MINUTE: PPC/2010/06

Minute of Meeting of the Pharmacy Practices Committee held on 4th June 2010 in Meeting Room 1, Law House, Airdrie Road, Carluke, ML8 5ER.

Chair: Mrs Sandra Smith

Present: Lay Members Appointed by the Board

Mr James Murray 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

<u>In Attendance</u>: <u>Officers from NHS Lanarkshire - Primary Care</u>

Mr G Lindsay, Chief Pharmacist – Primary Care

Mrs G Forsyth, Administration Manager – Primary Care Miss L A Tannock, Personal Secretary – Primary Care

05 <u>APPLICATION BY MR MARK GOVAN, 59 SHELLEY DRIVE,</u> <u>BOTHWELL, G71 8TA.</u>

Application

There was submitted application by Mr Mark Govan, received 21st January 2009, for inclusion in the Pharmaceutical List of Lanarkshire Health Board in respect of a new pharmacy at 175 Low Waters Road, Hamilton, ML3 ("the premises").

Submissions of Interested Parties

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

- (i) Comments received by email on 6th January 2010 from Area Medical Committee
- (ii) Letter received on 6th January 2010 from Boots UK Ltd
- (iii) Hard copy of letter originally received by email on 20th January 2010 from Web Pharmacy Ltd t/a Right Medicine Pharmacy
- (iv) Hard copy of letter originally received by email on 22nd January 2010 from Area Pharmaceutical Committee

Procedure

At 10:00 hours on Friday, 4th June 2010, the Pharmacy Practices Committee ("the Committee") convened to hear application by Mr Mark Govan ("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 Hamilton 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.

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 Mr Govan was in attendance and was accompanied by Mrs Karen Govan. The sole interested party, eligible to attend, and who had accepted the invitation was WEB Pharmacy Ltd t/a Right Medicine Pharmacy, who was represented by Mr Noel Wicks.

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.

The Chair then explained that the meeting was being convened to determine the application submitted by Mr Mark Govan, for inclusion in the Pharmaceutical List of Lanarkshire Health Board in respect of a new pharmacy at 175 Low Waters Road, Hamilton, ML3, according to the Statutory Test set out in Regulation 5(10) of the Regulations.

The Chair continued to explain the procedures to be followed as outlined within the guidance notes circulated with the papers for the meeting, 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 Govan to speak first in support of his application.

Mr Govan read the following pre-prepared statement:

- "1. I think it is desirable to award a pharmacy contract at 175 Low Waters Rd in Hamilton. I believe that by outlining the reasons for this you will come to the same conclusion.
- 2. The first point to consider is the neighbourhood served. The Area Pharmaceutical committee defines the neighbourhood boundaries as North- The roundabout at Johnson Rd, West- Laigh Bent playing fields, East- the Meikle Burn and South- the Hamilton town boundary. This is a large area stretching 1.6 miles from North to South and consists of many distinct smaller neighbourhoods as can be seen on the map of Hamilton. The area is currently served by three pharmacies however the Lloyds and Boots pharmacies next to Portland Park medical centre are at the northernmost tip of the neighbourhood and primarily serve the patients of Portland Park medical centre and the population who live in Silvertonhill and towards the town centre. The more specific areas served by our proposed pharmacy are Fairhill, Cadzow, Eddlewood, Meikle Earnock and Woodhead Green. This area is currently served by two GP practices: these being Cadzow health centre and Low Waters medical centre but only by the Boots health centre pharmacy at Low Waters medical centre. More specifically the shop is zoned within a village and neighbourhood centre as specified by the local council which extends from Hall St to Mill Rd. This designated area is already served by many amenities such as Cadzow health centre, Neil Gordon and Associates dental surgery and a variety of local shops. The addition of a pharmacy would therefore be entirely compatible with the policy of the local council. The shop is conveniently located on the main road and bus route to and from Hamilton town centre and has parking either at the health centre for those that are coming straight from the surgery or on street.
- 3. Secondly I would like to explain details of our proposal and some of the advantages I believe it offers. This will obviously be an independent pharmacy. I am not suggesting that independent pharmacies are superior to multiples however Hamilton currently only has one independent pharmacy and I do believe that with the increasing difficulty in the supply of many medicines it is in the patients interest to have a pharmacy service with access to the widest range of suppliers and this can only be achieved by a greater variety of pharmacy contractors. The pharmacy itself will contain a consultation room and will offer a full range of NHS services including-Minor Ailments, Smoking Cessation, NHS Chlamydia Testing and Treatment, NHS emergency contraception supply, urgent supply out of hours, Compliance needs assessment and supervised supply of methadone. In addition to these core NHS services we will offer BP monitoring, a full delivery service, a weight loss programme and home visits by a pharmacist to house bound patients who may have pharmaceutical care issues but cannot get to a pharmacy to discuss them. This can be achieved as my wife and I are both pharmacists and so one or other will be able to carry out these visits during normal shop hours. With an ageing population, the launch of the Chronic Medication Service and the emphasis on primary care I believe that this is desirable for patients and will result in a better standard of service.
- 4. I now want to move on to the specific reasons why granting this contract is desirable.

