

**IN CONFIDENCE – FOR MEMBERS’ INFORMATION ONLY**

**MINUTE: PPC/09/08**

Minute of Meeting of the Pharmacy Practices Committee held on Thursday, 22<sup>nd</sup> October 2009 in Meeting Room 1, Law House, Airdrie Road, Carluke, ML8 5ER.

Chair: Mrs Sandra Smith

Present: Lay Members Appointed by the Board

Mrs Margaret Carahar  
Mr James Murray  
Mr Charles Sargent

Pharmacist Appointed by The Royal Pharmaceutical Society of Great Britain

Mr E J H Mallinson

Pharmacist Nominated by Area Pharmaceutical Committee

Mr Parvez Aslam  
Mr Iain Allan

In Attendance: Officers from NHS Lanarkshire - Primary Care

Mr G Lindsay, Chief Pharmacist – Primary Care  
Mrs G Forsyth, Administration Manager – Primary Care  
Miss L A Tannock, Personal Secretary – Primary Care

**08** **APPLICATION BY APPLE PHARMACY, 23 CROW ROAD,  
GLASGOW, G11 7RT**

**Application**

There was submitted application by Apple Pharmacy, received 6<sup>th</sup> May 2008, for inclusion in the Pharmaceutical List of Lanarkshire Health Board in respect of a new pharmacy at 31 Lauchope Street, Chapelhall, Airdrie, ML6 8SW (“the premises”).

**Submissions of Interested Parties**

The following documents were received during the period of consultation and submitted:

1. Letter received from Health Pharmacy Ltd on 16<sup>th</sup> May 2008
2. Letter received by e-mail from TLC Pharmacy Group on 20<sup>th</sup> May 2008
3. Letter received from Boots UK Ltd on 21<sup>st</sup> May 2008

4. Letter received by fax from Area Pharmaceutical Committee of Lanarkshire Health Board on 29<sup>th</sup> May 2008
5. Letter received by e-mail from Area Medical Committee – GP Sub Committee of Lanarkshire Health Board on 30<sup>th</sup> May 2008
6. Letter received from Lloyds Pharmacy Ltd on 9<sup>th</sup> June 2008
7. Letter received from Sinclair Shops Ltd on 9<sup>th</sup> June 2008
8. Letter received from Monklands Pharmacy on 10<sup>th</sup> June 2008

## **Procedure**

At 10:15 hours on Thursday 22<sup>nd</sup> October 2009, the Pharmacy Practices Committee (“the Committee”) convened to hear application by Apple Pharmacy (“the applicant”). The hearing was convened under paragraph 2 of Schedule 3 of The National Health Service (Pharmaceutical Services)(Scotland) Regulations 2009, (S.S.I. 2009 No. 183) (“the Regulations”). In terms of paragraph 2(2) of Schedule 4 of the Regulations, the Committee, exercising the function on behalf of the Board, shall “determine any application in such manner as it thinks fit”. In terms of Regulation 5(10) of the Regulations, the question for the Committee is whether “the provision of pharmaceutical services at the premises named in the application is necessary or desirable in order to secure adequate provision of pharmaceutical services in the neighbourhood in which the premises are located by persons whose names are included in the Pharmaceutical List”.

It was noted that all Members of the Committee had previously undertaken a site visit of the village of Chapelhall and surrounds independently in order to gain a flavour of the natural patterns of travel of residents and visitors during various times of the day and week. All confirmed that in so doing each noted the location of the Premises, pharmacies, general medical practices and other amenities in the area.

Prior to the arrival of parties the Chair asked Members to confirm that they had received and considered the papers relevant to the meeting, including the Report on Pharmaceutical Services provided within the village of Chapelhall and township of Airdrie circulated under separate cover of the papers on behalf of Mrs Forsyth. Having ascertained that no Members or officers in attendance had any personal interest in the application the Chair confirmed that the Oral Hearing would be conducted in accordance with the guidance notes contained within their papers.

The Chair then asked Miss Tannock to invite the applicant and interested parties who had chosen to attend to enter the hearing.

