### IN CONFIDENCE – FOR MEMBERS' INFORMATION ONLY

### MINUTE: PPC/07/173

Minute of Meeting of the Pharmacy Practices Committee held on Tuesday 13<sup>th</sup> November, 2007 in the Main Meeting room. Law House, Airdrie Road, Carluke

Chairman: Mr Bill Sutherland

#### Present: Lay Members Appointed by the Board

Mr William McConnell Professor Gordon Wilson

<u>Pharmacist Appointed by The Royal Pharmaceutical Society of</u> <u>Great Britain</u>

Mr Edward H Mallinson

Pharmacist Nominated by Area Pharmaceutical Committee

Mrs Janet Park Mr Iain Allan

#### Attending: Officers from NHS Lanarkshire - Primary Care

Mr George Lindsay, Chief Pharmacist Ms Andrea Harrison, Administration Team Leader Ms Lea Ann Tannock, Personal Secretary

#### 173 APPLICATION BY APPLE PHARMACY, 14 BALMALLOCH ROAD, KILSYTH

- (a) There was submitted application by Apple Pharmacy Group, received 28<sup>th</sup> March, 2007, for inclusion in NHS Lanarkshire's Pharmaceutical List
- (b) **Submissions of Interested Parties**

The undernoted documents were submitted:

Letter received 5<sup>th</sup> April, 2007 from Alliance Pharmacy

Letter received 25<sup>th</sup> April, 2007 from Area Pharmaceutical Committee Letter received 25<sup>th</sup> April, 2007 from M Farren Ltd Letter received 26<sup>th</sup> April, 2007 from National Co-operative Chemists Letter received by fax 27<sup>th</sup> April, 2007 from NHS Greater Glasgow & Clyde GP Sub-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. 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 attendees to confirm that the 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 Apple Pharmacy Group, 15 Ballmalloch Road, Kilsyth, G65 9NG, according to the Statutory Test set out in Regulation 5(10) of The National Health Service (Pharmaceutical Services)(Scotland) Regulations, as amended (the Regulations), and confirmed that the members of the Committee had carried out site visits of the proposed neighbourhood and surrounding areas including the proposed premises, GP surgery and local pharmacies, using the guidelines for conducting a sight visit, developed by Mr B Sutherland, Chairman and Mr G Lindsay, Chief Pharmacist.

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 Apple Pharmacy Group, represented by Mr H Shergill was in attendance with his representative Mr M Salwan. Interested parties who were entitled to and did attend the hearing were M Farren Ltd represented by Mrs M Wilkinson accompanied by Mr J Wilkinson, National Co-operative Chemists represented by Mr S Brooker and Alliance Pharmacy represented by Ms H Copeland ("Interested Parties")

### (e) Evidence Led

The Chairman then invited Mr Shergill to speak first in support of his application.

Mr Shergill began his presentation by defining his proposed neighbourhood as the area of Balmalloch, with the western boundary being Balcastle Road, the northern boundary being the open land above Kilsyth, the eastern boundary being Hill Road coming down to join the southern boundary at the A803 (Glasgow Road). Mr Shergill stated that that these boundaries were natural or real boundaries which were already in place.

He then continued by stating that the population of the neighbourhood, or indeed the greater area of Kilsyth, had no easy access to pharmaceutical services as the existing services were all placed in the same street which was pedestrianised with no motor vehicles allowed. Mr Shergill said that this was unacceptable to those patients most in need of healthcare and advice as they had to either park their cars in one of the car parks and walk to the Main Street or use the bus services, for which the stops were not near the any of the pharmacies. Mr Shergill went on to state that the granting of this application would not compromise the viability of the existing pharmacy provision, as all three pharmacies were still closer to the health centre than the proposed pharmacy, and he did not think that the proximity of the surgery to the proposed pharmacy would affect his viability due to the new pharmacy contract and future electronic prescriptions.