One of the primary reasons is the increased population seen in the area and the proposed increases to come. In recent years there have been substantial housing developments at Eddlewood and more recently at Torheads farm. There is also currently a smaller development of 77 flats being built on Low Waters Rd and new flats have been completed at Warren Rd which is just off Low Waters Rd. In addition to this South Lanarkshire Council has designated the area a Community Growth Area in its report South Lanarkshire Local Plan 2009. As a result of this Hamilton West Consortium has submitted plans for a very substantial development of 2000 homes at Meikle Earnock Rd adjacent to Torheads farm. There are also council proposals for 100 new homes to be built at Cadzow bing and 43 homes at Eddlewood farm and a further 22 flats at Warren Rd. The additional population these future developments will bring added to the increase from the existing developments I believe make it desirable for an increase in pharmacy provision.

- 5. The next reason I think the contract is desirable relates to the proximity of pharmacies to GP surgeries in Hamilton.One of the main drivers for pharmacy location has always been proximity to GP surgeries. Pharmacies close to surgeries have the obvious advantage of being convenient for patients who have been at the doctors and are also ideally placed to sort out any problems which may arise from a particular prescription. The goal here must surely be for all patients no matter which surgery to have comparable access to pharmacy services. Currently at Cadzow Health Centre and Low Waters Medical Centre with only one pharmacy in close proximity per 12401 patients which is almost 25% higher than anywhere else and nearly four times the number than for patients from three of the other surgeries and within this imbalance there is clearly a more convenient service for those patients at Low Waters medical centre as a result of having a health centre pharmacy. This is particularly true for the elderly who are the single biggest users of pharmacies, who may not have transport and who in this instance could struggle with the walk up the hill to Low Waters. I believe it would be desirable to have a pharmacy located where a more comparable level of service could be offered to all patients.
- 6. The third main reason I believe the application is desirable relates to the opportunities offered by the new pharmacy contract. The new pharmacy contract is much more service based than was previously the case. This means a greater chance to be involved in patient care but also an increase in workload and a need for greater communication and working relationships with the local surgeries. Emas, smoking cessation, Chlamydia testing and emergency contraception supply while being beneficial for patients and reducing the workload for GP surgeries has inevitably had a resulting increase in workload for pharmacies which can put a strain on existing pharmacy services especially when they are already very busy as is the case with Boots Low Waters Medical Centre . The Chronic medication service will result in patients registering with pharmacies and involves collaborative working between gp's and community pharmacists to enable the pharmaceutical care for patients with long term conditions. The process of identifying patients, assessing any issues and agreeing a pharmaceutical care plan is again time consuming and I believe in an area with so many patients and an expanding population it would be desirable to have an increase in pharmacy provision to ensure that CMS is implemented and works effectively. One of the basic principals of the new pharmacy contract was to take patients out of GP surgeries and to enable them to access some services directly from pharmacies which are often more conveniently located. This is certainly true with our proposal as previously stated the pharmacy is close to other regularly accessed amenities and

zoned within a village and neighbourhood centre as defined by the council.