### **Attendance of Parties**

The applicant Apple Pharmacy was represented by Mr Neeraj Salwan. The sole interested party who had accepted the offer to attend the hearing was Lloyds Pharmacy Ltd who was represented by Mr Mark Malone.

The Chair introduced herself, the Members and the officers in attendance from NHS Lanarkshire - Primary Care, prior to asking the parties to confirm that they had received all papers relevant to the application and hearing, including the Report on Pharmaceutical

Services provided within the village of Chapelhall and township of Airdrie which was circulated under separate cover on behalf of Mrs Forsyth.

The Chair explained that the meeting was being convened to determine the application submitted by Apple Pharmacy, for inclusion in the Pharmaceutical List of Lanarkshire Health Board in respect of a new pharmacy at 31 Lauchope Street, Chapelhall, Airdrie, ML6 8SW according to the Statutory Test set out in Regulation 5(10) of the Regulations.

The Chair continued to explain that the hearing would be conducted in accordance with the procedures set out in the guidance notes circulated with the papers for the meeting, and in doing so confirmed that all Members of the Committee had conducted a site visit, and that no members of the Committee nor officers in attendance, had any interest in the application.

### **Evidence Led**

**The Chair then invited Mr Salwan to speak first in support of the application.**

Mr Salwan thanked the Chair for the opportunity to present his application to the Committee prior to introducing himself and giving a brief background to Apple Pharmacy and their experience to date. He then read the following pre-prepared statement:

“The neighbourhood is defined as Chapelhall, North Lanarkshire. Chapelhall has grown in size significantly over the last decade. There are seven data zones within Chapelhall, and the Scottish Neighbourhood Statistics 2006 indicate that the population has risen by almost 2,500 residents taking it from around 6000, to a current estimated figure of around 8,500 during this period and is officially the largest village in Monklands. This large increase has been due to a significant increase in the numbers of new houses built within the neighbourhood (referred to map included within supporting statement). These housing developments have attracted a large number of new families to the village. The houses built within these three major developments have been primarily large family homes. This has changed the mix of the employment status of the people residing within the neighbourhood. A larger proportion of middle income professionals now live within the neighbourhood. The result is today a village that has doubled in population since the mid 1980s. The village has one Pharmacy which provides all of the Pharmaceutical Services. The applicant proposes that an additional Pharmaceutical Contract is required to secure the adequate provision of Pharmaceutical Services to Chapelhall. One Pharmacy was adequate a number of years ago. The vast increase in the population of the neighbourhood coupled with the extra Pharmaceutical Service required to be provided by a Pharmacy, requires the provision of a new Pharmacy Contract.

There are further local housing developments planned by North Lanarkshire.

I am now going to highlight a judicial review of Lord Drummond Young in the case of the National Appeal Panel v Lloyds Pharmacy, 2004, making specific reference to Lord Drummond Young’s statement at point 10 which indicates that there is a requirement to consider probable future developments for two reasons. Firstly that the neighbourhood may change, involving new housing developments or a population shift, and, secondly, there may be changes in Pharmaceutical Practice, reference the implementation of the new Pharmacy contract. I have already shown the Panel that there has been a significant neighbourhood population increase since 2001 and said that there is going to be a significant population increase in those aged 65 or over in the future. I have shown the changes in pharmacy

practice in the future which will have a major impact on an already very busy Pharmacy. Point 11 of Lord Drummond Young's decision states that a PPC or a Panel can award a contract which results in some degree of "present over provision" if it secures adequacy into the future. Is it then necessary to grant the Application in order to secure adequate provision of Pharmaceutical Services in the neighbourhood. I do not seek to cast any aspersions on the only Pharmaceutical Provider in the neighbourhood. I have worked in many Pharmacies that do over the average number of items and have long waiting times, this situation is compounded by the fact that there is only one Pharmacy in the town. The large numbers of patients eligible for the Minor Ailment Service, the pressure that the changes to the Public Health Service will bring, along with the increased time that it takes to implement the Acute Medication Service and the Chronic Medication Service. I consider that this all adds up to create an even greater demand for local health needs to be met in the pharmacy environment. Recently a contract was granted for these reasons and that was a village of only 3000 residents.