Mr Shergill went on to state that the facilities in the proposed neighbourhood included schools, a fast food outlet, a hairdresser and a general store. He continued that although the residents of the neighbourhood would travel into Kilsyth town centre to access supermarkets etc. this would not be on a daily basis. He used the example of the Post Office to highlight this fact, asking that even though the Post Office, which was situated in the Main Street, was regarded as a necessity of daily life, how many people still actually used a Post Office in this day and age.

Mr Shergill then went on to discuss access to the proposed premises, stating that although there was a steep hill in front of the proposed premises, he felt that access would not be difficult as they would walk down the hill, although he stated that walking up the hill would be slightly more difficult. However, he stated that he intended to offer a delivery and collection service for patients in the area, whereby he would pick patients up and transport them to the pharmacy enabling him to use his consultation room for it's designated purpose.

Mr Shergill then went on to comment on the adequacy of the current services, stating that Kilsyth Health Centre has a patient list of 14, 000 patients and only one pharmacy in the area has a consultation room, which he felt was unacceptable as the new NHS contract states that a consultation room is an important requirement to be able to undertake the services required. Mr Shergill stated that the distance from existing pharmacies was not the question and that dilution of services in Kilsyth was not Apple Pharmacy's intention, indeed enhancing services to a required level was their intention. Mr Shergill the stated that it was necessary to grant the application as the existing service provision was not adequate, and that it was also desirable for the residents of his neighbourhood that the application be granted at the moment they would have to travel to the town centre to access any kind of healthcare.

# The Chairman then invited questions from Interested Parties to Mr Shergill

Mrs Wilkinson was first to put her questions to Mr Shergill. asking him what the size of the proposed unit was. Mr Shergill replied that it was approximately 700 square feet and that a shopfitter had been in to make sure there was enough room for a consultation room. Mr Brooker was next to put questions to Mr Shergill, asking that if the West boundary of his neighbourhood was Balcastle Road, which neighbourhood would Laird Hill Road, Laird Hill Court and South Dumbreck Road fall into. Mr Shergill replied that residents in these areas would be more likely to access his premises via the main road. However, he said he would stick to his original boundaries for the definition of the neighbourhood. Mr Brooker then asked Mr Shergill to define "not close to the bus stop". Mr Shergill explained that the bus stops were not close to the pharmacies and it would not be easy for residents to walk from the bus stop to the pharmacies because there were no paths in this part of the road. Mr Brooker then asked if it would be acceptable for residents to walk from Balcastle Road to the proposed pharmacy. Mr Shergill said yes, this would be easier to walk to. Mr Brooker then said that the Mr Shergill had stated that people do not use the Post Office and supermarkets on a daily basis and asked Mr Shergill if he thought people accessed pharmacy services on a daily basis to which Mr Shergill replied they would probably make a special trip to visit a pharmacy. Mr Brooker then asked if this would coincide with a visit to the Health Centre to pick up a prescription. Mr Shergill answered no, and that prescriptions could be picked up by collection and delivery Mr Brooker then asked Mr Sheraill what services. pharmaceutical services he thought were not currently available in Kilsyth. Mr Shergill answered that he was not aware of any services which were not available.

Ms Copeland was last to put her questions to Mr Shergill. She began by asking what the proposed neighbourhood population was. He replied approximately 3,500 taken from the 2001 Census for Queenzieburn and Kilsyth West. Ms Copeland stated that Queenzieburn was not included in his defined neighbourhood. He replied no it wasn't but it only had about five streets. Ms Copeland then asked if residents would have to walk up or down a hill to access the proposed premises. Ms Shergill said yes, but that there was a bus to and from the town centre which dropped patients right at the door of the premises. Ms Copeland then asked where the bus stopped in the town centre to which Mr Shergill answered close to the town centre. Ms Copeland stated that the bus stopped on either side of the road and the town

