

MINUTE: PPC/2016/01

Minutes of the meeting of the Pharmacy Practices Committee (PPC) held on Monday 11 July 2016 at 09:30 hours in Training Room 2, Law House, Airdrie Road, Carluke, ML8 5ER

The composition of the PPC at this hearing was:

Chair: Mr Michael Fuller

Present: Lay Members Appointed by NHS Lanarkshire Board

Mr Charles Sargent
Mr John Woods

Pharmacist Nominated by the Area Pharmaceutical Committee (not included in any Pharmaceutical List)

Mrs Janet Park

Pharmacist Nominated by Area Pharmaceutical Committee (included in Pharmaceutical List)

Mr Parvez Aslam

Secretariat: Ms Jenna Stone, NHS National Services Scotland, Scottish Health Service Centre (SHSC)

APPLICATION BY ORBISTON PHARMACY

There was submitted an application and supporting documents from Mr John Connolly, Orbiston Pharmacy, received on 25 May 2016 for inclusion in the Pharmaceutical List of NHS Lanarkshire Board in respect of a new pharmacy at 23 Lawmuir Road, Orbiston, Bellshill, ML4 2BZ.

Submission of Interested Parties

The following documents were received:

- i) Letter received on 14 June 2016 from Boots UK Ltd
- ii) Letter received on 17 June 2016 from Elixir Healthcare Ltd
- iii) Letter received on 20 June 2016 from Lloyds Pharmacy Ltd
- iv) Email received on 28 June 2016 from Lanarkshire Area Pharmaceutical Committee

Correspondence from the wider consultation process undertaken jointly by NHS Lanarkshire and Orbiston Pharmacy

- i) Consultation Analysis Report (CAR)

1. Procedure

- 1.1. At 09:30 hours on Monday 11 July 2016, the Pharmacy Practices Committee (“the Committee”) convened to hear the application by Orbiston Pharmacy (“the Applicant”). The hearing was convened under Paragraph 2 of Schedule 3 of The National Health Service (Pharmaceutical Services) (Scotland) Regulations 2009, as amended, (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 was 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”.
- 1.2. **The Chairman** welcomed all to the meeting and introductions were made. When asked by **the Chairman**, members confirmed that the hearing papers had been received and considered and that none had any personal interest in the application. **The Chairman** informed members that there would be representations from the following Interested Parties: Lloyds Pharmacy Ltd, Elixir Healthcare Ltd, Boots UK Ltd and Bellshill Community Council.
- 1.3. It was noted that Members of the Committee had previously undertaken site visits to Orbiston independently during various times of the day and week to gather a sense of the natural working patterns of residents and visitors to the various premises. All confirmed that in doing so each had noted the location of the premises, pharmacies, general medical practices and other amenities in the area such as, but not limited to, banks, post office, supermarkets, churches, schools and sports facilities.
- 1.4. **The Chairman** advised that Ms Stone was independent from the Health Board and was solely responsible for taking the minute of the meeting.
- 1.5. There was a brief discussion on the application and **the Chairman** then invited Members to confirm an understanding of these procedures. Having ascertained that all Members understood the procedures **the Chairman** confirmed that the Oral Hearing would be conducted in accordance with the guidance notes contained within the papers circulated. The Applicant and Interested Parties were subsequently invited to enter the hearing.

The open session convened at 10:10 hours

2. Attendance of Parties

- 2.1. **The Chairman** welcomed all and introductions were made. The Applicant, Orbiston Pharmacy was represented by Mr John Connolly, accompanied by Mr Arif Hanif. From the Interested Parties eligible to attend the hearing, the following accepted the invitation: Mr Tom Arnott of Lloyds Pharmacy Limited (accompanied by Mr Kenny McWhirter), Mr Dave Greer of Boots UK Ltd (accompanied by Ms Tracey Wilson), Mr Umar Razzaq of Elixir Healthcare Ltd, t/a Motherwell Pharmacy (accompanied

by Mr Kenneth Brown), and Mr Thomas Taylor of Bellshill Community Council (accompanied by Mrs Theresa Taylor).

- 2.2. **The Chairman** advised all present that the meeting was convened to determine the application submitted by Orbiston Pharmacy in respect of a new contract at the proposed premises of 23 Lawmuir Road, Orbiston, ML4 2BZ. The Chairman confirmed to all parties present that the decision of the Committee would be based entirely on the evidence submitted in writing as part of the application and consultation process, and the verbal evidence presented at the hearing itself, and according to the statutory test as set out in Regulations 5(10) of the 2009 **Regulations as amended which the Chairman read out in part:**
- 2.3. “5(10) an application shall be ... granted by the Board, ... only if it is satisfied that 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...”
- 2.4. **The Chairman** emphasised the three components of the statutory test and confirmed that the Committee, in making its decision, would consider these in reverse order, i.e. to determine the neighbourhood first and then decide if the existing pharmaceutical services in and into that neighbourhood were adequate. Only if the Committee decided that existing services were inadequate would the Committee go on to consider whether the services to be provided by the Applicant were necessary or desirable in order to secure adequate services. That approach was accepted by all present.
- 2.5. **The Chairman** advised that Ms Jenna Stone from NHS National Services Scotland would be present throughout the duration of the hearing for the purposes of providing Secretariat support to the Committee. The Chairman confirmed that Ms Stone was independent of Lanarkshire NHS Board and would play no part in either the public or private sessions of the Committee.
- 2.6. Having ascertained that all parties understood the procedures, **the Chairman** confirmed that the Oral Hearing would be conducted in accordance with the guidance notes contained within the papers previously circulated.
- 2.7. **The Chairman** confirmed that all members of the Committee had conducted site visits to the premises on different days and at different times in order to understand better the issues arising out of this application. **The Chairman** also confirmed that no member of the Committee had any interest in the application.
- 2.8. **The Chairman** asked for confirmation that all parties fully understood the procedures to be operated during the hearing as explained, had no questions or queries about those procedures and were content to proceed. All confirmed agreement. The Chairman concluded the procedural part of the hearing by reminding each party that there could only be one spokesperson.
- 2.9. The Chairman acknowledged that an issue had already been raised regarding the data on complaints, on which Lloyds would elucidate in their statement.

3. **Submissions**

The Chairman invited the Applicant to speak first in support of the application

3.1. **Applicant's Presentation**

The Applicant read from a statement which was as follows

3.1.1. The Applicant thanked the Committee for the opportunity to present his case and introduced his business partner Mr Hanif, and explained that they were both pharmacists and regularly practised in Lanarkshire.

3.1.2. The Applicant said that he was acutely aware that applications for this neighbourhood had been heard and refused before, and that some of the Committee Members may have also sat on one of those hearings. The Applicant said that he realised that it could be difficult to come into this hearing and set aside those decisions and inferred that there may be a subconscious tendency to judge his application based on previous decisions and encouraged the Committee to put aside those previous hearings to one side and to hear his arguments that he was making and urged the Committee to listen to the views of the community representatives.

3.1.3. The Applicant acknowledged that part of the legal test that needed to be applied included consideration of the neighbourhood which he had defined on the maps. For clarity, the Applicant repeated the boundaries :

West: Hamilton road from the railway line to the south of the railway line in the north

North: the railway line

East: Motherwell Road from the railway line in the north to the open land south of Bankhead Avenue

South: The railway line and open land to the south of Orbiston

3.1.4. The Applicant explained that Hamilton Road and Motherwell Road were both busy main roads that were not easily crossed, and formed obvious boundaries, and that the railway lines also formed boundaries. The Applicant stated that railway lines and busy roads like those outlined above had been consistently considered to be boundaries in countless PPC and NAP decisions and in judicial guidance.

3.1.5. The Applicant said that Orbiston was a neighbourhood in its own right and people there considered themselves to be neighbours, but did not consider themselves to be neighbours of people who live in Hattonrigg or Mossend. The Applicant continued that there were many amenities and community facilities in Orbiston and it could be considered a neighbourhood for all purposes. The Applicant said that the Orbiston Neighbourhood Centre showed what a real neighbourhood and strong community was, and that there were many amenities, a lot of which were used by a large number of vulnerable people from within the neighbourhood, but

also a large number of people who came to the neighbourhood to use services, many of whom were extremely vulnerable.

