road system, lack of facilities, no local job prospects, and the already stretched Medical and Education facilities are only a few of the issues that are causing people in the village concern. We did a door to door survey asking Coalburn residents the following question: "At present Coalburn has dispensing Doctors. Would you like a Pharmacy in Coalburn?" An overwhelming 95% of respondents, that is, 336 of the 352 people interviewed, said yes.

For the residents of Coalburn, having to go outwith their neighbourhood to access surgeries or pharmacies does not make sense, especially with the new GPS Contract round the corner. This will include electronic transmission of prescriptions and one year serial dispensing of prescriptions. This will take away the need for residents having to go to the surgery two or three times a month solely to pick up repeat prescriptions. Pharmacies have already started the eMAS Service, which means that a pharmacy will, for a lot of people, be the first port of call regarding all matters of health, rather than the doctor.

Mr Verma concluded by stating that up until now, the residents of Coalburn have had to manage with the services of dispensing doctors who I am sure have provided a good service. However, talking to a lot of medical practitioners, it is apparent that most GPs are hard pushed to meet the targets of medical practice. I am sure that the Douglasdale practice with five doctors is not any different and that such stresses must be compounded by having to maintain a four-sited practice at Douglas, Rigside, Crawford and Coalburn. The dispensing services are provided in addition to all of this and I hope that this is not at the expense of any medical services. Providing a patient with a prescription can take up to 48 hours whereas we would be able to provide the medication instantly or within a few hours. Same day dispensing would, of course, appeal greatly to the patients.

If I was given permission to open this pharmacy, aside from purely prescribing, I would be able to offer a range of services, having recently undertaken a supplementary prescribing course. In conjunction with the doctors, I would be equipped to run disease management and lifestyle clinics to assist the practice in meeting their contract targets – which will undoubtedly become a more challenging prospect with the future plans to increase the population density of their catchment areas. A pharmacy

would also serve as an appropriate avenue of health education for the Coalburn community, promoting health awareness and management.

I am of the opinion that a modern pharmacy in Coalburn, providing all the pharmaceutical services that a neighbourhood needs, is very important, especially since Coalburn is expanding to accommodate approximately 600 new homes. I strongly believe that the introduction of a pharmacy to Coalburn is inevitable and we are only serving to accommodate the needs of the current, and future, residents of this community. Hopefully, the introduction of a pharmacy would lead to other amenities coming into this deprived area. Finally, I have no doubt that the level of care provided by the Douglasdale practice meets the current standards – my objective is not to work against this practice but to work alongside it so that together, we can work towards providing a higher quality of healthcare to this community.

The Chairman then invited questions from Interested Parties to Mr Verma.

Mrs Irving was first to question Mr Verma. She asked him who would work in the pharmacy and was advised that he would be the main pharmacist with support staff. She then asked why the proposed hours of service included two half days. Mr Verma stated that he wanted the hours of service to mirror surgery opening times as normally doctors take a half day on Wednesdays and close early on Saturdays.

Mrs Irving then asked if Mr Verma was aware of which services expected under the new contract that their Lesmahagow Pharmacy provided, to which he remarked eMAS. Mrs Irving asked where Mr Verma expected patients looking to utilise eMAS would access it when he was closed on Wednesdays and Saturdays. Mr Verma replied that they don't have an opportunity to access it within the village at present so five days service would be an advantage should the application be granted. Mrs Irving asked for clarification as to where patients presently access eMAS. Mr Verma replied that they travel to his existing pharmacy in Kirkmuirhill, to which Mrs Irving asked if he would agree that patients can and do travel to Alliance Pharmacy in Lesmahagow. Mr Verma agreed that as they had no other choice this was a possibility, however it would be a daunting task if they had to travel on public transport depending upon the ailment. Mrs Irving sought clarification that Mr Verma thought that it would be ok for patients to do this when he was proposing to close, and Mr Verma replied yes.

Mrs Irving then asked Mr Verma about the survey he had conducted, and sought clarification as to whether he would agree that if you asked most people if they wanted a pharmacy in close proximity to their home they would say yes. Mr Verma stated that the survey was conducted as a direct result of reading Karen Gillon's letter stating that she had had a meeting with local residents and as he had not been invited he was concerned from the content of her letter that the information provided was misleading. He further stated that his survey wasn't asking people to choose whether they preferred a dispensing doctor or a pharmacy – it promoted a yes or no response as to whether they wanted a pharmacy.