centre was virtually flat and not in the middle of a steep hill. Mr Shergill continued that the bus stopped outside the factory outlet store but that there was no street lighting there or in the car parks, but he did agree that it was a flat road to the other pharmacy contractors. Ms Copeland stated that in the initial application it was stated that there was no adequate transport system to travel outwith the neighbourhood and asked Mr Shergill if he still agreed with that statement. Mr Shergill answered yes but that he would be providing a patient delivery and collection service. Ms Copeland asked what this was. Mr Shergill explained that they would collect the patient, bring them to the premises and then take them home. Ms Copeland then asked if the proposed premises had disabled access. Mr Shergill replied no, but that he intended to fit a concrete ramp at the back of the premises. Ms Copeland then asked whether the quickest access was by the steps at the side of the premises to which Mr Shergill replied not for the disabled. Ms Copeland said that that the slope at the side was quite steep and the sign in the car park behind the premises stated for residents only and asked where the disabled spaces were, adding that there was plenty of disabled parking in the town centre. Mr Shergill stated that there was no lineage down yet for disabled parking spaces. Ms Copeland then asked how long it would take to walk to the town centre from the proposed premises. Mr Shergill stated about 15 minutes. Ms Copeland then asked if Mr Shergill thought this was acceptable. Mr Shergill replied not for the elderly or when someone needed healthcare advice. Ms Copeland concluded by asking whether they should not be encouraging people to walk, to which Mr Shergill replied not if they can't.

## The Chairman then invited questions from Members of the Committee to Mr Shergill

Mr Allan was first to put questions to Mr Shergill. He began by asking him to identify exactly which of the units was the proposed pharmacy in the row of shop units, as he had been unable to identify which one it was during the sight visit. Mr Shergill replied it was the hairdresser's unit at the moment. Mr Allan explained that all the units had the same address. He then asked Mr Shergill to confirm the size of the unit to which he replied 600 or 700 square feet. Mrs Park was next to guestion Mr Shergill. She asked what the size of area would be for both the consultation and the dispensing areas. Mr Shergill replied that the consultation area would be approximately 200 square feet and the dispensing area would be 300 square feet. Mrs Park then stated that on his initial application Mr Shergill had stated that they had a firm commitment from the landlord for the lease of the premises and asked if he had anything in writing from the landlord committing to the lease of the premises. Mr Shergill replied no as the initial application was made in March and the landlord did not want to make a commitment at that time and lose the present occupants of the premises, the hairdresser. He continued by stating that the hairdresser was on a monthly lease at the moment, and would move to another unit if their application was granted. Mrs Park then asked Mr Shergill to clarify how their patient delivery and collection service would operate. Mr Shergill stated that there would be a free-phone number for patients to dial and a driver would come and pick them up and that the service would be advertised through the local newspaper.

Mr Mallinson then asked about the proposed opening hours and asked if they would provide a Sunday service. Mr Shergill said they would in the future if there was a need for this service. Mr Mallinson asked how they would determine if there was a need to which Mr Shergill replied through the GPs and the health board. Mr Mallinson asked Mr Shergill what services they intended to provide. Mr Shergill replied all the model schemes as well as buprenorphine, healthy eating advice, head lice programme and Nicotine Replacement Therapy and blood pressure checks. Mr Mallinson then asked if they intended to provide any of NHS Lanarkshire's model schemes such as needle and syringe and methadone services. Mr Shergill replied yes if they were allowed to provide them. Mr Mallinson asked Mr Shergill what research he had carried out to find out what model schemes were provided in NHS Lanarkshire, as they were slightly different from those provided in Glasgow. Mr Shergill stated that he had spoken to friends about what was expected in Lanarkshire. Mr Mallinson then asked whether Mr Shergill thought the health board should approach him to provide services or whether he should approach the health board with a list of services he wished to provide. Mr Shergill again listed the aforementioned services he would provide. Mr Mallinson then stated again that these were provided in Glasgow but not in Lanarkshire and asked what Lanarkshire services he would provide. Mr Shergill stated that he would have to research this.

Mr McConnell stated that he considered Kilsyth itself to be to be a small enough town to be a neighbourhood in it's own right and asked Mr Shergill if he agreed. Mr Shergill said he agreed that this would be right on paper, but said that it could be divided into rural areas etc. Mr McConnell then said that during his sight visit, he had noted significant differences in the types of housing in Balmalloch Road and Kingston Road. Mr Shergill agreed that this was so. Mr McConnell then asked Mr Shergill if he thought that residents would walk up the hill to access his pharmacy. Mr Shergill replied yes, if they required a consultation.

