#### IN CONFIDENCE – FOR MEMBERS' INFORMATION ONLY

MINUTE: PPC/09/10

Minute of Meeting of the Pharmacy Practices Committee held on Friday, 23<sup>rd</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 Laura Robertson Mrs Lynn Wilson Mr John Woods

Pharmacist Appointed by The Royal Pharmaceutical Society of Great Britain

Mr E J H Mallinson

Pharmacist Nominated by Area Pharmaceutical Committee

Mrs Janet Park Mr David Sinclair

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

# 10 <u>APPLICATION BY BOOTS UK LTD, 1 THANE ROAD WEST, NOTTINGHAM, NG2 3AA</u>

## **Application**

There was submitted application by Boots UK Ltd, received 21<sup>st</sup> November 2008, to relocate Pharmaceutical Contract from 24-28 Main Street, Kilsyth, G65 0AQ to proposed premises at Unit 1, Marketcross Shopping Centre, Westburnside Street, Kilsyth, G65 0HL.

## **Submissions of Interested Parties**

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

- (i) Letter received 8<sup>th</sup> December 2008 from Area Medical Committee GP Sub Committee of Greater Glasgow & Clyde Health Board
- (ii) Letter received 12<sup>th</sup> December 2008 from Area Pharmaceutical Committee of Lanarkshire Health Board

- (ii) Letter received 15<sup>th</sup> December 2008 from M & D Green Dispensing Chemist Ltd
- (iv) Letter received 18<sup>th</sup> December 2008 from Area Pharmaceutical Committee of Greater Glasgow & Clyde Health Board

### **Procedure**

At 10:00am on Friday, 23rd October 2009, the Pharmacy Practices Committee ("the Committee") convened to hear application by Boots UK Ltd ("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 Members of the Committee had previously undertaken a site visit of Kilsyth 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 additional information circulated on behalf of Mrs Forsyth concerning the Prescribing and Dispensing Figures Report for the Pharmacies and Medical Practices within the town of Kilsyth during the period April to June 2009, and the Report on Pharmaceutical Services provided within the town of Kilsyth. 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 advised that none of the interested parties eligible to attend the hearing had accepted the invitation to appear. Miss Tannock was then requested to invite the applicant's representatives to enter the hearing.

## **Attendance of Parties**

The applicant Boots UK Ltd was represented by Mr Andrew Mooney who was assisted by Mr Charles Tait. It was noted that none of the interested parties eligible to attend the hearing had accepted the invitation to appear.

The Chair introduced herself, the Members and the officers in attendance from NHS Lanarkshire - Primary Care, prior to asking Mr Mooney to confirm that he had received all papers relevant to the application and hearing, including the Report on Pharmaceutical Services provided within the town of Kilsyth 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 Boots UK Ltd, for relocation of Pharmaceutical Contract from 24-28 Main

Street, Kilsyth, G65 0HL to Unit 1, Marketcross Shopping Centre, Westburnside Street, Kilsyth, G65 0HL according to the Statutory Test set out in Regulation 5(10) of the Regulations.

The Chair continued to explain the procedures to be followed and confirmed that all Members of the Committee had conducted a site visit, and that no members of the Committee or officers in attendance, had any interest in the application.

## **Evidence Led**

## The Chair then invited Mr Mooney, Boots UK Ltd, to speak in support of the application.

Mr Mooney introduced himself and thanked the Committee for the opportunity to give the following pre-prepared overview in support of the application:

"My challenge today is to convince you as decision makers that the major relocation of our Community pharmacy in Kilsyth satisfies the legal test in terms of Regulation 5(10) and is both necessary and desirable in order to secure adequate provision of pharmaceutical services in the neighbourhood.

Unfortunately, the current regulatory framework has required Boots to submit a new contract application, however, at this point I would like to make it clear that the approval and opening of the new contract at Westburnside Street, Kilsyth will simultaneously result in closure of the main street pharmacy contract.