The applicants proposed Pharmacy will be at 31/33 Lauchope Street, Chapelhall. The unit is being designed to fulfil of the latest demands of a modern Pharmacy. The Pharmacy will have designated parking including two disabled parking bays to the rear of the property. Architect's plans have been submitted to North Lanarkshire Council to agree proposal to push unit back, similar to positioning of Health Centre, in order to cater for the parking spaces and utilise spare land at the rear of the property. Planning permission has not yet been granted but awaited but the timescale for this has been taken into account with regards to the establishment of the Pharmacy. It will have a large consultation area with plumbing and be IT enabled. It is much closer to the existing Medical Centre in Chapelhall. Patients wishing to travel to the Pharmacy on foot or by car will have a much safer journey. The current journey on foot to the existing Pharmacy involves crossing 5 vehicle entry points into houses or shops on the left hand side of Lauchope Street. It involves crossing 4 vehicle entry points on the right hand side of the Street. The pavements are not flat and level along the walk. Patients travelling to the existing pharmacy by car, have to park on the bend of a very narrow street, Russell Street. Russell Street is the site of the new Joint campus school; this has increased the traffic flow into and out of this street significantly over the last three years. There is no drop down in the pavement around the existing Pharmacy. The applicant proposes its Pharmacy will improve the access to Pharmaceutical Services by foot and by car. The applicants proposed Pharmacy can be reached on foot by walking 100 yards to a pedestrian crossing, crossing the road, and walking another 100yards into the pharmacy.

The proposed Pharmacy will offer a full NHS dispensing service, the Minor Ailment Service, Nicotine Replacement Therapy, services to the frail and elderly, Mental Health Services, Emergency Hormonal Contraception, the Acute and Chronic Medication Services when they become available, the Public Health Service, and a free collection and delivery service. The applicant proposes an additional Pharmacy Contract will enable a greater number of Pharmaceutical Services to be provided to the neighbourhood. The current demand upon the level of prescription dispensing by the existing contractor makes it very difficult to adequately provide the range of additional Pharmaceutical Services expected by the public and the Health Board. It is proposed that the traditional Chapelhall population will largely continue to use the existing Pharmacy Contractor. The applicant will offer its range of services to give the population a greater choice of Pharmacy Services.

The applicant proposes the opening hours of its pharmacy to be Monday to Friday 8.00am-6.30pm, 9am-5.30pm on a Saturday and Noon to 4pm on a Sunday. It is anticipated the Pharmacy may have to extend its opening hours in line with the extension of any opening hours the local GP surgery has to make as part of the latest Government strategy to improve access to GP services. This will give Chapelhall a seven day Pharmaceutical Service. This will give access to the Minor Ailment Service seven days per week.

I commissioned a company who does market research to conduct a survey in the village, which confirms anecdotal information provided to me by locums. Over a two week period 500 interviews were conducted with a representative cross section of the population living within the catchment area. A summary of the results are as follows:

- 20% had spoken to a pharmacist in the last year
- 92% had used a pharmacy within the last year
- 76% had used the local Llyods
- 52% were disappointed with the service they received
- 75% found parking to be a problem
- 78% had never heard of the minor ailments service
- 92% would use the minor ailments service
- 95% would like the choice of another pharmacy within the town
- 39% who walk to a pharmacy to get the items on their prescription stated that this was either fairly or very inconvenient.
- 75% who drive to a pharmacy to get items on their prescription stated that it was either fairly or very inconvenient to find a parking place close to the pharmacy in Chapelhall
- 10% of people stated that they had to wait in excess of 20 minutes for their prescription items.
- 49% were dissatisfied with the length of time they had to wait to get their prescriptions fulfilled.
- 34% said that the level of service provided by the pharmacy they use at the moment was only adequate, with a further 52% stating that it was poor.
- An overwhelming majority of respondents (95%) said that they would like a new pharmacy to open at 31 Lauchope Street

Therefore the applicant proposes that a new Pharmacy contract is necessary and desirable to secure the adequate provision of Pharmaceutical Services to Chapelhall.