- 3.1.6. The Applicant commented that he was not going to repeat the many statistics about the demographics of Orbiston that he had and requested the Committee to ask if they required further information. The Applicant mentioned that he had the statistics that Mr Razzaq had quoted when he applied for the same premises a few years earlier.
- 3.1.7. The Applicant reported that Orbiston had a population of over 5200 people, that it was a deprived area with lower levels of employment than the local and national average, had lower car ownership than the local and national average, that a higher proportion of the population were elderly and a higher proportion of the population were claiming benefits than the local and national average. All of those factors meant that the residents of Orbiston were more likely to be high users of pharmaceutical services and struggled to access these services.
- 3.1.8. The Applicant moved on to the decision regarding the adequacy of services and pointed out the issue with defining adequacy and inadequacy, and that it was not possible to be slightly inadequate –emphasising that a service was either adequate or inadequate.
- 3.1.9. The Applicant explained that adequacy had changed in his opinion, as the health service has changed, including the way in which pharmacies needed to interact and reach out to patients has changed. The Applicant continued that what Society considered to be the right thing had changed over time, and declared that adequacy had also moved on which was why he regarded it as so important that it should be re-examined with fresh eyes.
- 3.1.10. The Applicant said that it used to be considered adequate that a patient's pharmacy was just next to their GP surgery, but that this was no longer the case since the vast majority of prescriptions in this country were repeat prescriptions where people no longer needed to visit their GP to obtain them, and that people no longer needed to travel outwith their neighbourhood for their daily needs, as they used internet banking, had home delivery of groceries, and clothes and products were purchased online. The Applicant said that high streets were in decline as people did not go there in the same numbers as they previously used to.
- 3.1.11. The Applicant referred to local grocery stores which no longer bore any resemblance to what they would have looked like ten years previously, as a person could easily purchase their weekly shopping within one of these stores.
- 3.1.12. The Applicant claimed that Boots and Lloyds clung to an outdated model rather than embracing the changing needs of the population and that if one of them had relocated, then this hearing would not have been needed. The Applicant expressed frustration and annoyance that the larger pharmacies had not acted proactively and emphasised that times had changed.

- 3.1.13. The Applicant asked the Committee to consider the health benefits that would follow from people having access to his proposed pharmacy – from the number of GP appointments saved, hospital admissions saved and money saved that could be better spent in other ways within the NHS.
- 3.1.14. The Applicant stated that in his opinion, the distribution of the existing pharmacies was flawed, but had been created before the legal test had been introduced. The Applicant said that siting three pharmacies within a few yards of each other on Bellshill Main Street was wrong, outdated and not adequate for the people of Orbiston.
- 3.1.15. The Applicant said that the problem had existed historically across Scotland, but had been addressed in other areas by granting new contracts e.g. in North Motherwell where Mr Razzaq was based, and in Coltness in Wishaw where he operated another pharmacy. The Applicant said that Pharmacies continued to be clustered but stated that things had changed, which needed to be addressed, since the existing set up did not work – with over provision in some areas and inadequacy in others.
- 3.1.16. The Applicant said that adequacy needed to be considered for all residents – while it may be adequate for some, it may not be adequate for all. The Applicant continued that if the service was inadequate for even some of the neighbourhood, then the service was inadequate and the Committee must therefore grant the contract to address that inadequacy.
- 3.1.17. The Applicant asked the Committee lay members if they would be happy with this level of access for themselves, friends, family or vulnerable people with mobility problems that they knew. The Applicant referred to the map explaining that Hattonrigg, Mossend and New Stevenston, Forgewood in Motherwell and North Motherwell had pharmacies near the centre of their neighbourhoods, and claimed that it was an obvious gap in the service in Orbiston.
- 3.1.18. The Applicant said that although he was not sure of Mr Razzaq's position, he knew that Mr Arnott was a seasoned professional who would put a good case in order to protect the commercial interests of the employers.
- 3.1.19. The Applicant said that the Interested Parties would talk of the service level and number of complaints raised, and inferred that some complaints may not have been recorded. The Applicant referred to 11 complaints raised by the public over the past year and 13 raised for the previous year, which he felt was quite a high number, raised concerns with the different reporting methods and intimated that a further investigation should be undertaken, and wondered if there were further complaints that they were not aware of due to nil returns.
- 3.1.20. The Applicant referred to the public consultation report which had also highlighted a number of issues with the service provided, and said that the Interested Parties would talk of the bus service, and asserted that bus services did not reduce inadequacy. The Applicant said that the Interested Parties would probably refer to a street in the North of Orbiston and say that it was easier to get to the Main Street

which he did not deny, but said that the Interested Parties would not consider the streets at the southern part of the neighbourhood.

- 3.1.21. The Applicant said that although Mr Arnott may say that there had been a low number of responses received to the Consultation, he believed the response level was reasonable, that it was difficult to get responses in these circumstances, and that it was a “new thing” – a joint consultation with the Health Board. The Applicant said that the report provided a representation on how the public felt about the proposal.
- 3.1.22. The Applicant noted that neither New Stevenston Pharmacy nor Dicksons Pharmacy had objected to the application, which he felt demonstrated that other independent pharmacies could have changed their mind ..
- 3.1.23. The Applicant expressed surprise that Mr Razzaq was objecting since he had applied twice before, and had also provided figures on demographics, health issues and deprivation. The Applicant inferred that Mr Razzaq was present in order to -protect his own commercial interest.
- 3.1.24. The Applicant referred to the petition, which he believed lacked credibility. The Applicant said that the majority of signatories to the petition came from outwith the neighbourhood. The Applicant said that he had been informed that the petition had been orchestrated by an individual who had collected signatures by telling people that Orbiston Pharmacy would be giving out needles to drug addicts- claiming that the petition had been created on a climate of fear and a lie. The Applicant said that at no point in the Application had they mentioned that they would provide a needle exchange service and accused the petitioner of scaremongering. The Applicant said that negativity naturally came from the methadone and addition services, but that it showed that the people in Orbiston felt that there was an inadequacy.
- 3.1.25. The Applicant denied that application was about convenience, but necessity and the lack of adequate access to services.
- 3.1.26. The Applicant stated that he firmly believed that there was an inadequacy in Orbiston, and was not in the habit of making speculative applications. He understood the legal test well, as he had attended the training given by Central Legal Office and fully believed that his application met the legal test.
- 3.1.27. The Applicant continued that a pharmacy in Orbiston would make a real difference to people’s lives and asked the Committee not to deny the people of Orbiston proper access to a pharmacy and all the benefits that it could bring, and to consider how pharmacies had changed over the years, and referred to examples of pharmacies being granted in very similar neighbourhoods e.g. Coltness, Wishaw and North Motherwell.
- 3.1.28. The Applicant said that if it was established that the current services were inadequate, the Committee would then need to consider whether granting his application would secure adequate access to pharmaceutical services. The Applicant explained that the premises would be 650 square foot in size. The shop

would be extensively upgraded and fitted out to a high standard by a professional pharmacy shop fitting company to provide a modern cutting edge pharmacy with 2 consultation rooms that would fully comply with the requirements of the Equality Act 2010. They would provide all services in the pharmacy contract as well as any local services required, emphasising that the big difference would be that the new pharmacy would provide the services in an accessible way for the population of Orbiston. They would provide an enhanced delivery service staffed by trained members of the pharmacy team so that housebound patients or those who required a delivery would not simply be getting someone dropping off a bag of medication. They would provide counselling where appropriate and the member of staff would be able to identify whether the patient required any additional input from the pharmacist. The Applicant said that his pharmacists would be able to provide home visits to patients where required, which would give an enhanced level of care not currently available in the area.