Mrs Irving's last question was to ask Mr Verma when the proposed expansion to the area was likely to be completed, to which he advised that the site was already prepared and local plans indicated completion between 2008 however this may be extended to 2012 as no-one really knows exactly at this stage.

Dr Sonthalia, Lanarkshire Medical Committee (LMC) started his questioning by stating that he wished to clarify that doctors closing on Wednesday afternoons was historic and no longer permissible under the new GMS contract, and that patients from Coalburn would access out of hours GP cover from Lanark on Saturdays. Mr Verma stated that he had clarified the hours from the practice's website which clearly stated half day closure and that is why he had proposed them.

Dr Sonthalia enquired if the Coalburn population of 1500 residents with no passing trade could support a pharmacy financially. Mr Verma stated that the site was cleared for 600 new houses and once they were built he expected the population to double thus making the village as large as Kirkmuirhill and Douglas which would make a comfortable return. Dr Sonthalia stated that the LMC had concerns over the viability of a pharmacy and that to provide one at the expense of the current dispensing service to have it subsequently taken away would have a major destabilising effect on the area.

At this point Mr Sutherland asked for clarification from Mr Verma if his business plan had taken account of viability with the current population. Mr Verma replied that his plan included income on sole provision of over the counter medicines and eMAS for the first year as he would not be allowed to dispense during this time. Mrs Forsyth clarified that NHS Lanarkshire would enter into negotiation with the local surgery regarding timescale for cessation of dispensing service should the application be granted and not be expected of Mr Verma.

Dr Sonthalia then sought clarification from Mr Verma as to why he thought that a pharmacy could speed up the time taken for a repeat prescription to be generated given that most surgeries take 48hrs given the administration and workload. Mr Verma replied that residents had stated that they had handed in requests on a Monday and that due to the half day on Wednesday they were unable to collect the script until Thursday some four days after initial request. Dr Sonthalia responded by stating that Mr Verma would not be able to write the script therefore the same 48hr timescale would apply with the addition of time taken for his delivery driver to uplift the script from the surgery. Mr Verma agreed on the 48hr timescale however stated that his driver would ensure that the scripts were uplifted on Wednesday mornings thus avoiding the four day delay experienced by some patients.

The Chairman then invited questions from Members of the Committee to Mr Verma.

Mrs Park was first to question Mr Verma and asked of his plans for the layout of the pharmacy. Mr Verma replied that as it would be a new pharmacy he would have a modern layout including consultation area in keeping with Royal Pharmaceutical Society guidelines. Mrs Park then asked if this meant that he had no concrete plans in place in anticipation of the outcome, and was advised that his plans had still to be finalised. This led Mrs Park to question whether or not Mr Verma could achieve this within six month timescale. Mr Verma was confident that the shop could be fitted within that timeframe and stated that he had recent experience with refurbishing his Kirkmuirhill pharmacy. Final question posed by Mrs Park was regarding the services that Mr Verma intended providing. Mr Verma stated that he would provide the same services as provided by his Kirkmuirhill Pharmacy, and monitor if Coalburn required any additional services. When Mrs Park enquired about methadone provision he confirmed that he would provide methadone dispensing and subutex.

Mr Mallinson enquired as to the current internal state of the premises, and was informed that they were empty however services were installed so only shopfitting was required. He then asked if Mr Verma had purchased the premises. Mr Verma replied that he has written agreement from the present owner should the application be granted. Mr Mallinson's final question was regarding access to the premises for non ambulant patients. Mr Verma stated that there were no steps into the building however DDA would be considered with the plans for

the shopfit. Mr Mallinson then enquired if building consent was required and was advised that it was not.

Mrs Dunbar enquired if parking facilities were available. Mr Verma stated that cars tended to park on the Main Road which was large enough to accommodate them and not overly busy with traffic. Mrs Dunbar further enquired as to whether there were any opportunities to provide a formal car park. Mr Verma advised that there was a large expanse of land to the rear of the shop with easy access from both sides. Mrs Dunbar's final question was in connection with the importance of having private areas available for patients and consultation area. Mr Verma agreed and confirmed that the premises would be large enough to provide such facilities.

The Chairman, having ascertained that there were no further questions to Mr Verma, invited Mrs A Irving, Alliance Pharmacy, to state her representation.

Mrs Irving, Alliance Pharmacy thanked the Committee for the opportunity to attend the hearing and present their objections to the application.