Professor Wilson then asked Mr Shergill for clarification on the lease of the premises, as he had stated in the initial application that he had a firm commitment from the landlord, but Professor Wilson said that he had spoken to the landlord during his sight visit, and had been told by him that he was not aware of a pharmacy application for the proposed premises. Professor Wilson added that he had also been in the Hairdresser's unit and spoken to the owner, who had replied that she had a year's lease on the premises. Mr Shergill replied that he had spoken to the landlord the previous week and had received a firm commitment from him. Professor Wilson stated that obviously there was some confusion over this point and that he was surprised that the landlord had denied any knowledge of a pharmacy contract to which Mr Shergill replied that he too was surprised by the landlord's statement. Professor Wilson then went on to say that Mr Shergill has stated that the bus service to the town centre was not adequate and asked him to clarify exactly where the bus stopped nearest to the Main Street. Mr Shergill replied that the nearest stop to the Main Street was at the end of Archway, off left of the Main Street, and that there was no street lighting in Archway nor was there a pavement at one side of the street. Professor Wilson then asked Mr Shergill if he had any information concerning deprivation in the Ballmalloch area, and whether he thought it was more or less deprived than the rest of Kilsyth. Mr Shergill replied that he did not have any information on this subject but from looking at the housing in the area it was more deprived.

Mr Sutherland then asked what evidence Mr Shergill had received from residents in the neighbourhood that there was a demand for a pharmacy. Mr Shergill replied that he had not spoken to the residents of the neighbourhood, only the landlord of the proposed premises. Mr Sutherland then asked Mr Shergill what staff he intended to employ if the application were granted. Mr Shergill replied that apart from himself, he would have a counter assistant and a checking technician working for him. Mr Sutherland then asked how he would operate his delivery and collection service if this was all the staff he intended to employ. Mr Shergill answered that he would also employ a local driver for this service.

The Chairman, having ascertained that there were no further questions to Mr Shergill, then asked that no one had any objection to questions being put to the Interested Parties after all had made their presentations in turn. After ascertaining that there were no objections to this the Chairman invited the Interested Parties to state their representations in turn

Mrs M Wilkinson, M Farren Ltd was first to make her representations by stating that she considered the neighbourhood to be Kilsyth itself, as it was too small to be split into neighbourhoods and that this was the view of NHS Lanarkshire's Area Pharmaceutical Committee in relation to this application. She then went on to consider the existing services in the area, stating that the level of service provided by the three existing pharmacies in the areas was considered adequate as stated by NHS Lanarkshire in the Range of Pharmaceutical Services document circulated along with the papers for the Hearing and also by the Area Pharmaceutical Committee. Mrs Wilkinson further stated that all pharmaceutical services which could reasonably be expected to be provided in the area, were provided and, indeed, all three pharmacies were making strenuous efforts to ensure that the pharmaceutical services they provided not

only met but exceeded the minimum standards required. Mrs Wilkinson added that no complaints had been received at their pharmacy from patients voicing concerns about the adequacy of the services provided. Mrs Wilkinson then went on to discuss access to the pharmaceutical services in the town centre by stating that a local bus company ran two bus services, one of which runs every 30 minutes, Monday to Saturday inclusive, to and from the town centre and the other runs every 20 minutes to and from Cumbernauld via the town centre also Monday to Saturday inclusive. She added that there were also buses which ran along the main road route, to and from Glasgow, which were easily accessed along the main road, only a 5-10 minute walk from Ballmalloch Road, and that at least one bus stop was within approximately 50 metres of the nearest pharmacy. Mrs Wilkinson went on to state that there were also at least 3 controlled pedestrian crossings along the main road in and out of Kilsyth to make pedestrian access to the town centre easier. She continued that the main shopping area within Kilsyth was located in and around the Main Street where there is a range of shops including a supermarket, fishmonger, newsagent, café, Post Office, bank, bakery and butcher shop, and that the Health Centre at Burngreen was a short distance away, and easily accessed either by foot or by car. She went on to say that the town centre was well provided with car parking areas, access routes and dedicated parking for disabled residents in a mainly flat, level area, and that there had been considerable investment by local authorities in rejuvenating and upgrading the centre of Kilsyth and that it was in the best interests of the local community to consolidate and not dilute the effects of the town centre regeneration project. Mrs Wilkinson concluded by stating that M Farren Ltd was a well established pharmacy, having serviced the people of Kilsyth since before the First World War, and that the other two pharmacies were also of long and reputable establishment.