- 3.1.29. The Applicant stated that granting the application would secure adequate access to services in the neighbourhood and it was necessary and desirable to grant this application to achieve this, summarising the neighbourhood population of Orbiston of 5200 people being deprived, elderly, having health issues, low car ownership and being high users of pharmaceutical services. The Applicant continued that there were currently no pharmaceutical services in the neighbourhood, that services which were provided from outwith the neighbourhood into it could not be considered adequate, and concluded that it was necessary for the Committee to grant the contract in order to secure that adequacy.
- 3.1.30. This concluded the presentation from the Applicant. **The Chairman** referred to the Applicant's statement at the beginning that the Committee may have subconscious tendencies and stated for the record that this was a new panel and would not rule on the basis of the preceding applications or appeals. The Applicant explained that he had wished to highlight the point to the interested parties, and the **Chairman** assured the parties that the decision made by the Committee would be based on information received in advance, given at the hearing and the debate that followed.
- 3.1.31. **The Chairman** asked Mr Arnott to clarify the point regarding the data supplied on complaints. Mr Arnott explained that he had recently been made aware that the data supplied was incorrect, and did not provide a true reflection of service levels, and that these had not been complaints made to the pharmacies, but through their own internal reporting system. **The Chairman** said that he had been informed that the issue related to complaints figures referred to by the Applicant which were for a year and not a quarter, and Mr Arnott confirmed.
- 3.1.32. **The Chairman** invited questions from the Interested Parties to Mr Connolly. Mr Arnott was invited to question the Applicant first.
- 3.2. **Questions from Mr Arnott to the Applicant**
- 3.2.1. Mr Arnott asked why he believed there was a need in Orbiston. The Applicant replied that the whole purpose of the PPCs was the challenge the pharmaceutical care needs and that just because an issue had not been identified, did not mean that the issue did not exist.

- 3.2.2. Mr Arnott referred to Liberton Drive and Strachan Street and asked if there were any pharmacies closer to these residents than the Applicant's pharmacy. The Applicant confirmed that there were people who would live closer to the existing pharmacies, as he had stated in his presentation.
- 3.2.3. Mr Arnott and asked how far the Applicant's premises was from Bankhead Avenue. The Applicant said that he was not sure. Mr Arnott said that it was further from the Applicant's proposed pharmacy than to existing pharmacies. The Applicant replied that he would not be surprised by the statistics provided by Mr Arnott as he was looking at inadequacy over the whole area, not for a specific street.
- 3.2.4. Mr Arnott referred to deprivation and asked about community housing to the south of the Applicant's neighbourhood. The Applicant acknowledged that there were varying degrees of affluence in Orbiston but stressed but said that this did not detract from the fact the area suffered from a huge amount of deprivation - some areas were in the top 5% and top 15% levels of deprivation. Mr Arnott said that people who lived south of Commercial Road were fairly affluent and referred to the Scottish Index of Multiple Deprivation "the Index" which consisted of 6505 geographical areas and said that the area south of Commercial Road did not come within the top third of deprived areas according to the Index (the area was ranked 4606/6505 with 6505 being the least deprived). and asked if the Applicant was aware that Orbiston was not in the top 39% of deprivation figures from the Index. The Applicant disagreed with the statistics provided and said that compared to the rest of North Lanarkshire, there were 28.9% of people claiming benefits of working age in his neighbourhood compared to a 24% average.
- 3.2.5. Mr Arnott asked how many people used the convenience store in Orbiston. The Applicant said that there was a high footfall and that the recently installed cash machine had taken 6000 transactions in a month which the Applicant regarded as a significant number, and there were always people in the store, which was stocked with a wide range of goods. The Applicant said that this did not detract from the lack of access to pharmaceutical services in and to the area.
- 3.2.6. Mr Arnott referred to the fact that there was no bank, post office or secondary school in the neighbourhood and asked if residents needed to travel outwith on a regular basis in order to access these services. The Applicant said that it would not be on a regular or frequent basis and emphasised that people going outwith to access services did not detract from the issue of inadequacy.
- 3.2.7. Mr Arnott asked who the four pharmacies on the Main Street serviced and the Applicant said it was not about who the current pharmacies serviced but the fact of inadequate access. The Applicant continued that although some people would work in Glasgow and visit a pharmacy next door to their office, this was about access for the people from the neighbourhood and said that the model was based on what existed before the legal test was introduced where pharmacies clustered around GPs in order to capture the prescriptions, and said that they had not moved with the times.

- 3.2.8. Mr Arnott asked why other contractors had not objected and suggested that it may be because it was the third time that this application had been made. The Applicant said no, and that that if contractors had objected, they would have been present at the hearing.
- 3.2.9. Mr Arnott referred to the petition and queried as to the nature of it. **The Chairman** explained that this document had been submitted with the meeting papers, and asked if Mr Arnott had received it. Mr Arnott confirmed that he had and apologised that he had only looked at part of it. The Applicant replied that someone had conducted a petition based on the premise that his proposed pharmacy would be providing the needle exchange service. The Applicant continued that most of the people who had signed the petition lived outwith Orbiston. **The Chairman** responded that the Committee would return to this point when they asked their questions.
- 3.2.10. Mr Arnott asked the Applicant if he would provide a needle exchange service and the Applicant said that he would not. Mr Arnott asked the Applicant if the Health Board told him that he needed to provide this service, would he refuse. The Applicant replied that the Health Board had said that there was no need for the service, and the needle exchange service had recently been closed due to lack of need. The Arnott pressed the Applicant, asking if in future they were required to provide this service, would the Applicant refuse. The Applicant said that it would depend on circumstances, and he would need to conduct a risk assessment, but repeated that there was currently no need, and this was a project to instil fear – by creating something out of nothing.
- 3.2.11. Mr Arnott asked if the Applicant would provide a delivery service, and the Applicant said that he would provide the enhanced delivery service.
- 3.2.12. Mr Arnott had no further questions and **the Chairman** invited Mr Greer to ask questions to the Applicant.

3.3. **Questions from Mr Greer to the Applicant**

- 3.3.1. Mr Greer asked the Applicant to explain his statement that the model was outdated. The Applicant said that traditionally, pharmacies were clustered around town centres and GP surgeries and said that the new contracts needed to address the inadequacies – to look at serving from within housing schemes and small neighbourhoods, and away from the town centres.
- 3.3.2. Mr Greer asked the Applicant to explain what made the model outdated and queried whether this referred to the provision of services. The Applicant replied that what had changed was the way that people wished to access services, and adequacy had therefore also changed, since people deserved and should receive good access to services, and that the model needed to change by making services more accessible. The Applicant said that pharmacies would lose out if they did not take heed of the changing way of the world, the same as the decline of the traditional high street shops, and urged that the model needed to change with the times and pharmacies needed to engage with local communities.

- 3.3.3. Mr Greer queried how many pharmacies had closed in Scotland and the Applicant said that Mr Greer was missing his point, which was that they needed to adapt and change.
- 3.3.4. Mr Greer asked the Applicant if he was saying that the pharmacies had never adapted, to which the Applicant responded that the existing pharmacies had failed to address the inadequacy in Orbiston.
- 3.3.5. Mr Greer referred to the neighbourhood which his pharmacy served and referred to the Applicant's comment about online purchasing and deliveries and asked if this service was not also available in pharmacies. The Applicant said that making deliveries did not replace adequacy, and stated that his delivery service would be a better model than Mr Greer's, by having trained delivery drivers.
- 3.3.6. Mr Greer referred to the complaints and asked how many there had been. The Applicant said that there had been 11 in the current year, and 13 from the previous year, and highlighted gaps in the report. Mr Greer asked about the nature of the complaints, to which the Applicant replied that there had been 7 complaints regarding accuracy of dispensing from one pharmacy. Mr Greer pressed the Applicant on the type of the complaints and the Applicant admitted that he did not have full information.
- 3.3.7. Mr Greer asked about the petition and the Applicant's assertion that someone had referred to the needle exchange, and said that he had read the petition and that in his opinion most people believed the services were adequate because there were already five pharmacies in Bellshill. The Applicant said that he had been informed that the person who had arranged the petition had had the opportunity to engage with the public through the Consultation Report but had chosen not to do so, and he treated the petition with scepticism because of the way in which it had been conducted.
- 3.3.8. Mr Greer asked if the Applicant agreed that people had the right to submit a petition and the Applicant replied that people had a right for their opinion to be heard, but not to have the wool pulled over their eyes. The Applicant said that there had been no control over the petition, since it had not been approved by the Health Board and the method of collection had not been vetted. The Applicant urged the Committee to disregard the petition which he believed had been conducted on the basis of a lie.
- 3.3.9. Mr Greer had no further questions and **the Chairman** invited Mr Razzaq to ask questions to the Applicant.
- 3.4. **Questions from Mr Razzaq to the Applicant**
- 3.4.1. Mr Razzaq read the statement of the petition "We the undersigned are objecting to the proposed new pharmacy at 23 Lawmuir Road, Orbiston, Bellshill ML4 2BQ on the basis that it is not needed" and asked the Applicant where it referred to needles. The Applicant agreed that this was not referred to but said that he had been informed locally that signatures had been gathered on that basis.