Mrs Irving began her representation by stating that Alliance Pharmacy are in agreement with the Area Pharmaceutical Committee and Mr Verma's definition of the neighbourhood as the village of Coalburn. However they do disagree with Mr Verma's interpretation of Lord Nimmo-Smith's ruling on neighbourhood in that they consider that you can consider yourself neighbours of an area further away.

She then stated that Alliance Pharmacy provides Pharmaceutical services from their Pharmacy at 43 Abbeygreen, Lesmahagow, which is only 3.5 miles from the proposed site. Alliance Pharmacy considers that they provide Pharmaceutical services to the residents of Coalburn. The Lesmahagow pharmacy is open 9am to 6pm Monday to Friday and 9am to 5pm on a Saturday. She highlighted that the Pharmacy not only provides all Pharmaceutical services expected under the core contract but additional services also. She also advised that whilst they currently provide consultation services in a quiet area of the shop there are plans to install a consultation room which unfortunately could not be incorporated last year.

Ms Irving contented that Coalburn is not a neighbourhood for all purposes evidenced by the need for residents of the village, as part of the fabric of their daily lives, to leave Coalburn to access services such as Banks, Opticians, Supermarkets, Post Offices,

Secondary Schooling. The village has a social club, one convenience store and a Primary School. The foregoing is evidenced by the availability and frequency of Public transport to Lesmahagow from Coalburn via the number 253 bus which operates every half hour until 5:45pm on a Monday through to Saturday, and the Dial a Bus SPT facility during the hours of 7:00am to 11:30pm Monday to Saturday, and 9:00am to 11:30pm Sunday . The residents of Coalburn currently enjoy the services of Douglasdale Medical Practice in the form of Medical Services and Dispensing Services. Alliance Pharmacy maintains that the granting of this contact in Coalburn is neither necessary or desirable and would ask that the Committee refuse the application.

The Chairman then invited Mr Verma to pose questions to Mrs Irving.

Mr Verma asked Mrs Irving why Alliance Pharmacy Ltd had not installed a consultation area when they purchased the contract. Mrs Irving advised that they had every intention to do so however unexpected problems had arisen, however plans were in place now to have one installed this year and that it was a high priority for them. Mr Sutherland asked how long this would take, and was advised that it would be a quick process as long as no further problems were encountered. Mr Verma asked what arrangements they had for methadone and subutex given the lack of this facility. Mrs Irving advised that they were currently dispensed within the area that they have identified as being the ideal location for the consultation room as the shelving stands afford a certain level of privacy presently.

Mr Verma then asked Mrs Irving why Alliance Pharmacy Ltd considered Lesmahagow a viable location for a Pharmacy but not a similar village such as Coalburn. Mrs Irving replied that it depends upon the facilities available and population of the village and that there are considerably less within Coalburn, with at least a year having to pass before the population increased by a significant level. Mr Verma contended that the plans are in place and that it would be reasonable to expect developments to be in place this year. Mrs Irving responded that whilst site works could commence there was a further timescale involved beyond that as developers would need to build on the cleared site, and market and sell the houses, so some time would elapse before the first occupants moved in. Mr Verma sought confirmation from Mrs Irving that it would make a difference in the future, to which she replied that the Committee could only consider the "here and now" hard facts not what may or may not occur in the future. Mr Verma finished by stating that he

was disappointed that Karen Gillon, MSP was not in attendance to answer questions over the statements she had made within her letter which had been included in the papers for the meeting. Mr Sutherland advised that it was open to Mr Verma to make reference to this within his closing statement.

No questions were posed to Mrs Irving by Dr V Sonthalia, the other Interested Party in attendance, thus the Chairman invited questions from Members of the Committee to Mrs Irving.

Having ascertained that Members did not have any questions for Mrs Irving, the Chairman then invited Dr V Sonthalia, Lanarkshire Medical Committee, to state his representation.

Dr Sonthalia introduced himself and thanked the Committee for giving him the opportunity to present Lanarkshire Medical Committee's objections to the application on behalf of the Area Medical Committee.

Dr Sonthalia stated that he agrees that Coalburn is a very deprived area demonstrated by poor health figures and high unemployment rate. He remarked that Douglasdale Medical Practice is providing a unique service in the area and doing a marvellous job, the neighbourhood does not have enough patients to make a branch surgery viable and that Douglasdale is sustainable only because of the additional income stream derived from the dispensing service. Thus if the contract is awarded and the practice loses dispensing income it would be impossible for the surgery to continue. Dr Sonthalia advised that the practice does not receive any additional funding for the branch surgery and that the Global Sum funding is fixed on historical data. He stated that the response to the questionnaire would be different if residents were asked whether they wanted a Pharmacy or the Medical Practice. Dr Sonthalia commented that he doubted a Pharmacy would be financially viable and survive on the current population with little or no opportunity for passing trade, and thus to grant the contract could have a major destabilising effect on the neighbourhood if the Pharmacy later closed having already lost the medical practice.