Within this context and through my presentation today I therefore hope to highlight and demonstrate:

- Why in our view the current core service provision is no longer adequate.
- The threat that is probable to future adequacy of services such as the Chronic Medication Service in Kilsyth if existing contractors are unable to modernise premises with cost effective and flexible property solutions.
- Why our proposed relocation (which is notably to a comparable town centre location within the same neighbourhood and for the purposes of improving the service provision for the same population) is both necessary and desirable.

I will start today with some brief background before going on to define the neighbourhood etc.

## Background to this current application

Boots are committed to providing pharmacy services and premises that deliver a high standard of patient centred pharmaceutical care in a professional environment. This is why, following the merger with Alliance Pharmacy as part of our re-branding programme for local pharmacies we have invested significantly in premises improvements to deliver community pharmacies that we hope will be "fit for the future" and are capable of delivering quality pharmacy services and care for local neighbourhoods.

In this respect where possible, we have attempted to meet the premises guidance provided by HFS in Planning Note 36 and other appropriate legislation, guidance and standards.

In terms of Kilsyth specifically - staff and customer feedback on service delivery together will our assessment of the suitability of the property in terms of future requirements and costs (a commercial perspective) have led us to seek to move to new premises – hence this application.

## Neighbourhood

In terms of the neighbourhood I would define the neighbourhood as the town of Kilsyth.

North – Open Fields to the north of residential properties on Rennie Road and Castlehill View (designated Allanfauld)

East – where the housing ends on Stirling Road out toward the woodland in North Barwood

South – River Kelvin

West – Where the housing ends on Glasgow Road

It is important at this point again to highlight the context within which this application should be considered.

It is not an application for a new contract per se (i.e. for a 4th contract in the town of Kilsyth) however is an application within the current regulatory framework to enable Boots to relocate our existing local pharmacy 200 metres down the main street away from the local health centre to a larger modern retail unit that will allow us to make improvements (adequate dispensary, consultation room, brief intervention point, governance and work-flow systems, DDA compliance throughout e.g. accessible toilets/assisted doors etc) that will benefit all users (patients and staff alike).

It will also address in our view the current inadequacies in pharmaceutical care service provision in Kilsyth and secure the future of accessible pharmaceutical care services in Kilsyth that meet all stakeholders' needs in terms of quality and standards.

It is interesting to note at this point, that in England this relocation would have been automatically granted (as it is a relocation under 0.5km and within the same neighbourhood). However, under the amended Scottish regulations the inclusion of the "appreciable effect rule" has meant that Lanarkshire Health Board could not grant in Sept 08 a minor relocation for this proposal. This was on the basis that the proposed site was viewed as more accessible and therefore could conceivably have had an appreciable effect on other contractors. Improved accessibility and service capability from Boots Local Pharmacy in Kilsyth are obviously notable and desirable patient benefits that may impact the commercial interests of the other contractors, however, it is important to highlight to the committee at this point that none of the other contractors within the neighbourhood have objected to this application. There is more than sufficient healthcare business to support all the contractors in Kilsyth and it should be noted that although more accessible by car this location is further for access on foot from the surgery and arguably comparable in terms of public transport following the revision of local bus routes. Therefore, patient movements are not as clear as perhaps the

Area Pharmaceutical Committee felt and actually with modern loyalty systems such as Collection and Delivery Services I would not envisage any dramatic changes in service demands and delivery - although capability and capacity to deliver services should improve. In my view, the most important issue here is actually the need to represent community pharmacy professionally in Kilsyth and work together effectively across Kilsyth to service the notable healthcare need.

The only objection received by Lanarkshire Health Board to this application was that from Twechar Pharmacy. This pharmacy is clearly out-with the Kilsyth neighbourhood and was granted a contract in June 2006 on the basis of a distinct population in Twechar.

Therefore, within this context and recognising that staff, patient and service benefits can be achieved by this move if I can demonstrate to you today inadequacy in the current service provision then clearly this application should be deemed both "necessary" and "desirable" to address these.

Finally, can I also highlight at this point that "the appreciable effect" rule is not part of legal test 5(10) and should not be considered unless there is a clear risk to the security of service provision in the neighbourhood of Kilsyth in totality. In Kilsyth there is clearly enough business for all the current contractors as I have already said and the key is for all of us is to work effectively together to share the workload, promote care and deliver patient health benefits through pharmacy interventions and advice.