- 3.4.2. Mr Razzaq said that the Applicant had no proof and asked where it referred to that in the email trail, and the Applicant said that was not relevant.
- 3.4.3. Mr Razzaq referred to the Applicant's comment that many signatories had not been from Orbiston and said that he had counted 90 such signatures, and asked whether the Applicant felt this was a significant number. The Applicant replied that since the petition had been conducted on the basis of fear and lies, he disagreed that it was a significant number.
- 3.4.4. Mr Razzaq referred to the Applicant's comment that the railway line formed a barrier and asked if he had crossed the road at Hamilton Road and Motherwell Road. The Applicant confirmed that he had. Mr Razzaq asked if there was a physical barrier preventing people crossing the road. The Applicant said that there were many reasons why neighbourhoods used physical boundaries and said that the railway line formed a physical boundary in Orbiston, and that there was also a shift in area type which, combined with the railway line, the Applicant believed should therefore be regarded as a boundary. Mr Razzaq remarked that people could cross the road, and the Applicant stated that Mr Razzaq was missing the point as to why it formed a boundary; that it did not just refer to a barrier that could not be crossed, which he felt had been demonstrated in previous PPCs and appeals.
- 3.4.5. Mr Razzaq asked if Mansfield Road was within the Applicant's neighbourhood, and the Applicant replied that it was not. Mr Razzaq commented that was where the Orbiston Post Office was located, asking the Applicant if he agreed that residents would need to travel outwith the neighbourhood in order to access the post office in order to post a letter. The Applicant replied that people could post letters from the local shop in addition to using online postal services and stated that, in his opinion, the post office service was in decline which explained why so many of them had been closed. The Applicant added that although a post office was not available in the neighbourhood, this did not mean that the neighbourhood did not need a pharmacy.
- 3.4.6. Mr Razzaq had no further questions and **the Chairman** invited Mr Taylor to ask questions to Mr Connolly.
- 3.5. **Questions from Mr Taylor to the Applicant**
- 3.5.1. Mr Taylor had no questions and **the Chairman** turned to the Committee and invited Mr Aslam to ask questions to the Applicant.
- 3.6. **Questions from Mr Aslam to the Applicant**
- 3.6.1. Mr Aslam referred to the Applicant's comment that there were many amenities in the neighbourhood and said that he could not see any major amenities. The Applicant said that there was a pub, bookmakers, hairdresser, primary schools, nursery, a business centre, a bowling centre, the Bellshill Community Centre, a church, YMCA and said that although he realised some amenities may be hidden, they were still there.

- 3.6.2. Mr Aslam asked how residents had access to amenities like the dentist, optician, post office, as there were currently none in the neighbourhood. The Applicant said that access to dentist and optical services was not required in the same way.
- 3.6.3. Mr Aslam asked the Applicant to confirm that he had not submitted detailed plans for the pharmacy, and the Applicant confirmed that he had not. Mr Aslam asked whether the unit next to the hairdresser was part of a combined unit, and the Applicant confirmed that it was one combined unit.
- 3.6.4. Mr Aslam referred to the Applicant's delivery service in his other pharmacy and asked how many home visits were conducted. The Applicant said that they would use the second pharmacy to provide cover in order to enable them to offer the service, and that on average there were 7 or 8 deliveries a month at his other pharmacy in Wishaw.
- 3.6.5. Mr Aslam referred to his site visit where he had noted many houses with cars in their driveways, and that many had two vehicles, and said that he was unable to agree with the Applicant's statement that that area was deprived. The Applicant replied that although the Committee may have seen people with cars, the overall picture compared to the national average was less.
- 3.6.6. Mr Aslam referred to the Applicant's comment about Hamilton Road being a boundary and asked whether the people of Mansfield Road should be within the neighbourhood. The Applicant said no, which had been reflected in the Consultation Analysis Report – Hamilton Road was very busy and people who lived on the opposite side of the road classed that as the West End and not Orbiston.
- 3.6.7. Mr Aslam referred to the earlier questions asking whether the Applicant would provide a needle exchange service if it was discovered to be a requirement at some point in the future, and asked why the Applicant had been reluctant to provide a simple yes or no answer. The Applicant said that this was because he did not know. He would need to be convinced that there was a need, and at that time he would undertake a risk assessment. The Applicant added that he had not investigated the possibility thoroughly in order to make an informed decision at this stage.
- 3.6.8. Mr Aslam had no further questions and **the Chairman** invited Mrs Park to ask questions to the Applicant.
- 3.7. **Questions from Mrs Park to the Applicant**
- 3.7.1. Mrs Park asked about the lease and the Applicant explained that the lease was with North Lanarkshire Health Board and the LLP was separate from the Council, and confirmed the lease was already in place.
- 3.7.2. Mrs Park asked if the Applicant was confident he could open within the proposed timescale of three weeks, and the Applicant confirmed, and added that he had done this before, as they had a good team in place.

- 3.7.3. Mrs Park asked about the comments on access to parking contained in the Consultation Analysis Report. The Applicant said that parking in the area was good and that he did not believe there were any issues with parking and had been surprised by the comments raised. The Applicant said that there was parking available outside the shop and if necessary, he would speak to the local council about the possibility of creating drive in parking bays, since there was sufficient land available. The Applicant was confident that any parking issues could be addressed.
- 3.7.4. Mrs Park asked whether the Applicant had offered the needle exchange or methadone service in his other pharmacy. The Applicant said that in his own pharmacy they did not offer, and had never offered, the needle exchange service as there was no need. The Applicant confirmed that his pharmacy had taken part in the substance abuse service but explained that it not been a large part of his business.
- 3.7.5. Mrs Park asked if the Applicant was aware of any problems arising from pharmacies offering the substance abuse service, or whether he had himself experienced any problems arising from offering the substance abuse service. The Applicant confirmed he had not, and added that although people who used the substance service had problems, the pharmacists had a duty to look after them and engage with them as humans and also to ensure that they did not cause any issues.
- 3.7.6. Mrs Park asked for more detail about the plans for the proposed pharmacy. The Applicant replied that they had a blank canvas and, although some people would like to see a visualisation of the premises, he felt that this was putting the cart before the horse. The Applicant added that the majority of space would be given over to the dispensary, consultation areas and space for displaying the products.
- 3.7.7. Mrs Park asked about staffing levels. The Applicant replied that they had pharmacies in Coltness and East Kilbride, and relief pharmacists could provide double cover over the lunch breaks, in order to maintain a full service. The Applicant added that because his pharmacies were fairly close together, the pharmacists could cover for certain periods – such as home visits and rest breaks. With regard to other staffing levels, the Applicant said that they would recruit locally and use existing staff to support while the recruitment process was ongoing and remarked that he was in a fortunate position to use his other pharmacies to ensure they had staff levels covered comprehensively.
- 3.7.8. Mrs Park referred to complaints in the Consultation Analysis Report that customers had been unable to collect their prescriptions during a lunchhour and queried the Applicant's comment that he could provide service all day. The Applicant confirmed emphatically that he would remain open all day – all pharmacies would be open at lunchtime – and said that they had not had any with issues over lunchtime hours.
- 3.7.9. Mrs Park had no further questions and **the Chairman** invited Mr Sargent to ask questions to the Applicant.
- 3.8. **Questions from Mr Sargent to the Applicant.**