Mr S Brooker, National Co-operative Chemists, was next to make his representations to the Committee. He began by stating that a neighbourhood was defined as a place where people living there considered themselves to be neighbours to each other, and that there was no evidence for the neighbourhood to be anything other than Kilsyth, and

furthermore, there was a mixture of different housing styles and social classes in Kilsyth but with no distinct areas. He went on to discuss access to the town by Glasgow Road saying that although it was a busy main road at rush hour, there were many controlled crossings for pedestrians. He then continued by stating that the majority of employers in Kilsyth were situated in either Burnside Industrial Estate or the town centre, which were adjacent to each other and close to the pharmaceutical services available. Mr Brooker then referred to the information taken from the 2001 Census which stated that 70% of the population travelled by bus, car or foot, therefore travel was not an issue. Mr Brooker then stated that Mr Shergill had not provided any evidence or data along with his application to indicate that a further pharmaceutical contract was required in the area, and that there was little logic in the neighbourhood boundaries defined by the applicant. Mr Brooker then stated that the UK average for population per pharmacy was 5,000 and that as the Kilsyth average was less than this number per pharmacy, the population was well served by the existing services. Mr Brooker then reiterated that travel was not an issue for Kilsyth residents as there was good car parking facilities within the town centre and also good bus services, with a bus stop within 50 metres of the nearest pharmacy. He then continued by stating that there was no evidence of inadequacy of existing services, and that as far as desirability was concerned, while there was a dilution of services in the town centre, services shouldn't be taken from an area that requires it to be put in an area that does not need it. Furthermore, there were no gaps in the pharmaceutical services provided to Kilsyth residents and the applicant had not provided evidence to the contrary and even although there was only one consultation room, there was no evidence that one was inadequate. Mr Brooker then went on to state that the location of the proposed premises was in a small shopping precinct which was in economic decline due to lack of use and funding for improvements, and that there was no requirement for another pharmacy contract as the existing pharmacies were located for easiest access, were closer to the GP practice and were located close to other daily facilities. Mr Brooker quoted Mr Shergill as saying Post Offices will not be used everyday, and added that neither would a pharmacy be accessed on a daily basis. Mr Brooker concluded by saying that population density of the area was probably highest around the town centre.

Ms Copeland, Alliance Pharmacy, was last to make her representations to the Committee. She commenced by stating that she considered the neighbourhood to be that of the town of Kilsyth, bordered by the Kilsyth Hills to the North and the River Kelvin and Forth & Clyde Canal to the South. She went on to say that it was a small, well established town with a population of approximately 10,000 as stated in the 2001 Census, which would not have changed dramatically since then as there had been no significant house building in or around the town. She went on to state that there were three pharmacies in the area which serve the population well and Alliance Pharmacy had been established in the town for over 50 years and, therefore, had a loyal customer base. Furthermore, it was situated in the pedestrian main street, which most residents would access to meet all their daily needs such as the bank, supermarket, Post Office etc. as well as other healthcare services. Ms Copeland went on to say that there were two free car parks in this area with spaces for over 150 cars, and disabled parking, and that Alliance Pharmacy was accessible for wheelchair users. She went on to state that she believed the service provided by Alliance Pharmacy was more than adequate and although they did not have a consultation area, a guiet area was available if required. Ms Copeland stated that if there was any shortfall in the existing services, Alliance would endeavour to provide the services required to bridge the shortfall. She added that Alliance were to upgrade most of their stores within a two year period but that she was not sure where Kilsyth would be in that plan. Ms Copeland concluded by asking the Committee to reject the application as being unnecessary as pharmaceutical services were well provided for by the three existing pharmacies in Kilsyth.