7. Finally I would like to address the various correspondence received in relation to the application. I of course welcome the response of no objection from the Lanarkshire Area Medical Committee but would like to respond to the three objections. The area pharmaceutical committee objected that there were already three pharmacies within the neighbourhood boundary. I believe this is too blunt a statistic and takes no account as to where within the neighbourhood the pharmacies are, where the GP surgeries are and where the population growth has and will take place. People who live towards the South of Hamilton live up to one and a half miles from the two pharmacies at Portland Place and I do not think that most would really consider themselves part of that neighbourhood or use the pharmacies there with any regularity. It is also I think significant that Lloyd's pharmacy who own one of the three felt no reason to object to the application. I think the objection from Right Medicine lacks relevance as they are a town centre pharmacy serving a different patient demographic and area from which we intend to. As the closest pharmacy it is entirely understandable that Boots should object to the application but as can be seen from GP list number's to Pharmacy this is an exceptionally busy pharmacy at present and with the introduction of CMS and future population expansion they will only get busier. Whilst I am sure Boots will obviously not see this as a problem it may not be in the best interests of the patients. I believe that to ensure all the potential benefits of the new pharmacy contract are fully realised then it is desirable to award another pharmacy contract in the area. I would like to thank you for your time and look forward to answering any questions you may have.

The Chair then invited questions from Mr Noel Wicks, Right Medicine Pharmacy, to Mr Govan.

Mr Wicks asked Mr Govan why he had chosen to apply to close at 1pm on Saturdays when the normal NHS Lanarkshire hours of service are 9am – 5pm on Saturdays. Mr Govan replied that the Board's model hours of service provided for one half day closure and that these hours take into account the fact that the nearby Cadzow Health Centre is closed for the full day. This led Mr Wicks to ask him why he didn't want to mirror the opening times of Cadzow Health Centre and was advised that he would open at 8am if there was demand for services at that time. Mr Wicks then stated that in his opinion the opening times of Boots Pharmacy covered a greater timespan than he proposed and that given the ease of access between his proposed site and Boots, indeed a range of pharmaceutical services within the town centre area, there was no inadequacy of service and thus no need for an additional contract, this was further compounded by the lack of complaints regarding access to pharmaceutical services.

Mr Wicks then turned his attention to the current usage of the premises being a domicile residence asking Mr Govan if he had approval by South Lanarkshire Council to change. Mr Govan replied that he had submitted an application and awaited notification of the outcome. Mr Wicks remarked that he doubted whether approval would be granted given the large front step to access the premises, and was advised that Mr Govan's architect had spoken to South Lanarkshire Council regarding this and that they had indicated that the proximity of other commercial units may give rise to them being granted approval on exception, however they expected to learn the exact outcome in approximately 7-8 weeks. Mr Wicks then asked for more information on the new housing developments he referred to in his presentation asking

if building work had started. Mr Govan advised that whilst building work had not commenced it was expected to be complete by 2012. Mr Wicks remarked that it was unlikely that potential residents would move GP if they relocated within the town and that this would have no effect on the need for an additional pharmaceutical contract.

Having ascertained that Mr Wicks had no further questions, the Chair then invited questions from Members of the Committee in turn to Mr Govan.

Mr Murray was the first member invited to ask questions seeking clarification on the actual location of the pharmacy as he was unclear from his site visit. Mr Govan confirmed that it was the bottom flat and when asked he was able to table plans for shopfitting and internal layout. Mr Murray sought reassurance regarding the barriers to access for disabled patients and Mr Govan intimated that whilst there was an issue with the steepness of the step they had considered using a portable ramp. Mr Murray remarked that he doubted the efficacy of this given the narrow pavement and limited access to which Mr Govan replied that given that the majority of flats in the area are used for retail purposes people must be able to access them.

Mr Woods then asked Mr Govan to elaborate on where he felt there was an inadequacy of existing services in the neighbourhood. Mr Govan explained that the neighbourhood defined by Area Pharmaceutical Committee was big and all the areas merge into each other without a clear cut off. Whilst there were 2 pharmacies at Portland Park, and 1 at Low Waters Medical Centre there is no pharmacy provision for the housing stock further south. Mr Woods replied that his focus seemed to be based on potential developments not this moment in time and he was advised that there had been no increase in pharmaceutical provision since the completion of the Torhead estate which is of considerable size. Mr Govan also referred to a limited availability to Monitored Dosage Systems which indicated what he felt an inadequacy of core services, which could be further affected due to the anticipated time consuming nature of Chronic Medication Service. When asked if that was the only evidence he wished to provide of inadequacy he referred to his experiences of doing locum work within Hamilton and that he was unaware of the availability of Methadone provision which could also be affected with the commencement of CMS.