The Chairman then invited Mr Verma to pose questions to Dr Sonthalia.

Mr Verma asked what the practice would do when the population increases. Dr Sonthalia stated that he didn't know

however using East Kilbride as an example although there has been a significant amount of housing developments the overall population has not increased. Mr Verma then stated that 20 years ago Kirkmuirhill had a similar population which had risen to 3600, with a similar rise in Lesmahagow, and that the full time compliment of GPs in that area had increased as a result; given those scenarios how could the Douglasdale practice not be viable. Dr Sonthalia replied that the population figures would need to be revisited after 2-3 years but as it stands just now 1200 patients cannot sustain a practice. Mr Verma stated that the new GMS contract requires very few practices to dispense and that they can survive on the additional funding they receive through quality targets, and enquired as to why Douglasdale Medical Practice could only survive because of the income they derive from dispensing. Dr Sonthalia replied that the average list size is 1700 patients so that is why Coalburn cannot support the practice. Mr Verma remarked that the population can be demonstrated to increase in the future, to which Dr Sonthalia replied that that fact is for the PPC to decide.

Mr Sutherland interjected at this point to ask Dr Sonthalia if the Area Medical Committee has economic concerns over the decision of the PPC why don't they consider the positive aspects of the increase in population in the same way as the applicant. Dr Sonthalia replied that the funding was totally beyond NHS Lanarkshire's remit as it was controlled by the Scottish Executive, and that whilst there is extra money available through the Quality and Outcome Framework the Global Sum hasn't changed since 2004 despite the slight change in population. Mr Sutherland asked if this meant that even when populations increase medical practices do not get any financial adjustments until there is a review of funding arrangements. Dr Sonthalia replied that it used to happen yearly however under new GMS contract there is not one due until 2007, and even then it may not result in any additional funding becoming available.

Mr Verma then asked Dr Sonthalia if he knew whether the dispensing service was conducted by the GPs or reception staff. Dr Sonthalia replied that he thought that most dispensing practices employed a Pharmacist. Mr Verma asked again what the arrangements were within Douglasdale Medical Practice. Dr Sonthalia asked Mr Lindsay if he was aware, to which he replied that he was not and sought clarification from Dr Sonthalia as to whether he was confusing the employment of a Pharmacist with a Pharmacist Technician. Mr Verma stated that there were significant safety issues if dispensing services were provided by

unqualified staff, and he queries how busy Gps would have time to dispense in addition to how busy they are with consultations.

No questions were posed to Dr V Sonthalia by Mrs Irving, the other Interested Party in attendance, thus the Chairman invited questions from Members of the Committee to Dr Sonthalia.

Mrs Park asked how many dispensing practices there were within Lanarkshire, and Mr Lindsay replied that there were nine. Mrs Park then asked how the practices cope with dispensing of methadone. Dr Sonthalia advised that it was split between half doing their own with the others utilising the Lanarkshire Drug Service with dispensing within a local Pharmacy, and that whilst he was unaware of the arrangements within Douglasdale medical practice he would assume that since they were a dispensing practice they would do their own.

Mr Mallinson asked Dr Sonthalia for clarification regarding funding for the branch surgery, as he was under the impression that as the branch had been there for some time funding would have been included in the practice's Global Sum, therefore why would the Pharmacy have an impact on sustainability within Coalburn. Dr Sonthalia replied that if the service was withdrawn there would be funding for premises and staff, however without the income derived from dispensing there would be insufficient funds to support the GPs at that site. Mr Mallinson remarked that the practice would retain the branch surgery funding within their Global Sum even if the Coalburn closed, and Dr Sonthalia confirmed that the practice would have the same funds however they would have less surgeries to support. Mr Mallinson asked if this could be construed as blackmail, to which Dr Sonthalia replied that the practice was not saying that the Area Medical Committee were concerned over the financial viability, however the practice could decide to close their Coalburn branch even if the contract was refused.