# The Chairman then invited questions from the Applicant, to the interested parties.

Mr Shergill commenced by asking Mrs Wilkinson to clarify where the three crossings were on the main road. Mrs Wilkinson replied that one was on Glasgow Road at Ballmalloch Road, one near Corrie Brae at the other side of the roundabout and one at Parkfoot where the road turns

into Kingston Road. Mr Shergill then asked Mrs Wilkinson whether there were pavements on both sides of the road from Ballmalloch Road to the town centre. Mrs Wilkinson answered yes. Mr Shergill then asked what she would do if a patient needed a consultation. Mrs Wilkinson replied that they could not extend their shop as it was constrained by Scottish Heritage listing and she would refer them to another pharmacy if necessary. Mr Shergill then asked if any of them knew how many people were using cars to leave Kilsyth to travel to work. Mr Brooker answered that they could not make this assumption. Mr Shergill answered that according to the 2001 Census, 70% of the population were travelling to go to work or study. Mr Brooker answered that statistics above that stated that some had 2 or 3 cars. Mr Shergill then asked Mr Brooker if he had deduced that the location was in decline just from looking at the outside of the premises to which Mr Brooker answered Mr Shergill then asked if Mr Brooker thought the ves. housing in the neighbourhood was different from that near the town centre. Mr Brooker stated that there was not much difference and that there was big mix in housing but no distinctive differences.

## No further questions were posed to the Interested Parties by the Applicant

# The Chairman then invited questions from the Members of the Committee to the Interested Parties

Mr Allan had no questions to put to the interested parties.

Mrs Park then asked if any parties knew if there were any plans for redevelopment of the area. Mrs Wilkinson answered that it had been fairly static but there had been some submissions in the Banknock area.

Mr Mallinson then asked Ms Copeland if she had a timescale for the upgrade of the Kilsyth pharmacy, to which she replied that it would be within two years but she did not have a specific date.

Mc McConnell had no questions to put to the interested parties.

Professor Wilson then asked all interested parties if they thought a new pharmacy would be of benefit to an area in economic decline. Mr Brooker replied that he didn't think it would make enough profit to allow the landlord to reinvest in the property. Professor Wilson asked all parties if they thought it would be better for single mothers with prams to access the proposed pharmacy rather than walking down to the town centre. Mrs Wilkinson replied they would have to anyway to access other facilities, and that this would be the case whether the area was more or less deprived. Ms Copeland added that although the area looked a little rundown it was not an area of severe deprivation and was typical of some Lanarkshire areas, and also that there were a lot of cars parked in the area when she had been there. She added that the Committee should look at the bigger picture and the services already provided. Mr Brooker added that this was a typical journey the residents made and they took it in their stride.

Mr Sutherland then asked Ms Copeland where her East and West boundaries would be, as she had given the North and South boundaries. Ms Copeland answered that the West would be Balcastle Road and to the East it was estates and countryside. Mr Sutherland then asked if Queenzieburn Industrial Estate was in Kilsyth. Mr Brooker stated that it was not in the neighbourhood

### Having ascertained that there were no further questions, the chairman then invited each of Interested Parties to sum up their representations in turn

Mrs Wilkinson was first to give her summation and stated that she just wanted to reiterate all the points that had made and that the application be rejected as the existing pharmaceutical services were sufficient and adequate.

Mr Brooker then provided his summation by stating that there had been no evidence of inadequacy in the supply of pharmaceutical provision and therefore, the application should not be granted.

Ms Copeland was last to give her summation and stated that she agreed with Mrs Wilkinson and Mr Brooker's comments

and also that she felt that the neighbourhood was the town of Kilsyth which was adequately provided for by the existing pharmacies.