## COSTS TO DATE

I have had this property now for 18 months and managed to buy it over Lloyds who also bid for the unit. It has cost me easily in the region of £20,000 in monthly loan repayments to keep it going until my hearing. All that money has been wasted as I have had to bear the costs of the empty unit myself. I am sure the board agrees that this shows a high level of commitment on my side. My plans have also cost a lot of money with architecture fees and this is a separate cost of easily £5000. I believe in this project and am extremely committed to it. I do have support from a lot of the residents with the main complaint being drug shortages and big waiting times. The ISD data shows us that Chapelhall medical centre does about 12,800 items a month, with the vast majority going to Lloyds this is way over the average.

## NEW DEVELOPMENTS

George Wimpey West is also building at Woodlands Gate, Chapelhall, beside its recently completed Kestrel Grange development. Again, this development is close to the motorway network with good, local transport amenities.

### ADDITIONS:

It's a smaller development of just 37 four-bedroom detached homes available in four styles - the Braemar, Holyrood, Culzean (priced at (pounds) 130,000) and Hopetoun ((pounds) 122,500) At Woodlands Gate, the sales office is open daily from 10am to 5pm. More details on these developments are available online ([www.wimpey.co.uk](http://www.wimpey.co.uk)).

Chapelhall is based just outside the town of Airdrie in North Lanarkshire, Scotland. Over the years Chapelhall has developed itself from being a small mining village to now being the largest village in Monklands.

Chapelhall, lies on the opposite side of the North Calder Water from Calderbank and has very similar history. Iron working and coal mining were once prominent.”

### **The Chair then invited questions from Mr Mark Malone, Lloyds Pharmacy Ltd, to Mr Salwan.**

Mr Malone's first question to Mr Salwan was to seek clarification as to whether or not the current tenant would remain within the premises should the application be granted and was advised that Mr Salwan expects him to move out imminently as he understands he is due to declare bankruptcy. When asked about the internal configuration of the unit Mr Salwan stated that they are keeping plans flexible at the moment depending upon whether or not the contract is granted soon or if they require to go through the appeal process, if the latter applies then they will likely look for another tenant and build an internal wall to keep the areas separate. He also confirmed when asked that there would be four parking spaces to the front of the property, with a further eight spaces to the rear two of which would be zoned for disabled parking. Mr Malone then queried the population figures provided by Mr Salwan as they varied between those listed in his statement in support of the application to those presented today, and suggested that he was only able to estimate the population as there was no evidence available to confirm that all of the new housing developments were occupied. Mr Salwan acknowledged this however stated that from driving around the area he was of the opinion that most of the completed properties appeared to be occupied.

Mr Malone and Mr Salwan then debated over whether or not the proposed location in relation to the Health Centre would actually improve access to pharmaceutical services for patients with limited mobility or in wheelchairs or those with pushchairs given the condition and width of the pedestrian crossing. Mr Salwan's opinion was that the shorter distance to travel to his proposed location would overcome any difficulties suggested by Mr Malone. When asked what evidence Mr Salwan had to support his claims regarding stock shortage issues experienced by Lloydspharmacy he was told that this was anecdotal feedback from locums. Mr Malone's final question was to ask whether Mr Salwan thought that there was a need or sufficient demand for Sunday opening within the village given the high percentage of car ownership and the close proximity to Airdrie. Mr Salwan replied that traffic in Airdrie can

become congested and that it was unreasonable to expect patients to travel to a neighbouring town to access a Pharmacy.

**Having ascertained that Mr Malone had no further questions, the Chair then invited questions from Members of the Committee in turn to Mr Salwan**

Mr Murray was first to speak and asked Mr Salwan to clarify his actual plans for the unit and internal layout as there were a lot of roadworks ongoing in the village which prohibited him from looking further than the front aspect of the unit and internally, furthermore that when he was inside the shop talking to the current tenant he appeared uncertain over the proposed use for the unit in the future but was aware that it may be getting split into two separate parts, which in Mr Murray's opinion left limited space. Mr Salwan advised that he was keeping his options open at present as to whether or not to use the full shop or partition it until such times as the application was granted, thereafter he would consider approaching the Planning Department for consideration of their longer term plans to have the unit knocked down and moved further back to accommodate the parking spaces mentioned earlier.