Mr Sinclair was then invited to ask questions of Mr Govan and enquired as to whether he had any experience in operating or establishing a pharmacy given his current locum status and was advised that he worked within Carfin Pharmacy when it opened a few years ago. Mr Sinclair asked him if this had helped establish a fulsome business plan and was advised that one had still to be completed. Mr Sinclair then asked if he had taken into account any delays in obtaining planning consent and approval for change of usage, seeking comfort that he could open the pharmacy within six months should the application be granted. Mr Govan advised that plans had been drawn up and submitted to South Lanarkshire Council and that he expected to hear the result of the application beginning of July. When questioned about wholesalers he intimated that he has friends who own pharmacies and that they use Alba Pharm therefore he would probably use them too.

Mrs Park chose to ask Mr Govan to talk her through the boundary of his neighbourhood on the map giving some background and opinion leading to his choice of definition. Mr Govan obliged and referred to the growth in population due to the housing developments, when asked for an estimation in the increase in population he stated that there were approximately 2000 homes in the Meikle Earnock area with others in the periphery therefore he guessed around 2500 homes resulting in 5000 people given average occupancy. Referring to his lack

of business plan and contingency Mrs Park then asked for further detail regarding the modifications necessary for the proposed premises and change of use from residential to commercial. Mr Govan intimated that there were two internal walls to be knocked down (one of which was load bearing), and that whilst he had no direct experience the shopfitters he had spoken with were confident that there would not be any difficulty in opening within six months. With regards to staffing levels he anticipated both himself and his wife being the main pharmacy cover with two further full-time members of staff – one in the shop front the other being a dispenser.

Having no further questions from Mrs Park, Mr Mallinson was then invited to question Mr Govan. Mr Mallinson enquired why he had chosen to stop his neighbourhood boundary at Eddlewood and not continue further up Low Waters Road towards the Carrigan's restaurant and shop development. Mr Govan remarked that he had considered this but there were no units available and that it would take him further away from Cadzow Health Centre where he sees the imbalance in pharmaceutical provision. Mr Mallinson then asked him for his rationale in locating beside the medical practice suggesting it was convenience for patients, Mr Govan agreed stating that it was desirable for patients. Mr Mallinson wished to explore this concept further stating that he had difficulty in understanding his reference to servicing the Health Centre as despite the name it only had one practice located within and that given that 80% of prescriptions were issued on repeat and the long established collection & delivery services within the area, why was there any need or benefit to patients for a new pharmacy to be hosted in close proximity when it could be demonstrated that the majority of patients did not attend the practice to obtain prescriptions. Mr Govan explained that he would provide a face to face service for the patients who attended for the 20% non repeat prescriptions and sort out any problems or queries they had in a more personal way. Mr Mallinson highlighted the need to satisfy the criteria of the Statutory Test which did not include the notion of convenience asking why he had referred to the Mill Road pharmacy being 500 meters away suggesting that this was an unacceptable walk. Mr Govan clarified that he was not suggesting that it was a long walk but it was not desirable for patients given that other areas in the town involves a shorter distance for access, Mr Mallinson then referenced the age of the pharmacies and that there locations predated the 1987 control of entry arrangements.

Having ascertained that there were no further questions for Mr Govan the Chair then asked Mr Noel Wicks, Right Medicine Pharmacy to state his representation.

Mr Wicks thanked the Chair then read the following pre-prepared statement:

"Good morning ladies and gentlemen and thank you for allowing me to come along and present today.

Firstly we would define the neighbourhood to be the same as that described by the APC. The applicant has mentioned that the council have zoned the neighbourhood differently but we do not believe this makes it a neighbourhood for all purposes. Within this neighbourhood there are three pharmacies all of which seem to provide a more than adequate pharmaceutical service to the neighbourhood. The nearest pharmacy is on a few hundred metres away with the others located a bit further down the road situated on a busy bus route.

The applicant is not proposing any services or opening hours outside what is already available. Indeed what is proposed is less than what is already available at the nearest pharmacy as it is open from 8am to 6pm weekdays and 9am to 5pm on Saturdays.