- 3.8.1. Mr Sargent asked about the premises and asked if it was a flat roof and queried whether there was any dampness. The Applicant confirmed it was a flat roof and said that there was no damp.
- 3.8.2. Mr Sargent referred to the complaints by 11 people made over the past year and queried if the Applicant knew of the nature of the complaints. The Applicant replied that a range of concerns had been raised including dispensing problems, attitudes, issues with the premises, patient confidentiality. The Applicant alluded to flaws in the reporting and that possibly some issues had not been reported.
- 3.8.3. Mr Sargent asked if the Applicant could accept that if there was bad service, people were not likely to complain. The Applicant agreed and added that the public did not know how to complain about the service and said that when people were displeased with the level of service they had received, they often simply decided to go elsewhere.
- 3.8.4. Mr Sargent asked how long people should be expected to wait for a prescription. The Applicant said that it depended on the nature of the prescription and the level of business that was in the store, but would aim to have simple prescriptions dispensed within 5-10 minutes, and said that while customers were waiting, they should look at the other services they could offer to ensure that the wait was meaningful, such as addressing other issues – e.g. questions on medicines.
- 3.8.5. Mr Sargent referred to the supply of drugs and gave an example of a customer who would be told that they could have some of their prescription on one day and were asked to return on another day to collect the rest, and asked the Applicant how he would deal with that situation. The Applicant replied that although they were active in stock managing, Mr Sargent was referring to issues around stock rationing. He was very proactive in terms of communicating with manufacturers to ensure auditors checked usage, in order to ensure a supply of stock, and would sometimes order double, in order to ensure there was sufficient stock. They used three wholesalers including AAH and Alliance, in addition to a number of regional wholesalers, and said that nobody had done more to ensure access to stock than him.
- 3.8.6. Mr Sargent referred to pharmacists conducting home visits and counselling to patients and asked the Applicant where they would receive their training. The Applicant replied that training would be done inhouse through courses provided by the National Pharmacy Association, which would result in a recognised qualification. The delivery drivers would be the pharmacy team who delivered the medications, so they would have the skillset of anyone who worked within the pharmacy in order to identify a situation, rather than a driver simply delivering the medications.
- 3.8.7. Mr Sargent had no further questions and **the Chairman** invited Mr Woods to ask questions to the Applicant.
- 3.9. **Questions from Mr Woods to the Applicant.**
- 3.9.1. Mr Woods asked if a pharmacist would be available at the premises over the lunchtime period in order to dispense medications, to which the Applicant confirmed

and explained that in order for the pharmacist to have a break, they would bring in another pharmacist from one of his other pharmacies as they had the staff capacity to enable them to do this.

- 3.9.2. Mr Woods asked about the railway line and asked the Applicant to explain why he perceived the railway as a barrier. The Applicant said that it should not be considered simply as a barrier, but taken in conjunction with what was on the other side, and said that although there were crossing points, he believed that it demonstrated a boundary in the context of one neighbourhood adjacent to another neighbourhood. The Applicant added that in defining the neighbourhood, his choice was informed by the residents who said that was their neighbourhood.
- 3.9.3. Mr Woods referred to the bus service in Orbiston which fed back to Bellshill. The Applicant said that the bus did not go to the Main Street. Mr Woods queried if the bus provided access to Main Street. The Applicant said that the Bellshill Community Councillor would have more pertinent knowledge but his belief was that it went near but not into Main Street and he had spoken with people who had expressed dissatisfaction with the bus service.
- 3.9.4. Mr Woods referred to the petition and the Applicant's earlier statement that the person who had started the petition had not engaged with the Consultation, and enquired how the Applicant had reached this conclusion. The Applicant said that there had been a reference in the petition, and he had contacted the Community Council after they had made their representation. **The Chairman** remarked that they could not find this information within the Consultation or the responses. The Chairman also noted that personal information within the petition was redacted to ensure confidentiality.
- 3.9.5. Mr Woods referred to the petition and enquired whether living outwith Orbiston was bad and the Applicant replied that his point had been the vast majority of people that had signed the petition lived outwith Orbiston which he had thought was strange. The Applicant added that he considered the petition to be a concerted effort to undermine his application, since it was based on a lie. The Applicant believed that there had been no scrutiny by the Health Board with regard to how the information had been gathered and said that, in his opinion, the evidence was not credible.
- 3.9.6. Mr Woods asked how the petition had been conducted. The Applicant said he believed it had been placed in one shop and suggested Mr Woods speak with the Community Council representative for further information. The Applicant repeated his assertion that the petition had been based on a lie, as that is what he had heard from the local residents.
- 3.9.7. Mr Woods referred to the Consultation which had received 108 responses. The Applicant confirmed that the method of collecting data for the CAR was more robust and had been scrutinised by the Health Board, and added that no misinformation had been sent out with the Consultation.

- 3.9.8. Mr Woods referred to the Needle Exchange Programme and stated that people were concerned about drug addicts, and asked if the same concerns would apply with the substance abuse service. The Applicant said that he did not believe so, since, from experience of having run the service previously, although the public felt nervous and defensive around the methadone dispensing service, which he could empathise with when the public could see groups of methadone addicts congregating, if the service was handled appropriately and managed well, it was not an issue.
- 3.9.9. Mr Woods said he was looking to understand the perceptions around the needle exchange service and whether opinions were similar to the methadone dispensing service, considering the responses of concern expressed, and asked if the Applicant was concerned, given the body of evidence. The Applicant replied that he had simply pointed out the issues with the type of responses provided, which he felt was not good evidence, and said that concerns with the methadone dispensing service did cloud people's judgement as they answered with their heart. Mr Woods asked if the same was true of the needle exchange service and the Applicant agreed that it definitely clouded people's views.
- 3.9.10. Mr Woods had no further questions.
- 3.10. **Questions from the Chairman to the Applicant**
- 3.10.1. **The Chairman** revisited the boundaries of the neighbourhood and after querying whether Douglas Park Cottages was included or excluded from the neighbourhood, the Applicant agreed to include Douglas Park Cottages within the neighbourhood. **The Chairman** queried whether Strathclyde Country Park was excluded and the Applicant suggested that the Chairman refer the question to the Community Council Representative.
- 3.10.2. The Chairman referred to Hamilton Road boundary on the western side and asked why the West End should not be included as part of Orbiston, and the Applicant replied that the Hamilton Road was a very busy road and that his opinion in defining the boundaries had been informed by speaking with local residents.
- 3.10.3. The Chairman asked whether, in the Applicant's opinion, there was a clear distinction between the area to the east and west of Hamilton Road, and the Applicant confirmed that there was.
- 3.10.4. **The Chairman** referred to the northern boundary and queried why the railway line should form the boundary rather than the road above (Nelson Street), or A721 (Main Street) or A775 (Campbell Street) to the north and asked if any part of Main Street should be considered part of Orbiston. The Applicant replied that Main Street comprised different housing and industrial units and was a complete change from Orbiston.
- 3.10.5. **The Chairman** said that although looking at railway lines and rivers as boundaries was possible, they could also be crossed. The Applicant said that the boundary

should take into account what the area looked like on the other side of the boundary to the neighbourhood and that in this case, there was a step change.