## What are the existing pharmaceutical services in the neighbourhood.

Within this neighbourhood there are currently 3 Community pharmacy contracts serving a population within the town of Kilsyth itself of about 10,100 residents (2006 Mid Year estimate).

The nearby villages of Croy, Banton, Queenzieburn are all within easy commuting distance from Kilsyth and the size of the patient list in the health centre (circa 14,000 patients) reflects the movement of population into Kilsyth from the surrounding settlements given it is a neighbourhood for all purposes. It should also be noted that this substantial patient list also drives the substantial level of service demand that the local community pharmacies experience.

The current contractors are namely Co-op Pharmacy, Boots UK (trading as Moss Pharmacy) and an independent pharmacy. While the Co-op Pharmacy is modern, large and fit for purpose, the other two pharmacies are in our view providing what we would consider to be an inadequate service as their premises are not fit for purpose and lack the basic facilities for the delivery of adequate service provision.

It is our contention therefore that the majority of the Community Pharmacy contracts (2 out of 3) in Kilsyth are unable to provide an adequate pharmaceutical care service. This is specifically in relation to the newer elements of the pharmaceutical services contract, although it is also noteworthy that the capability and capacity to meet the demands of forecast item growth efficiently and effectively together with other healthcare type service developments is a concern given the current size and constraints of premises.

The lack of the required standard of facilities for patient consultation, pharmaceutical care provision together with access issues (associated with DDA compliance) across Kilsyth limit the uptake, interventions and notable benefits that community pharmacies could bring to local healthcare and public health.

This application is about remedying this situation.

Boots existing local pharmacy premises are located on the East side of the pedestrianised Main Street and are in our view not fit for purpose. The current premises of  $54m^2$  have dispensary space totalling of  $15m^2$ , and a non-dispensing sales area (NDSA) of  $35m^2$ . The current unit, however, does not have an accessible consultation facility and as a consequence of inherent structural constraints I am told it would be tricky to introduce a DDA compliant consultation room without destroying the welcoming feel and lay-out of the store.

In contrast, the new premises will have 90m<sup>2</sup> of useable space compared to 54m<sup>2</sup> in the current location and will provide all the facilities required to deliver an efficient and effective healthcare proposition. This is in contrast to the current unit where the dispensary provides the pharmacist little opportunity for customer intervention and interaction being located in an extended area at the rear of the premises with poor visibility and supervision through a small passageway.

The new premises will facilitate the provision of a larger "fit for purpose" dispensary and also provide space for a private consultation room and brief intervention point. The new store layout will improve dispensary workflow, customer service and provide adequate storage capability. It will also enable the store to comply with the current service specification requirements for Core Pharmaceutical Services and current planning guidance (Planning Note 36) from Health Facilities Scotland.

Are these services adequate, and if not - why?

The current services in our view are not adequate.

## Context

1. The recent developments in the Pharmaceutical Care Services Contract

On 25 June 2008, the Minister for Public Health announced the introduction of new public health services. There are three components to the new Public Health Service element of the pharmacy contract; a health promoting element which combine the original PHS tiers one and two; a smoking cessation service to help those who wish to stop smoking; and a sexual health service which will include free access to Emergency Hormonal Contraception and Chlamydia Testing and Treatment. The new elements were introduced on the 29<sup>th</sup> August 2008. Specifications for the new services were provided through NHS Circular PCA (P) (2008) 17.

It is important to note that although in Kilsyth these valuable additional services are available from all the cohort pharmacies (with the exception of Emergency Hormonal Contraception in Charteris), staff and customer feedback highlight that in some occasions the delivery of this service is compromised by the poor quality of facilities for private and confidential consultation.

This is an important inadequacy given the service specification for both the core services of PHS and eMAS specify that

The service should be delivered from premises that can provide an acceptable level of confidentiality and safety.

Evidence from our internal Customer Care Survey Reports have highlight that the current Boots store may not always meet customer expectations.