# Mr Shergill was then invited to sum up in relation to his application

Mr Shergill began his summation by stating that the neighbourhood be defined as the area of Ballmalloch. He continued by stating that the existing pharmaceutical services were not easily accessible to residents and that the viability of the existing contractors would not be compromised by the granting of this application. He concluded by stating that the residents in Kilsyth did not have adequate pharmaceutical provision and therefore, he asked that the application be approved.

## (f) <u>Retiral of Parties</u>

The Chairman then invited the Applicant and Interest Parties to confirm that they had received a fair hearing, and that there was nothing further they wished to add.

Having being advised that all parties were satisfied, the Chairman then informed the Applicant and Interested Parties 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:

- that members of the Committee undertaken separate sight visits using the protocol designed by the Chairman and NHS Lanarkshire's Chief Pharmacist as guidance
- (ii) the location of the existing Pharmacies in Kilsyth to the site of the proposed pharmacy
- (iii) prescribing statistics of the Doctors within Cumbernauld and Kilsyth from the period April-June 2007
- (iv) the dispensing statistics of the existing Pharmacies in Cumbernauld and Kilsyth for the period April-June 2007
- (v) demographic information on Kilsyth taken from the 2001 Census
- (vi) Comments received from Interested Parties
- (vii) Information containing the range of Pharmaceutical Services provided by existing contractors within Kilsyth

## (h) <u>Decision</u>

## THE COMMITTEE

then discussed at length the oral representations of both the Applicant and the Interested Parties, and the content of the supplementary submissions received, prior to considering the following factors in the order of the Statutory Test contained within Regulation 5(10) of The National Health Service (Pharmaceutical Services) (Scotland) Regulations 1995, as amended

(i) <u>Neighbourhood</u>

## THE COMMITTEE

following deliberation concurred with the Area Pharmaceutical Committee's definition of the neighbourhood being that of the town of Kilsyth bounded to the West by where the houses ended on Stirling Road, the River Kelvin to the South, the open fields to the North, and to the East, where the houses ended on Glasgow Road. In reaching its definition of the neighbourhood Members considered that the town of Kilsyth was not large enough area to be subdivided into smaller neighbourhoods.

(ii) <u>Existing Services</u>

### THE COMMITTEE

noted that there were already three existing Pharmacies in the Town Centre, serving a limited residential population. The existing pharmacies were deemed to provide all services which could be reasonably expected, and as detailed in the previously circulated Range of Pharmaceutical Services, with the exception of a needle and syringe exchange service, although it was noted that this service was available in a fixed site in nearby Cumbernauld. Furthermore, it was deemed that residents would be inclined to access pharmaceutical services in the Town Centre, whilst going about their weekly activities in accessing banking facilities, Post Office and supermarkets which are located in or nearby the Town Centre. It was agreed that there was no barrier to accessing such services given the regular, local bus services into the Town Centre

(iii) <u>Adequacy</u>

### THE COMMITTEE

in considering adequacy paid due regard to the following factors:

- that there had been no objections or complaints received by NHS Lanarkshire concerning the lack of provision Pharmaceutical Services by residents of the neighbourhood or surrounding areas.
- there had been no objective evidence provided by the applicant to suggest that services to the neighbourhood were not adequate.

Accordingly, The Committee deemed services available to patients within the neighbourhood could be considered adequate.

(iv) <u>Necessity</u>

In discussing the necessity for an additional Pharmaceutical Contract

#### THE COMMITTEE

reviewed the existing, comprehensive Pharmaceutical Provision and standards against the criteria for adequacy, and was of the opinion that it was not necessary to provide a new contract in order to secure an adequate Pharmaceutical service.

(v) Desirability

In considering the factor of desirability for an additional Pharmaceutical Contract

### THE COMMITTEE

was conscious that services were deemed adequate and accessible, and acknowledged that the applicant had not produced any documented evidence to suggest otherwise. Members were also mindful to ensure that they differentiated between the concept of desirability for adequacy, not convenience, and that existing Pharmaceutical provision could be judged adequate.

Following the withdrawal of Mrs J Park and Mr I Allan, 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

was unanimous in it's decision that an additional contract was neither necessary nor desirable 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 J Park and Mr I Allan returned to the meeting