- 3.10.6. The Chairman referred to Motherwell Road boundary to the eastern side and asked why that road had been considered as the boundary rather than using Calder Road. The Applicant said that it was for the same reasons as why Hamilton Road had been regarded as a boundary: it was a busy road and that residents who lived on the other side in Milnwood and towards Mossend did not consider themselves to be from the Orbiston neighbourhood.
- 3.10.7. **The Chairman** asked the Applicant to confirm that, if the application were granted, he could open his pharmacy within six months and the Applicant confirmed that he could. **The Chairman** asked the Applicant if he had a date of entry. The Applicant replied that there was no date, as that depended on whether the application was approved, but he considered that the work would take 4-6 weeks. The Applicant added that the issues with the internal structure were cosmetic, but the roof was in good repair and issues could be remedied.
- 3.10.8. **The Chairman** asked how the pharmacy would be staffed, and the Applicant responded that initially he would have one full time and a relief pharmacist, with himself and his business colleague Arif Hanif to support; in addition there would be two counter assistants, a dispenser and thereafter he would look at increasing staff. The delivery service would initially be small, and the Applicant emphasised that he could use staff from his other nearby pharmacies to support the new pharmacy.
- 3.10.9. **The Chairman** referred to the Applicant's comments about the model of pharmacies clustered around Main Street, saying that it was also the model for shops in terms of access, and asked the Applicant whether he drew a distinction between pharmacies and shops. The Applicant confirmed that there was a distinction since a pharmacy was more important than a shop, and disputed the advantage of having pharmacies so close together. The Applicant said that if one pharmacy in Main Street closed, it would not make a difference to the provision of services. The Applicant expressed frustration that the existing pharmacies had not rectified this imbalance, that they had stuck to the old model of being clustered close to GP surgeries and had not adapted in the same way that society had changed.
- 3.10.10. **The Chairman** stated that the Committee had examined the evidence, the CAR, the petition and the Consultation, and queried how the Applicant drew a distinction between adequacy as opposed to convenience. The Applicant said that the CAR demonstrated this through the responses received with 54 people quoting inadequacy, and 9 respondents who had said that it was inadequacy but that they still wanted a pharmacy in the neighbourhood. **The Chairman** asked whether the respondents had been simply ticking the box or whether they had provided further detail. The Applicant said that some respondents had provided further information, and although he admitted that some people put their responses in the wrong place, or failed to complete the survey, the majority of responses had pointed to inadequacy of service.

- 3.10.11. **The Chairman** referred to the petition of 240 signatures against the pharmacy, the 54 responses from the CAR quoting inadequacy, with a further 100+ responses saying that a new pharmacy was not required and asked the Applicant how he would balance the weight to attach to each, in order to consider whether the existing service was inadequate. The Applicant said that was the role of Committee, but added that, in his opinion, the petition was not worthy of any consideration as had been created based on fear and lies, and that if he were making the decision, he would discount it since he believed there had been no scrutiny on how the signatures had been collected. The Applicant added that from a personal viewpoint of what would be considered adequate, this would be someone with COPD who could walk to and from a pharmacy to obtain all their medications, so the health and mobility range of the patient was important. The Applicant repeated that the majority of respondents to the CAR had indicated an inadequate service. The Applicant believed that NHS Lanarkshire could learn from some aspects of the CAR which had been read wrongly by respondents.
- 3.10.12. **The Chairman** said that the Committee would not discount the petition, but would attach appropriate weight to it in considering the objections and endorsements.
- 3.10.13. **The Chairman** had no further questions and asked if any party had any further questions to raise in consideration of all the responses provided by the Applicant.
- 3.11. **Further Questions from the Committee and Interested parties to the Applicant**
- 3.11.1. Mrs Park asked which shop the petition had been placed in, and the Applicant required that it had been placed in a shop in Mansfield Road which was outwith the neighbourhood.
- 3.11.2. There being no further questions, the Chairman invited Mr Arnott to make his presentation.
- 3.12. **Mr Arnott's Presentation**
- 3.12.1. Mr Arnott said that the Applicant's reason for making the application seemed to be that the Pharmaceutical Services provided by current Contractors was inadequate only because there was no pharmacy within his defined neighbourhood. Mr Arnott added that there were numerous examples from Pharmacy Practice Committee Hearings and numerous National Appeal Panel Hearings that adequate Pharmaceutical Services could be provided to a neighbourhood from Pharmacies situated outwith that neighbourhood, and stated that this was the case in Orbiston.
- 3.12.2. Mr Arnott referred to the Advice and Guidance that the Committee were required to follow when considering what the existing pharmaceutical services were in the neighbourhood or in any adjoining neighbourhood.
- 3.12.3. Mr Arnott said that there had been previous applications for a pharmacy contract in Orbiston, with the most recent being at the same address, and added that all the applications had been refused because the pharmaceutical service provided by

existing Contractors was deemed adequate and Mr Arnott stated that nothing had changed.

- 3.12.4. Mr Arnott said that the residents of Orbiston had the choice of five Pharmacies and, dependent on where in Orbiston they lived, many were closer to the existing pharmacies than the Applicant's proposed site, including the Lloyds Pharmacy at 174 Main Street which was only 0.8 miles from the proposed site and the Boots Pharmacy on Main Street and the Lloyds Pharmacy at 273 Main Street, both of which were within a mile of the proposed site. Mr Arnott said that three pharmacies within one mile could not be deemed to be inadequate.
- 3.12.5. Mr Arnott said that although offering a delivery service was not a core service, all contractors offered this service for anyone who was housebound, and he could not see how someone who was housebound, and required delivery of medications, would benefit from the granting of the new contract, since a pharmacy at Lawmuir Road was no more accessible for a resident of say Diamond Street than the existing pharmacies.
- 3.12.6. Mr Arnott added that all the existing Pharmacies offered all the Core Services and that the Lloyds Pharmacies were fully engaged with CMS e MAS and AMS
- 3.12.7. Mr Arnott referred to the site visits, and said he felt that the Committee would agree that although there may be pockets of deprivation, in the main Orbiston could not be described as being a deprived area. Indeed the housing to the south of Community Road was largely private and affluent and that in the Multiple Deprivation Statistics, Orbiston Ranked 2,635 of 6505 Datazones in Scotland with 1 being the most deprived and 6,505 the least deprived.
- 3.12.8. Mr Arnott explained that when visiting the actual site, it could be seen that there was only a Convenience Store, which was not the Hub of the neighbourhood and said that it was obvious that the residents of Orbiston left the neighbourhood on a regular basis in order to access the services and amenities they required on a daily basis, such as weekly shopping, visiting GP surgeries, the bank etc.
- 3.12.9. Mr Arnott said that when he had spoken with local residents, he had been informed that bus services ran every ten minutes which would take them into Bellshill where they could access all the amenities they needed.
- 3.12.10. Mr Arnott said that the Applicant's site was in the southern part of the neighbourhood and he was unable to understand how a resident of Diamond Street, Philip Court or Strachan Court would find a new pharmacy any more convenient than the existing pharmacies. Mr Arnott emphasised that convenience was not a reason for granting a pharmacy contract.
- 3.12.11. Mr Arnott said that the Committee needed to consider whether granting the application would adversely impact on the security and sustainable provision of existing NHS primary medical and pharmaceutical services in the area concerned, and added that the Applicant must also have been aware that the NHS Lanarkshire

Pharmaceutical Care Services Plan did not mention the need for a pharmacy in the proposed neighbourhood.