Therefore, as the role of the pharmacist develops in terms of pharmaceutical care provision and the requirement for private consultations and privacy increases the current standard and availability of appropriate consultation facilities in Kilsyth is now not adequate. Specifically in relation to our pharmacy the expectations of patients are that the current quiet area we provide is not good enough in terms of confidentiality.

The requirement to support and invest in infrastructure improvements such as premises has been well recognised by all stakeholders for many years now and the availability of premises funding to C.P from the Primary and Community Care Premises Modernisation Programme demonstrates Govt commitment and vision for the future of pharmacy as an accessible healthcare provider -particularly for the pharmaceutical care of patients with stable Chronic or Minor conditions.

It should be noted at this point that within NHS circular PCA (P) (2008) 21 – Community Pharmacy Premises Development Programme 09-10 and 10-11 it clearly recognises that relocation of an existing contract may be necessary were the existing premises may not be cost effectively upgraded.

Therefore, when you consider that to be "adequate" services are required to be satisfactory in quality or quantity (to need) it is clearly evident that this relocation is necessary and desirable to address current service deficiencies.

The aims of our new pharmacy are therefore to provide a healthcare facility that can deliver a high quality, patient centred pharmaceutical care service experience in a professional environment. I would also maintain that despite the best efforts of the current contractors in Kilsyth this is not the case at this time as the inherent property issues make it difficult to create the right environment.

### **Previous Application**

In an attempt to address current deficiencies through relocation Boots applied for a Minor Relocation in Sept 08. This was refused in Nov 2008 by Lanarkshire Health Board on the basis that the application did not satisfy the test criteria contained with Regulation 5(6) of the National Health Service (Pharmaceutical Services) (Scotland) Regulations 1995. In essence, it was deemed there could be an "appreciable effect" as a consequence of the benefits of improved accessibility and on-street parking in close proximity to the proposed new pharmacy location. In the context of the legal test today under 5(10) the appreciable effect rule is not a consideration for decision makers and therefore it stands that if I can demonstrate through my presentation that the current pharmaceutical service provision in totality within the neighbourhood is "inadequate"

## Core Services

Additional Pharmacy Services MAS, PHS – PCA (P) 2008 17– Introduced new patient service elements of PHS covering Smoking Cessation and Sexual Health (Chlamydia advice, Testing + treatment + EHC) and were implemented in 29<sup>th</sup> August 2008. Although the patient service element is available our customer experience and feedback tells us that the environment and quiet area we currently provide is inadequate. The service should be delivered from premises that can provide an acceptable level of confidentiality and safety.

PHS – is a service that will encourage the pro-active involvement of Community Pharmacy and their staff in supplying Self-Care, offer suitable intervention to promote healthy lifestyles and provision of a healthy environment.

MAS – Direct Pharmaceutical Care to members of the public presenting with a common illness. Advice, treatment or referral on Minor conditions

### Issues raised by store team

- PHS Smoking Cessation Service and Emergency Hormonal Contraception Service some customers have commented to staff and through CCM that confidentiality is a concern in current quiet area.
- One example were the customer asked to wait to the counter was quiet
- Patient that uses a motorised wheelchair that is loyal to the store for advice and care however finds access poor (no power-assisted door)
- Number of mother's with buggies and young children
- CCM high frequency of feedback on concern of confidentiality
- Some interventions in smoking cessation have been lost due to poor consultation facilities
- Maintenance issues with upstairs flats ongoing property costs from frequent maintenance calls.
- Addict Services Supervised Methadone Service not ideal and it is my understanding that not all contractors locally offer this service
- Step into toilet
- DDA access
- Supervision
- Number of physical barriers to pharmacist/patient interaction.
- Workflow and operational issues lack of convenient storage,
- Dispensary not future proof and difficult to expand due to physical constraints

Mr Mooney concluded by thanking the Committee for listening to his presentation.

## Given the absence of Interested Parties the Chair then invited questions from Members of the Committee in turn to Mr Mooney.