The premises from which the applicant intends to deliver services is in our opinion below the standard of that required from a modern community pharmacy and well below that of other local pharmacies. We have major concerns over disabled access due to the large step up into the premises and the ability to have private consultations in such a small area. We also do not believe the required changes could be made within the six months timescale required as the applicant has not even lodged applications or received letters of comfort from the council.

The applicant has mentioned convenience on several occasions during his speech however we would argue that for the neighbourhood as the applicant describes it the suggested premises are far from convenient. The new housing referred to is all to the south of the proposed premises and thus the patients in the suggested area would not benefit from any added convenience by granting this contract.

The applicant has failed to show any inadequacy of services to the neighbourhood and nor am I aware of any complaints from local residents regarding the provision of services. I am not aware of any restrictions on services such as methadone places or dosette trays but in either case our own pharmacy has unlimited places for such services.

Based on these facts the applications should be rejected on the grounds that it is neither necessary or desirable to grant it in order to secure adequate provision of pharmaceutical services to this neighbourhood."

The Chair invited Mr Govan to ask questions of Mr Wicks.

Mr Govan asked Mr Wicks why he did not see a housing development which was four times larger than any other development in South Lanarkshire in close proximity to a pharmacy in necessary or desirable to patients. Mr Wicks replied that the current financial climate may impede the development going ahead despite the Council's intentions or aspirations and that if it did it would not result in a significant growth or population increase in the neighbourhood population merely a redistribution from local vicinities.

Having ascertained that Mr Govan had no further questions to ask of Mr Wicks, the Chair then invited Members of the Committee to pose questions to Mr Wicks.

When invited Mr Murray intimated that he had no questions to ask of Mr Wicks.

Mr Woods asked Mr Wicks for evidence of his reference that the three existing pharmacies located closest to the proposed unit provided a more than adequate provision of service. Mr Wicks referred to having visited the pharmacies, the availability of parking facilities, wide ranging hours of service, and that they were hosted within bright and modern premises with excellent facilities. Mr Woods asked him for a measure of adequacy from a customer perspective, and was advised that the fact that patients tend to have a particular favourite pharmacy to use then it would indicate that they have a good service experience, and that in the absence of conducting a patient satisfaction survey the pharmacies themselves would be able to monitor their business success via their individual levels or stability of prescription numbers.

Mr Sinclair then asked Mr Wicks on his views of the availability of Monitored Dosage Systems and how they could help address Mr Govan's reference to the limited accessibility to this service. Mr Wicks replied that they had spare capacity to provide increase coverage dependent upon any patient's actual need, however he was unaware of any current deficiency, furthermore they are located within easy reach of the proposed unit thus distance would not be a limiting factor.

Mrs Park then asked if he could give an indication of the impact a new pharmacy opening would have on their level of business. Mr Wicks replied that whilst it would have an impact as they consider themselves to provide a service to this area it would not "put them out of business" however the point is more about the correct process for deciding where pharmacies should be and not protecting viability.

Mr Mallinson was the final member of the Committee having a question for Mr Wicks, asking him for an indication of what he felt was an acceptable size for a modern day pharmacy. Mr Wicks advised that he would consider any property less than 40-45m2 to be a small premises, and that it was extremely hard to determine the layout of Mr Govan's proposed unit. When Mr Mallinson asked him if he would have any objections to Mr Govan's plans being tabled at the meeting. Mr Wicks gave his consent. It was noted that there was no specific internal layout provided on the plans.

Having ascertained that there were no further questions to either the applicant or interested parties, the Chair then invited the Mr Wicks to sum up her representation.

Mr Wicks remarked that he felt he had made his main points within his representation clear in that the applicant had failed to show or provide any evidence of inadequacy within the town as a whole regardless of his defined neighbourhood. Indeed given that there was only a very short distance to the closest existing pharmacy which was easily accessible, the lack of guarantee that the premises could be made DDA compliant, and that the proposed hours of service were less than currently offered within the town on all bases the application was demonstrated to be neither necessary or desirable and should be rejected.

The Chair then invited Mr Govan to sum up in relation to the application.

Mr Govan stated that he had covered all the points in support of his application within his presentation and that all he wished to say was that he would offer home visits which clearly was an extra service for housebound patients. His experience of working in Hamilton for 10 years has allowed him to establish and recognise a clear need for an additional pharmaceutical contract and in his opinion the application should be granted.