- 3.12.12. Mr Arnott referred to the Consultation Exercise and said that from a population of 5203, the Applicant had received 108 responses, which equated to 2.07% of the population, of which 51 = 0.98% supported the application.
- 3.12.13. Mr Arnott referred to the question in the Consultation regarding the definition of the neighbourhood which asked whether the respondent thought that the current pharmaceutical services being provided in and to the neighbourhood were adequate, and that of the 88 responses, only 51 (0.98%) had said that they did not believe services were adequate.
- 3.12.14. Mr Arnott referred to the question regarding the list of services being required in the neighbourhood and said that 88 had responded, and 30 of those had made a comment. 16 of those comments agreed that services were required and 14 said that they did not think services were required.
- 3.12.15. Mr Arnott stated that it was part of the new Regulations that the Applicant “must establish the level of public support of the residents in the neighbourhood to which the application relates” and said that although it could not be said that the Applicant had not tried to gain public support, he (the Applicant) had failed to gain the support of residents simply because there was little public support for the application. Mr Arnott felt that this was because the existing contractors already provided adequate pharmaceutical care to the Applicant’s proposed neighbourhood, which had been agreed at previous PPC and NAP hearings – and emphasised that nothing had changed.
- 3.12.16. Mr Arnott said that inspite of all the Applicant’s efforts, he had only garnered 108 responses from Orbiston residents, of which many had disagreed that there was a need for a pharmacy in the area.
- 3.12.17. Mr Arnott said that the CAR had received a very low response rate, which, in his opinion, demonstrated that there was little or no public support for the application, because the services provided by current Pharmacies to the neighbourhood were adequate.
- 3.12.18. Mr Arnott affirmed that, in his view, the Applicant had shown no inadequacies in the current pharmaceutical provision, as there were three pharmacies within a mile of his proposed location, and there were five pharmacies providing a pharmaceutical service to the residents of Orbiston and Bellshill which had a combined population of 20,000.
- 3.12.19. Mr Arnott stated that there had been little or no public support for this application, that the residents had no difficulties in accessing the existing pharmaceutical services, and on a regular basis would travel outwith the neighbourhood to meet their daily needs. Mr Arnott repeated that the Application was about convenience not adequacy or need.

- 3.12.20. Mr Arnott remarked that in consideration of the question of “What are the existing pharmaceutical services in the neighbourhood or in any adjoining neighbourhood”, his response was that there were three pharmacies within a mile of the proposed site.
- 3.12.21. Mr Arnott said that he had examined the NHS Lanarkshire Pharmaceutical Care Services Plan and could find no reference to there being a need for a pharmacy in the Applicants proposed neighbourhood.
- 3.12.22. Mr Arnott urged the Committee to refuse the application as it was neither necessary nor desirable in order to secure the adequate provision of Pharmaceutical Services in the neighbourhood in which the premises are located.
- 3.12.23. This concluded the presentation from Mr Arnott. The Chairman clarified Mr Arnott’s point about previous PPC hearings and confirmed that although the Committee were aware of the previous applications, these would not be considered, and that only the evidence previously received and presented at the hearing on this day would be considered. **The Chairman** then invited questions from the Applicant
- 3.13. **Questions from the Applicant to Mr Arnott**
- 3.13.1. The Applicant asked about the Scottish Index of Deprivation where Mr Arnott had referred to Orbiston as a data zone, and said that there were over 6000 Datazones, and his neighbourhood had contained 7 Datazones. Mr Arnott replied that there had only been one Datazone for Orbiston.
- 3.13.2. The Applicant asked how granting the application would affect sustainability to which Mr Arnott replied that they would not know until and if the application were to be granted and added that any profit taken from an existing contractor would be bound to impact on their business.
- 3.13.3. The Applicant asked if Arnott meant that a pharmacy would be likely to close in this event, and Mr Arnott explained that although a pharmacy may not close, the range of services they were able to offer could be affected.
- 3.13.4. The Applicant asked how business would be affected if a pharmacy from Main Street were closed, and his pharmacy in Orbiston was opened, so that there would be two in the Main Street and one in Orbiston. Mr Arnott replied that if the Applicant was asking whether five pharmacies was sufficient, his answer was yes.
- 3.13.5. The Applicant referred to the number of responses in the CAR with 54 out of 88 respondents saying that the service was inadequate, and asked if Mr Arnott would agree that this would be a majority. Mr Arnott said that it was less than 1% of the Orbiston population, but agreed that in terms of those who had responded, it could be deemed a majority.
- 3.13.6. The Applicant asked about the frequency of buses and Mr Arnott said that he had obtained this information from local residents, but admitted he was not personally acquainted with the service.

3.13.7. The Applicant had no further questions. The Chairman invited questions from the Interested Parties to Mr Connolly. Mr Greer was invited to ask questions to Mr Arnott first

3.14. **Questions from Mr Greer to Mr Arnott**

3.14.1. Mr Greer asked if Mr Arnott was aware of any complaints from Lloyds with regard to provision of services, and Mr Arnott replied that he was not aware of any.

3.14.2. Mr Greer had no further questions and **the Chairman** invited Mr Razzaq to ask questions to Mr Arnott.

3.15. **Questions from Mr Razzaq to Mr Arnott**

3.15.1. Mr Razzaq referred to the complaints number of 11 for the previous year and asked if they were incorrect. Mr Arnott confirmed that the figure was incorrect.

3.15.2. Mr Razzaq had no further questions and **the Chairman** invited Mr Taylor to ask questions to Mr Arnott.

3.16. **Questions from Mr Taylor to Mr Arnott**

3.16.1. Mr Taylor asked where Mr Arnott had obtained the figure of five pharmacies and asked if he was also including the pharmacy in Mossend. Mr Arnott apologised, and agreed that there were four pharmacies in Bellshill, and his comment on five pharmacies was incorrect, since Mossend did not form part Bellshill.

3.16.2. Mr Taylor asked about the frequency of bus times and Mr Arnott said that he had been informed that buses were every 10 minutes. Mr Taylor stated that he lived in the area and buses were often every 20 minutes, and explained the bus route of the 201, and that buses would often be following each other.

3.16.3. Mr Taylor had no further questions and **the Chairman** invited the Committee to ask questions to Mr Arnott, with Mr Aslam to speak first.

3.17. **Questions from Mr Aslam to Mr Arnott**

3.17.1. Mr Aslam asked if Mr Arnott agreed with the Applicant about using Hamilton Road, which was a B-Road, as a border, and Mr Arnott agreed. The distinction was made that railway lines or B-Roads could be used as borders.

3.17.2. Mr Aslam had no further questions and **the Chairman** invited Mrs Park to ask questions to Mr Arnott.

3.18. **Questions from Mrs Park to Mr Arnott**

3.18.1. Mrs Park asked Mr Arnott to define his neighbourhood for his pharmacies. Mr Arnott said that Boots and Lloyds pharmacies serviced Mossend, Hattonrigg,

although there were also pharmacies in those areas, and said that they also serviced some of the population of part of Orbiston.

- 3.18.2. Mrs Park asked if Lloyds pharmacy serviced Hattonrigg (on the North Road) and Mr Arnott confirmed that they did and added that Hattonrigg offered extended opening hours until 9.00pm every day of the week.
- 3.18.3. Mrs Park asked whether Mr Arnott believed the availability of services was adequate, to which Mr Arnott replied that they offered all services, and had consulted their pharmacists who had confirmed there were no capacity issues.
- 3.18.4. Mrs Park asked Mr Arnott to explain the complaints that customers were unable to collect prescriptions at lunchtimes and also about waiting times. Mr Arnott said that he was unable to explain the complaints about waiting times as these were monitored, although a prescription with many items would obviously take longer. With regard to lunchtimes, Mr Arnott said that pharmacists needed to take a break at lunchtime, and would invariably remain on the premises over this period.
- 3.18.5. Mrs Park had no further questions and **the Chairman** invited Mr Sargent to ask questions to Mr Arnott.

3.19. **Questions from Mr Sargent to Mr Arnott**

- 3.19.1. Mr Sargent asked how often patients were asked to return as the pharmacy could only fill part of the prescription. Mr Arnott said these were referred to as Owings and they wanted a maximum 1%, and he had not seen any reports to say that this number was any different, but commented that there may be quota issues if there was a shortage of a particular drug.
- 3.19.2. Mr Sargent asked which suppliers were used by Lloyds, and Mr Arnott replied that they used AHA, Appliance and specialists, depending on the directive from the Health Board.
- 3.19.3. Mr Sargent had no further questions and **the Chairman** invited Mr Woods to ask questions to Mr Arnott.