Mr Woods was first to speak and asked Mr Mooney if he was able to provide any evidence of the customer feedback to which he referred. Mr Mooney advised that he could not provide any evidence however explained the process for accessing internal reports on customer surveys submitted, alongside confirming that the branch team were continually reporting on patient experiences due to the shortcomings of their current premises e.g. the difficulties faced by a mother with a pushchair entering due to the lack of a power assisted door, and a young woman having to wait 15 minutes for the pharmacy to become less busy so that she could discuss emergency hormonal contraception. Mr Woods asked if they had any plans to provide additional services from the new premises that weren't already available within the town and was advised that they were not looking to do so however the improved premises would allow them to develop the services they currently provide in a more appropriate and DDA compliant environment e.g. PMR access point to discuss records, brief intervention room for methadone service for which there is a high demand in the town, as well as being able to install a customer toilet with disabled access and a longer, lower front counter.

Mrs Wilson was next invited to question and her only wish was clarification on the unit number under consideration, Mr Mooney confirmed that it was Unit 1, next door to the Ladbrookes betting shop.

Next was Mrs Robertson whose first question was to ask Mr Mooney his views on why the Co-Op Pharmacy had not submitted any objections on the application given that the new unit would give them front door access from the Main Road. Mr Mooney replied that their lack of representation confirmed their view that there would only be no appreciable effect on any of the existing contractors should the relocation take place, as having walked the town you would need to pass both Co-Op Pharmacy and Charteris before reaching their proposed location. Turning to the plans and DDA compliance referred to within his submission, Mrs Robertson's final question was to ask if the Pharmacy employed any disabled staff. Mr Mooney and Mr Tait discussed this question from both a local and national perspective prior to advising that whilst they were aware of staff who suffered from back complaints, they were not aware of any staff employed who were registered disabled, certainly not on a local level.

When invited Mrs Park asked for an update on the position reached with the landlords of the proposed unit, and if they had the lease disposed to them could they have the premises ready to open within six months of being included in the Provisional Pharmaceutical List. Mr Mooney advised that the had agreed the terms of the lease and, dependent on the timing of approval, should the application be granted today then would be looking to open in April 2010. Mrs Park then asked him to provide more detail on the change in local bus routes in order to establish whether this factor had impacted upon the relocation. Mr Mooney gave an overview of the new circular route before advising that the changes meant that there was no longer a bus stop outside the front door of their proposed unit.

Mr Mallinson advised that he would like to learn of their intentions with regards to the internal layout of the store in more detail given that they would have considerably more space, and their plans with regards to "front shop" services. Mr Mooney stated that the new dispensary area would be galley style to afford a more ergonomic workflow, with a further preparation area set aside for dosage systems, furthermore there would be individual consultation rooms and brief intervention points. When Mr Mallinson stated that they already have Consultation Room and Brief Intervention Point facilities in their existing premises however do not currently provide a PMR service, he was advised that they were not ideally located and should be in a quieter area to ensure patient confidentiality, as from a patient perspective they were not wholly adequate. This led Mr Mallinson to question why they didn't choose to simply modify their current premises rather than relocate. Mr Mooney replied that they had explored this option however they felt that the modifications would alter

the flow and "feel" of the store which patients would not like to be in. Mr Mallinson's final question was to ask if their decision was also commercially based on a desire to increase "front shop" sales. Mr Mooney refused this suggestion stating that whilst there would be an increase of some 15m<sup>2</sup> this would be stocked with an additional range of self care products and over the counter medicines, as well as the space taken by the new DDA compliant counter area..

Mr Sinclair was last to ask questions of Mr Mooney and continued around the financial and structural feasibility of modifying the existing premises alongside their desire to relocate, before asking Mr Mooney if he felt that the requirement of the new Pharmacy contract to allocate 50/60% of floor space allocated to dispensing and consultation areas was unrealistic. Mr Mooney replied that it was as their view is that self care Over The Counter medicines and development of PHS and Minor Ailment Scheme interventions are key parts of the new contract, and that the vision of Boots UK Ltd centres around health care and service provision.