Mrs Caraher then asked Mr Salwan if the new joint campus Primary School had increased the population within the village and was told that Mr Salwan did not have that information available. She then asked him regarding the arrangements for patients to have their prescriptions dispensed within his Pharmacies and whether they had for example a 15 minute turnaround time. Mr Salwan reported that as an independent chain they zone in on speed more than multiples so he aims for a quick response however acknowledges that if there is a query with regards to a prescription it can take longer.

Mr Sargent then asked Mr Salwan how he intended to staff the Pharmacy and who would be in charge. Mr Salwan advised that he would appoint a Pharmacist however would probably double up to work with them a few days per week during the initial introduction and set up phase thereafter leave it for them to manage the day to day running. Mr Sargent asked Mr Salwan to explain his implied need for Sunday opening on the strength of the availability of services such as NRT, Chlamydia testing, eMAS etc which whilst very important were not termed "emergency" services. Mr Salwan replied that it can help with smoking cessation compliance for patients to obtain their NRT patches.

Mr Allan followed Mr Sargent and asked Mr Salwan to clarify his comment within his submission "an additional Pharmacy Contract will enable a greater number of Pharmaceutical Services to be provided to the neighbourhood" and to specify what these services were. Mr Salwan replied that he would not provide anything new or different only add to current capacity for provision. He then asked Mr Salwan if he felt that his proposed opening times were realistic, financially feasible and necessary within a village setting, and is this what he is relying upon to provide a "better service". Mr Salwan replied that he would like to try to offer these hours in light of the commuting element of the village given proximity to the Motorway to Edinburgh and Glasgow, increased working population, extended hours provided by the Medical Practice. When asked if he anticipated the Pharmacy being busy on Saturdays given that most people would tend to leave the village for other more extensive shopping and leisure services he advised that he thought that eMAS would be popular. His final question was to ask Mr Salwan if he agreed that the Pharmacy opening in Calderbank would relieve pressure on Lloydspharmacy and was advised that whilst it would it would only be of limited help by approximately 1,000 scripts.

Next to question Mr Salwan was Mr Mallinson asking him for further information regarding his proposed plans and timescale to move the unit back and redevelop the area. Mr Salwan replied that as an interim measure they would move into the premises in its current layout and position and monitor the situation for approximately one year before pursuing planning permission however early indications from the Council were that they were in agreement to their proposals. This led Mr Mallinson to ask of the possibility that their “interim measure” would become their long term position. Mr Salwan said that from the response to their proposals they were 99% sure that this would be possible however should it not materialise the “interim” measures would still be a proper and adequate set up for a Pharmacy. Mr Mallinson continued asking Mr Salwan what the perceived benefits of “Phase A” would be over “Phase B” and was told that there would be better access from the Health Centre and freedom within the unit and additional parking spaces, which led Mr Mallinson to ask if he had considered in his plans that this would require to be considered as a minor relocation in addition to planning permission applications or was he suggesting that it was an extension to the current unit, furthermore how could access be improved if the new location would be further away from the Health Centre. Mr Salwan commented that he was confused by Mr Mallinson’s questions and clarified that he was saying that access would be easier due to the availability of parking and that there would be no major change in distance perhaps only 5 seconds further to walk. Mr Mallinson asked if he was saying then that parking spaces were the only benefit and that there were no additional Pharmaceutical Services to be provided as a result, to which Mr Salwan agreed however added that it would be a lot easier to access them.