Mrs Dunbar asked Dr Sonthalia where patients could obtain walking aids etc, and was advised that patients receive physiotherapy services free of charge and that as GPs were not qualified to prescribe compliance/walking aids this would be given via appropriate specialised field e.g. Occupational Health, perhaps at the local hospital. Mrs Dunbar then asked where patients could obtain advice on minor ailments, and Dr Sonthalia replied that advice was available Monday to Friday from the practice or via the cottage hospital at the weekend. Mrs Irving commented that she believed that patients access eMAS via their Pharmacy in Lesmahagow, and Mr Verma stated that he

did not believe that the local GPs would have time to give such advice. Mr Lindsay clarified that eMAS was an integral part of the new Pharmacy contract and as such the service could only be provided via a community pharmacy.

Mr Sutherland asked Dr Sonthalia what the protocol would be with regards to closing a branch surgery. Dr Sonthalia replied that the practice would need to apply to the Board and that there would be a protocol for this, however at the end of the day the practice would consider it strictly a business decision and that he was not aware of any applications being refused in the past. Mr Sutherland asked if he could estimate the timescale for closing a surgery, Dr Sonthalia stated that he could not however he was aware of a Wishaw practice closing its branch surgery and in the end the decision was made purely on financial reasons. Mrs Forsyth, with the approval of the Chairman, explained that NHS Lanarkshire would start consultations in line with their agreed protocol however the decision would not be taken until such times as the Board could be satisfied that proper and sufficient public consultation had taken place and that all avenues for negotiation and alternatives had been explored. Mr Verma stated that Karen Gillon, MSP had met with residents and has advised that the practice would close if the contract was granted and again it was a pity that she was not here to answer questions with regards to her comments. Mrs Forsyth advised that whilst Karen Gillon, MSP was clearly not disinterested she was not an interested party in terms of the current Pharmaceutical Regulations and therefore excluded from the statutory consultation process.

Having ascertained that there were no further questions, the Chairman invited Mrs Irving, Alliance Pharmacy, to sum up her representation.

Mrs Irving stated that there had been no evidence presented to support that it was necessary or desirable to grant the application and that Alliance Pharmacy ask that it be refused on those grounds.

Dr Sonthalia, Lanarkshire Medical Committee, was invited to sum up his representation.

Dr Sonthalia stated that the Lanarkshire Medical Committee had serious concerns over the destabilising effect that the award of a pharmaceutical contract would have on the practice and thus healthcare provision in local area, and that it was important for residents of Coalburn to have a good stable medical practice providing care.

Finally, Mr Verma gave his summary in relation to the application.

Mr Verma acknowledged that it would be hard for a GP practice to change however in the long term it would be beneficial to the community if it has a Pharmacy, which may also attract other services. He is of the opinion that not only can the current population sustain a Pharmacy but that the future planned housing developments will only increase this sustainability and that it would be a disappointment if the existing branch surgery closed. Mr Verma highlighted that he would have appreciated the opportunity for Karen Gillon to attend in order to be able to take into account the benefits available under the new Pharmacy contract alongside those contained within the new General Medical Services contract in isolation. Mr Verma finished by stating that he feels that the residents of Coalburn, a highly deprived area, deserve a chance to benefit from a Pharmaceutical service in their neighbourhood.

(f) **Retiral of Parties**

The Chairman then invited the Applicant and Interest Parties to confirm whether or not they had received a fair hearing, and that there was nothing further they wished to add.

Having being advised that all parties present were satisfied, the Chairman then informed them that the Committee would consider the application and their representations and make a determination, and that a written decision with reasons would be prepared, and a copy sent to them as soon as possible. Parties were also advised that anyone wishing to appeal against the decision of the Committee would be informed in the letter as to how to do so and the time limits involved.

At the Chairman's request the Applicant and Interested Parties withdrew from the meeting

(g) **Supplementary Submissions**

Following consideration of the oral evidence

THE COMMITTEE

noted:

- (i) that members of the Committee had elected to undertake visits to the proposed site independently at a time most convenient for them
- (ii) map of Coalburn displaying site of proposed Pharmacy and surrounding villages
- (iii) prescribing statistics of the Doctors within Kirkmuirhill, Lesmahagow, and Douglasdale Medical Practice during quarter ended 31st July 2006
- (iv) the dispensing statistics of the Pharmacies and Dispensing Practices in Kirkmuirhill, Douglas, and Lesmahagow for the quarter ended 31st June 2006
- (v) demographic information on Coalburn, Douglas, and Lesmahagow taken from the 2001 Census
- (vi) comments received in writing from Interested Parties during the consultation period
- (vii) information containing the range of Pharmaceutical Services provided by contractors in the neighbouring villages and townships of Larkhall, Lesmahagow, Lanark, Kirkmuirhill, and Douglas
- (viii) copies of correspondence received from Karen Gillon MSP and Mr Robert Wilson