Retiral of Parties

The Chair then invited the Applicant and Interested Parties 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 Govan and Mr Wicks 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 Hamilton, noting the location of the proposed premises, the pharmacies, the general medical practices, and some of the facilities and amenities within
- ii. map showing the location of the Doctors' surgeries in relation to existing Pharmacies in the town of Hamilton, and the site of the proposed pharmacy
- iii. prescribing statistics of the Doctors within the townships of Hamilton and Blantyre during the period December 2009 to February 2010
- iv. dispensing statistics of the Pharmacies within the townships of Hamilton and Blantyre during the period December 2009 to February 2010
- v. demographic information on the townships of Hamilton and Blantyre taken from the 2001 Census
- vi. comments received from the interested parties including existing Pharmaceutical Contractors in the town of Hamilton 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 townships of Hamilton and Blantyre
- viii. comments received via e-mail from Administration Advisor, Administration Services, Corporate Resources, South Lanarkshire Council as part of the wider consultation Process

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

in considering the evidence submitted during the period of consultation and presented during the hearing, and recalling observations from their site visits, deemed the neighbourhood to be the area starting at Chantinghall Bridge heading along Bent Road into Quarry Street down to the railway line, then travelling East along the railway line to meet Meikle Burn continuing downwards to take in Eddlewood, traversing Strathaven Road taking in Meikle Earnock and Woodhead Green as far as Harlequin Court and Pembury Crescent to join the burn that flows through Neilsland Park and following it all the way back to Chantinghall Bridge.

In reaching this decision the Committee was of the opinion that the neighbourhood constituted a distinct area bounded by the natural boundaries of the burn East and West, a major road and railway line in the North, and the boundary of recognised housing estates in the South. In addition it encompasses well defined and recognised communities.

(ii) Existing Services

THE COMMITTEE

recognised that there were three existing Pharmacies within the defined neighbourhood (your local Boots pharmacy, 82 Portland Place, your local Boots pharmacy, 9 Mill Road, and Lloydspharmacy, 57 Portland Place), with a further 3 Pharmacies located in close proximity on the periphery (Right Medicine Pharmacy, 7 Brandon Street, Lloydspharmacy, 8 Quarry Street, and Boots Chemist, 44 Regent Way) providing services to the neighbourhood.

(iii) Adequacy

THE COMMITTEE

discussed the test of adequacy and agreed that existing services were adequate, and that from the report compiled provided by the office of the Chief Pharmacist – Primary Care it was demonstrated that they provided a comprehensive range of Pharmaceutical Services alongside the core requirements of the new contract to the neighbourhood. The applicant argued that there was a lack of access to Monitored Dosage Systems however this did not sway the Committee as it was not backed by any strong evidence to suggest that it was a widespread problem, and that the Health Board had not received any complaints regarding availability. Furthermore during the hearing Mr Noel Wicks, Web Pharmacy Ltd, t/a Right Medicine Pharmacy, indicated that they had plenty of capacity to provide this service.

THE COMMITTEE

also gave thought on whether the existing services were accessible to patients including vulnerable members of society e.g. those who are elderly, non ambulant, on low incomes, or parents with young children in prams. In considering challenges of

access by those resident within the distant parts of the neighbourhood the crux point was that for those patients on the periphery it was just as easy for them to travel to existing Pharmacies as it was the proposed site therefore there was no additional benefit. Furthermore for patients that require to use Public Transport there is a good bus route and service traversing the main road through the neighbourhood which gives good access to all existing Pharmacies within the neighbourhood, in addition it terminates at the bus station where there is a Pharmacy located in very close proximity. Lastly, the distance between the closest existing Pharmacy is only 500 metres which is unlikely to present a challenge unless the patient has significant disability problems however the applicant was unable to provide assurance or evidence to the Committee to convince them that the proposed premises could become DDA compliant.

Accordingly, following the withdrawal of Mr D Sinclair and Mrs J Park in accordance with the procedure on applications contained within Paragraph 6, Schedule 4 of the National Health Service (Pharmaceutical Services)(Scotland) Regulations 2009, as amended, 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 1995, as amended.

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