Mr Aslam was last to be invited to ask questions of Mr Salwan and stated that he would like to return to issues with regards to the unit as he was unsure from the various options stated during the hearing as to what his exact plans for this moment in time should the application be granted today. Mr Salwan advised that if granted they would move into the whole of the unit. This prompted Mr Aslam to ask him for clarification as to whether Apple Pharmacy owned the premises as Mr Salwan had previously referred to outgoings on keeping the unit available. Mr Salwan clarified that this was interest payments on the loan for the purchase of the unit. When asked if he could give an idea of his intentions for the internal layout of the Pharmacy he said that he had a plan which they have applied to several of their Pharmacies. Mr Aslam then enquired as to the number of wholesalers each Apple Pharmacy used and if he would agree that stock shortages is a national problem experienced by all Pharmacies not just multiples. Mr Salwan stated that they normally can access two wholesalers but this may increase should they join Alba Pharm however agreed that presently the norm is to use two. Mr Aslam’s attention then turned to the survey findings and asked Mr Salwan to clarify the actual waiting times that respondents had felt dissatisfied with, and was advised that this information wasn’t contained within the report so he had no idea of the patient experience. This led Mr Aslam to ask him if he would agree that the time taken to dispense was dependent upon the number of items on each script and what his views were on an acceptable time were. Mr Salwan replied that yes it did rely upon certain factors however in his opinion a Pharmacy dispensing approximately 10,000 items should only have a waiting time of 5-10 minutes, reducing to 2 minutes if less busy. Mr Aslam’s final question was to ask Mr Salwan to specify what he felt the inadequacies in pharmaceutical provision within the village were. Mr Salwan replied that there was only one Pharmacist which caused excessive waiting times and impacted upon the services able to be offered e.g. limited uptake of eMAS, and difficulties with stock availability.

**Having ascertained that there were no further questions for Mr Salwan, the Chair then asked Mr Malone, Lloyds Pharmacy Ltd, to state his representation.**



Mr Malone thanked the Chair prior to reading the following pre-prepared statement:

“First of all thank you for giving Lloydspharmacy the opportunity to comment upon this application.

I will begin by addressing the matter of neighbourhood.

Looking at the map I think it is fairly logical to consider the neighbourhood as that of Chapelhall. As the panel will be aware, only last month a new NHS Contract was granted to Calderbank which is the adjacent settlement. Calderbank was defined as a neighbourhood and therefore it follows that Chapelhall is also a neighbourhood in its own right.

Within this neighbourhood there is already a pharmacy, which provides an accessible and adequate service, Lloydspharmacy at 30A Russell Street.

We feel as though the application is centred around level of demand. This is not in itself evidence of a currently inadequate Pharmaceutical Service. As well as this, due to the recently approved Pharmacy contract Application in Calderbank this argument becomes even more nullified. There is no evidence that this new Pharmacy will not open and when it does it will undoubtedly have an impact on Lloydspharmacy in Chapelhall. Lloyds provide a Health Board funded delivery service to Calderbank but the new Pharmacy Contract will likely mean this will be less demanded and also there will be less Calderbank residents using our pharmacy. The argument by the applicant that there is enough demand for yet another contract is not sustainable. Along with the Calderbank new contract if this additional application in Chapelhall is granted it could have a devastating effect on our Pharmacy

The application refers to a population of 6,000 having risen to 8,500. We are not sure where these figures have been arrived from, as SCROL demographics show there is a population of 5,214. We can only assume the application has attempted to include Calderbank into the data. The SCROL data shows that Calderbank has 1,663 residents; this still falls well short of the 8,000 indicated. No concrete evidence has been given to support the rationale of 8,500 residents or what this number exactly includes.

For Chapelhall patients and residents the proposed site has no geographical advantage whatsoever as Lloydspharmacy is only 150m away. There is also no more parking at the proposed site than that of the current Lloydspharmacy location. We believe the proximity of the proposed site to the Health Centre therefore becomes irrelevant. Also when mentioning vehicular access from the surgery, it should be stated that most people can walk anyway. Within this point it may be said that the proposed site is also no more accessible than Lloyds as the main, Lauchope Road, still has to be crossed to gain access. Indeed wheelchair and pushchair users would have to use the pedestrian crossing closer to Lloydspharmacy, as the crossing at the ‘T’ junction of Lauchope Road and Main Street is inaccessible to these users due to the width of pavement.