Following Mr Sinclair the Chair took the opportunity to ask Mr Mooney what "Plan B" was should the application be rejected. Mr Mooney confirmed that they would not relinquish their current contract however that it would be a difficult matter to secure funding to modify and refurbish the existing premises due to the timing of the hearing and the imminent completion of the current re-branding programme to "your local Boots pharmacy", and would require a robust business plan to be submitted to their commercial board.

Having ascertained that Members of the Committee had no further questions to ask of Mr Mooney, the Chair then invited him to sum up in relation to the application

Mr Mooney concluded by stating that he had covered all the points during his representation and had nothing further to add other than to highlight that for Boots UK Ltd this application was solely about patient benefits - it will maintain the same distribution of contracts within the town however at the same time remedy the current inadequacies in availability of confidential and private consultation areas, therefore making it necessary and desirable.

### **Retiral of Parties**

The Chair then invited the Mr Mooney to confirm whether or not he considered that he had received a fair hearing, and that there was nothing further he wished to add. Having being advised that Mr Mooney was satisfied, the Chair then informed him 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 all parties as soon as possible. Mr Mooney was 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 Mooney and Mr Tait 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 town of Kilsyth, noting the location of the proposed premises, the pharmacies, the general medical practices, and some of the facilities and amenities within the town.
- ii. map showing the location of the Doctors' surgeries in relation to existing Pharmacies in the town of Kilsyth, and the site of the proposed relocated pharmacy
- iii. prescribing statistics of the Doctors within the town of Kilsyth, during the period April to June 2009
- iv. dispensing statistics of the Pharmacies within the town of Kilsyth, during the period April to June 2009
- v. demographic information on the town of Kilsyth taken from the 2001 Census
- vi. comments received from the interested parties including existing Pharmaceutical Contractor in the village of Twechar 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 town of Kilsyth

## **Decision**

### THE COMMITTEE

noted that whilst the application was for a relocation of existing contract the "statutory test" still applied, and that the application should be considered in the context of whether the location of existing Pharmacies in Kilsyth today provided an adequate pharmaceutical service to the residents of the town, or whether a relocation of Boots UK Ltd, t/a Alliance Pharmacy, was necessary or desirable to secure an adequate service.

accordingly, in order to reach their decision the Committee then discussed the oral representation of the Applicant 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

in considering the evidence submitted during the period of consultation and presented during the hearing, and recalling observations from their site visits, agreed with the definition of the neighbourhood as proposed by the Applicant as being the town of Kilsyth bounded on the North by the open fields to the North of the residential properties on Rennie Road and Castlehill View (designated Allanfauld), to the East where the housing ends on Stirling Road out toward the woodland in North Barwood, the Southern boundary being the River Kelvin, and to the West where the housing ends on Glasgow Road.

## (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 were three Pharmacies and a Medical Practice within the neighbourhood.

## (iii) Adequacy

## THE COMMITTEE

discussed the report on Pharmaceutical Services collated by the office of the Chief Pharmacist – Primary Care, which indicated that the pharmacies within the town of Kilsyth provided a broad range of services consistent with the standards of delivery which can reasonably be expected in 2009, however recalled Mr Mooney's comments that he considered the current premises to be falling behind the current government pharmacy planning guidelines, and that a move to a larger unit was necessary in order to provide satisfactory consultation and private areas necessary for services such as Chlamydia testing, emergency hormonal contraception, and Smoking Cessation advice, and private consumption of Methadone, and that failure to relocate would result in them providing a less than adequate modern day pharmaceutical service, and that this would be exaggerated in the near future with the introduction of the Chronic Medication Service.

Accordingly, the Committee agreed that the totality of services available within the neighbourhood were less than adequate due to the constraints placed on Boots UK Ltd by their current premises which has resulted in bringing the standard of practice within the neighbourhood below modern day expectations.

Accordingly, following the withdrawal of Mrs Janet Park and Mr David Sinclair in accordance with the procedure on applications contained within Paragraph 6, Schedule 4 of The National Health Service (Pharmaceutical Services)(Scotland) Regulations 2009, the Committee voted that it was necessary to grant the application 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 agreed to approve 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 2009.

Mrs Park and Mr Sinclair were then requested to return to the meeting, and were advised of the decision of the Committee.