(h) **Decision**

THE COMMITTEE

discussed at length the oral representations of both the Applicant and the Interested Parties, and the content of the supplementary submissions received, (including additional correspondence submitted by Karen Gillon, MSP, and Robert Wilson, in his capacity of Vice-Chair Clydesdale United in Health, a member of Patient Participation Group of Douglasdale Medical Practice, and Secretary of Scottish Charity "Friends of Lady Home Hospital), prior to considering the following factors in the order of the statutory test contained within Regulations 5(10) of The National Health Service (Pharmaceutical Services) (Scotland) Regulations 1995, as amended

(i) **Neighbourhood**

THE COMMITTEE

deemed the neighbourhood in which the proposed premises were located to be the village of Coalburn. In reaching its definition the Committee noted that this decision was in keeping with the general agreement of the interested parties in attendance, and concurred with the Area Pharmaceutical Committee.

(ii) **Existing Services**

prior to considering existing services within the neighbourhood

THE COMMITTEE

paid due regard to the requirements of the statutory test which specifies that the granting of applications should be made only when it can be satisfied that the provision of pharmaceutical services at the premises is necessary or desirable in order to secure adequate provision of those services by "persons whose names are included in the Pharmaceutical List" which thus excludes the dispensing services provided by Douglasdale Medical Practice

THE COMMITTEE

noted that there were no existing Pharmaceutical contractors in Coalburn, however Alliance Pharmacy was located in Lesmahagow some 3.5 miles away, and that Douglasdale Medical Practice had a branch surgery located within the neighbourhood.

(iii) **Adequacy**

THE COMMITTEE

in considering adequacy noted that there had been no objections or complaints received by NHS Lanarkshire concerning the lack of provision of Pharmaceutical Services, or access to, by residents of the neighbourhood. They also noted comments received in the form of correspondence from Karen Gillon and Robert Wilson, however were mindful that the Committee's remit was bound by the statutory test which excludes consideration of services by dispensing doctors as they are not included in the Pharmaceutical List.

from the independent site visits and evidence presented during the hearing by the applicant and interested parties, it was clear that there were very few services available within the neighbourhood and that residents required to travel outwith to access many facilities associated with the fabric of daily life. They also noted that there was a regular bus service, including Dial a Bus facility, to outwith the village which would be the only means for many of the residents gaining access to the range and breadth of Pharmaceutical Services provided by Alliance Pharmacy, Lesmahagow.

THE COMMITTEE

also referred to statistics taken from 2001 Census, and SCROL Data referred to by the applicant, which indicated that the neighbourhood was a deprived area in comparison with the Scottish national average.

THE COMMITTEE

paying due regard to the above, agreed that there were no existing services within the neighbourhood, and that pharmaceutical services to residents of the neighbourhood could only be reached after negotiating a car or bus journey to Lesmahagow, which would be difficult for non ambulant and elderly patients or nursing mothers with young children. Thus for those reasons services could not be considered adequate.

(iv) **Necessity**

In considering the factor of necessity

THE COMMITTEE

was mindful of their remit with regards to the provision of an adequate pharmaceutical service, and thus could not take account issues regarding viability or other consequences resulting from their consideration of the statutory test. Accordingly, recalling universal agreement that services within the neighbourhood were inadequate, and that services outwith the neighbourhood were only available to those able to travel outwith, Members were of the opinion that evidence had been presented to suggest that a pharmaceutical contract was necessary to provide an adequate Pharmaceutical service.

(v) **Desirability**

In considering the factor of desirability

THE COMMITTEE

were conscious that evidence had been demonstrated to suggest that there was a necessity for a pharmaceutical contract to be awarded, as current provision to the neighbourhood was inadequate.

Following the withdrawal of Mrs J Park, in accordance with the procedure on applications contained within Paragraph 6, Schedule 4 of the National Health Service (Pharmaceutical Services)(Scotland) Regulations 1995, as amended.

THE COMMITTEE

voted unanimously that the award of a Pharmaceutical contract was necessary to secure adequate Pharmaceutical Services within the neighbourhood, and agreed to reject the application subject to the right of appeal as specified in Paragraph 4.1, Schedule 3 of the National Health Service (Pharmaceutical Services)(Scotland) Regulations 1995, as amended.

Mrs Park returned to the meeting.