We do not feel that Chapelhall is a deprived community. Households without a car are far less than the national average being 25% vs. 34% and 2 car households is given as 25% vs. 19%. These are hardly figures for a deprived community.

The % of over 65s is also lower than the national average.

We operate from a large modern unit at the centre of the community offering the full range of Scottish contract services as well as having a large fully private care room, separate and discreet supervised methadone administration area, and needle exchange. No new services are being offered by the application which aren't already provided by Lloydspharmacy in Chapelhall. We offer a delivery service to all surrounding areas.

Paying regard to opening hours of the new application, we see Apple Pharmacy wishing to provide a service on a Sunday this is completely unsubstantiated and without evidence of need, a point backed by the Area Pharmaceutical Committee. It is felt that this has been included purely to create a point of difference but it should not be taken as evidence of inadequacy of the existing pharmacy.

In summary we cannot see why a second NHS Contract is necessary or desirable and there is no evidence of any inadequacy. The application appears to have been based around hoping to get Patients from Calderbank but of course this community will soon have its own new pharmacy.”

**Following Mr Malone’s representation the Chair then invited Mr Salwan to ask questions of Mr Malone.**

Mr Salwan asked Mr Malone if he could advise him how many Calderbank residents they currently dispense for and was advised that he could give him an exact figure. Mr Salwan then asked Mr Malone the date of the SCROL data used and when informed that it was from 2001 he suggested that it was no longer relevant given the development within the area. Mr Malone acknowledged that whilst the new housing would have resulted in a change in population it would not be significantly different. Mr Salwan’s final request was to ask Mr Malone to confirm that even with a reduction in the numbers of scripts anticipated when the new Pharmacy in Calderbank opens it will still leave Lloydspharmacy dispensing more than the current national average. Mr Malone replied that as he was unable to give an exact indication of the numbers of scripts dispensed from the Pharmacy split between Chapelhall and Calderbank residents then he was unable to give Mr Salwan any such confirmation.

**Having ascertained that Mr Salwan had no further questions, the Chair then invited questions from Members of the Committee to Mr Malone**

When invited to do so Mr Murray and Mrs Caraher advised that they had no questions to ask of Mr Malone.

Mr Woods was then invited to question Mr Malone and asked if he would accept that parking outside Lloydspharmacy is difficult especially with the close proximity of the school, and was advised that he accepted this.

Mr Allan followed and asked Mr Malone if he was aware of any complaints made to Lloyds Pharmacy Ltd or the Health Board with regards to the Pharmacy’s waiting times, and was advised that he was not aware of any complaints being made. Mr Allan then asked for an

indication of the normal staffing complement within the Pharmacy and was advised that they have 1 Pharmacist, 1 Supervisor, 2 Dispensers, and 2 “front of shop” staff.

Mr Aslam’s question to Mr Malone was to ask how many wholesalers they have contracts with and when advised that they have one with AAH he asked if they have the option to use others to which Mr Malone replied that he was unsure.

When invited Mr Mallinson advised that he had no questions to ask of Mr Malone.

**Having ascertained that there were no further questions to either the applicant or interested party in attendance, the Chair then invited Mr Malone to sum up his representation.**

Mr Malone thanked the Chair and advised that he was of the opinion that an additional Pharmacy was neither necessary or desirable and that the applicant had failed to provide any evidence of inadequacy of Pharmaceutical Services – which is even more relevant in light of the Pharmacy scheduled to open within the neighbouring village of Calderbank which would result in a loss of patients for them.

**The Chair then invited Mr Salwan to sum up in relation to his application.**

Mr Salwan began his summation by stating that the Pharmacy in Calderbank was a red herring given that it was a separate village and that Chapelhall is still growing and expanding. He is of the opinion that as Pharmacy develops and the services associated with the new contract come on board the resulting increase in workload and processes coupled with the current high volume of scripts dispensed by Lloydspharmacy will result in it being unable to keep up with demand and offer the full range of services. With regards to access to his proposed premises he contends that this will be easier for patients leaving the Health Centre than walking to Lloydspharmacy. Mr Salwan then began to refer to contingency planning for outbreaks of H1N1 and the benefits of having two Pharmacies in the village, however the Chair reminded him of the procedures to be followed and stated that this part of the hearing was for summing up and that no new elements should be introduced. Mr Salwan acknowledged this and concluded by saying that with regards to inadequacy he believes that this is evidenced by the findings of his survey.

### **Retiral of Parties**

The Chair then invited the Applicant and Interested Party to confirm whether or not they considered that they had received a fair hearing, and that there was nothing further they wished to add.

Having being advised that all parties in attendance were satisfied, the Chair then informed them that the Committee would consider the application and representations prior to making 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 Chair’s request Mr Salwan and Mr Malone withdrew from the meeting.

## **Supplementary Submissions**

Following consideration of the oral evidence

### **THE COMMITTEE**

noted:

- i. that they had each independently undertaken a site visit of the proposed neighbourhood, noting the location of the proposed premises, the Pharmacies, the General Medical Practices, and some of the facilities and amenities within the village of Chapelhall and township of Airdrie and surrounds
- ii. map showing the location of the Doctors' surgeries in relation to existing Pharmacies in the town of Airdrie and village of Chapelhall, and the site of the proposed Pharmacy
- iii. prescribing statistics of the Doctors within the township of Airdrie and village of Chapelhall, during the period April to June 2009.
- iv. dispensing statistics of the Pharmacies within the township of Airdrie and village of Chapelhall, during the period April to June 2009.
- v. demographic information on the township of Airdrie and village of Chapelhall taken from the 2001 Census
- vi. comments received from the interested parties including existing Pharmaceutical Contractors in Airdrie, Chapelhall and Caldercruix in accordance with the rules of procedure contained within Schedule 3 to the regulations
- vii. report on Pharmaceutical Services provided by existing Pharmaceutical Contractors within the township of Airdrie and village of Chapelhall.

## **Decision**

### **THE COMMITTEE**

then discussed the oral representation of the Applicant and the Interested Parties in attendance, 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 2009, (S.S.I. 2009 No. 183).

(i) Neighbourhood

**THE COMMITTEE**

The Committee deemed the neighbourhood to be the village of Chapelhall as defined by green belt and natural boundaries.

(ii) Existing Services

**THE COMMITTEE**

having reached a conclusion on the neighbourhood, was then required to consider the adequacy of existing pharmaceutical services in that neighbourhood, and whether the granting of the application was necessary or desirable in order to secure adequate provision of pharmaceutical services in that neighbourhood.

**THE COMMITTEE**

recognised that there was a Medical Practice, a Dental Practice, and one Pharmacy within the neighbourhood, with a Pharmaceutical Contract located in the nearby village of Calderbank currently included in the Provisional Pharmaceutical List to 1<sup>st</sup> April 2010. Furthermore from the evidence provided within the report collated by the office of the Chief Pharmacist – Primary Care, it was demonstrated that the population have access to Pharmacies located on the periphery in the nearby town of Airdrie, which provide a comprehensive range of Pharmaceutical Services alongside the core requirements of the new contract

(iii) Adequacy

**THE COMMITTEE**

discussed the test of adequacy and agreed that existing services from both within and close by the neighbourhood were adequate, and provided a breadth and range of NHS Contract services to residents of the neighbourhood

Accordingly, following the withdrawal of Mr Iain Allan and Mr Parvez Aslam in accordance with the procedure on applications contained within Paragraph 6, Schedule 4 of The National Health Service (Pharmaceutical Services)(Scotland) Regulations 2009, the decision of the Committee was unanimous that the provision of pharmaceutical services at the Premises was neither necessary or desirable in order to secure adequate provision of Pharmaceutical Services within the neighbourhood in which the Premises were located by persons whose names are included in the Pharmaceutical List and that, accordingly, the application was rejected subject to the right of appeal as specified in Paragraph 4.1, Schedule 3 of The National Health Service (Pharmaceutical Services)(Scotland) Regulations 2009.

**Mr Allan and Mr Aslam were then requested to return to the meeting, and were advised of the decision of the Committee.**