3.20. **Questions from Mr Woods to Mr Arnott**

- 3.20.1. Mr Woods queried if there were 7 complaints. Mr Arnott explained that Lloyds used an internal incident reporting system, which helped them learn from any issues. With regard to the issue of near misses, learning points were taken, and a cause analysis conducted. This did not mean that the medicines had left the pharmacy. Mr Arnott said he was unsure how this information had been sent to the Health Board.
- 3.20.2. Mr Woods asked about the 7 complaints about accuracy of dispensing and Mr Arnott explained that it could have been recorded as a near miss and entered the reporting system. Mr Arnott acknowledged that no dispensing error was acceptable, but also said that no pharmacy in the country had not had a near miss

or dispensing error, and that 7 complaints of accuracy in dispensing represented a 0.006% error.

- 3.20.3. Mr Woods expressed concern over the dispensing errors and Mr Arnott acknowledged the concerns and said that while dispensing errors did infrequently occur, Lloyds took learning points from any near misses or errors.
- 3.20.4. Mr Woods asked whether Mr Arnott was claiming that other pharmacies underreported, and Mr Arnott denied that was what he was saying, but stated it was an error in the Health Board report and that the Health Board had admitted the error. Mr Arnott said he was not claiming that other contractors were not reporting any issues to the Health Boards.
- 3.20.5. Mr Woods had no further questions.

3.21. **Questions from the Chairman to Mr Arnott**

- 3.21.1. **The Chairman** referred to the comments regarding the impact on business and the fact that there were three pharmacies on or near Main Street, with two of them within one mile of the Applicant's premises, and a further pharmacy further north in Hattonrigg, and asked Mr Arnott to explain the level of the impact. Mr Arnott responded that it he could not put a figure on the percentage of the likely impact.
- 3.21.2. **The Chairman** asked what Mr Arnott's position was with regard to lunchtime coverage, considering the complaints regarding lunchtime closures contained in the CAR. Mr Arnott said that the pharmacists were entitled to take a break as it was not safe to work an 18 hour day, and said that if there was an emergency, a pharmacist was generally on the premises who could dispense. **The Chairman** asked if there was a sign on his pharmacy premises saying "no dispensing between 1pm-2pm" and Mr Arnott confirmed that there was.
- 3.21.3. In respect of the CAR, **the Chairman** appreciated that the response numbers had been limited, and referred to Question 3 regarding adequacy of service, and asked if Mr Arnott had been surprised with the consistency of the responses which had deemed every service as inadequate. Mr Arnott said that he had been very surprised, as he did not expect all services to have been deemed inadequate.
- 3.21.4. **The Chairman** asked Mr Arnott how he would respond if he knew that the Committee were under an obligation to consider the responses for Question 3 from the CAR, given a majority of respondents had said that the services were inadequate. Mr Arnott said that it was only a slight majority who had deemed the service to be inadequate and he would have expected more than 88 responses to that question, especially if the Community Council representative had informed residents about the survey.
- 3.21.5. The Chairman had no further questions and asked if any party had any further questions to raise in consideration of all the responses provided by Mr Arnott.

3.22. Further Questions from the Committee, Applicant and other Interested parties to Mr Arnott

- 3.22.1. The Applicant asked when Mr Arnott had spoken with Mr John Forsyth, to which Mr Arnott replied that he had seen him on the previous Thursday; and that it had started with an email on 4th July with Jennifer MacDougall to the Area Health Board, and the last email had been on 6th July. The Applicant asked if Mr Arnott had brought a copy of the response that he had submitted to the Health Board, and Mr Arnott said that he did not, as it had not been made available to the Health Board in time for publication.
- 3.22.2. The Applicant referred to the complaints sheet which had a complaint marked on it by a pharmacist and asked if Mr Arnott's pharmacists could tell the difference between a complaint from a customer and a near miss. Mr Arnott explained that any incidents were logged, not just complaints, and the near misses were part of an internal process, and learned from errors, since the GP inspector was interested in lessons learned.
- 3.22.3. The Applicant referred to a complaint that had been filled in, and Mr Arnott said that he was unable to verify who had completed this as all complaints were submitted centrally, and that if it had been a near miss rather than a complaint, he admitted that it should not have been submitted in that report but said that the Applicant was grasping at straws if his case was about 7 incidents in one pharmacy.
- 3.22.4. **The Chairman** clarified that he had been alerted to the fact via email dated 4th July 2015 from Jennifer MacDougall where there had been an error in the contractor code and noted that there was inaccurate data in the public domain which he hoped would be updated and rectified by Lloyds – so inaccurate information had been logged, but would be rectified by the head office.
- 3.22.5. Mrs Park referred to the 11 complaints which also referred to 11 replies and asked why complaints would be replied to. Mr Arnott said he was unable to explain which is why they had queried the issue with the Health Board.
- 3.22.6. Mr Woods asked if there had been 7 events in one year. Mr Arnott said he believed so but was not sure what the events were, but said that it could be due to accuracy of dispensing.
- 3.22.7. There being no further questions, the Chairman invited Mr Greer to make his presentation.

3.23. Mr Greer's Presentation

- 3.23.1. Mr Greer said that he had no issue with the neighbourhood described although he believed that the streets north and west of Hamilton Road could be included, since access to anywhere from this site would require passing through the proposed neighbourhood.

- 3.23.2. Mr Greer said that the neighbourhood described contains no amenities or services of note and had a population which had been either static or in decline for the last five years. It was also a neighbourhood that had seen pharmacy applications before, most recently in 2012. All prior applications had been rejected as being neither necessary nor desirable. Mr Greer also commented that there had been no material change in the circumstances of this neighbourhood since the last application.
- 3.23.3. Mr Greer repeated that the area was devoid of services, all of which could be found in the town centre and were accessed by the population on a daily basis. This included pharmacies along with all other services such as access to household shopping, banking and post offices. Mr Greer remarked that the people living in the northern half of the proposed neighbourhood were actually closer to services in the town centre than the proposed site.
- 3.23.4. Mr Greer commented that all services were principally accessed using public or private transport and added that the area was well served by public transport with a 201 bus every 12 minutes to and from the town centre. Mr Greer believed that transport would still be required by the majority of the population to access the proposed pharmacy which would be the same transport which was used to access the town centre. The only difference was that accessing the proposed site gave access to only one service provision unlike access to the town centre.
- 3.23.5. Mr Greer stated that the area was currently served by five pharmacies in Bellshill as had been pointed out in the submission of others. The pharmacies provided all the available services provision, and included extended hours opening.
- 3.23.6. Mr Greer said that the application added nothing to the service provision that was not currently available – it did not improve access to pharmaceutical services for the vast majority of the population, most of whom he believed would find it equally convenient to access services in the town centre, whether on foot or by public or private transport.
- 3.23.7. Mr Greer referred to the population to the north of the neighbourhood which remained closer to the town centre, and that residents to the east and south accessed transport via Motherwell Road and the remainder of the population had access to the 201 bus service or private transport.
- 3.23.8. Mr Greer said that as far as he was aware, all the pharmacies in the town could also offer a collection and delivery service where required, and there had been little or no complaints about the service provision that was currently available.
- 3.23.9. Mr Greer concluded that the application offered no improvement on pharmaceutical provision other than convenience for those living immediately adjacent to it, it offered nothing to the vast majority of the population and therefore was neither necessary nor desirable.
- 3.23.10. This concluded the presentation from Mr Greer. The Chairman invited questions from the Applicant

3.24. **Questions from the Applicant to Mr Greer**

- 3.24.1. The Applicant asked if Mr Greer was aware that he had focussed his presentation on the northern part of the neighbourhood, which Mr Greer agreed, and said that it may be difficult (but not impossible) to travel to other parts of the neighbourhood.
- 3.24.2. The Applicant had no further questions. **The Chairman** invited questions from the Interested Parties to Mr Greer.

3.25. **Questions from Mr Arnott to Mr Greer**

- 3.25.1. Mr Arnott had no questions

3.26. **Questions from Mr Razzaq to Mr Greer**

- 3.26.1. Mr Razzaq had no questions.

3.27. **Questions from Mr Taylor to Mr Greer**

- 3.27.1. Mr Taylor referred to Mr Greer's comments regarding parking in the town centre and stated that parking spaces were almost impossible to find and that it could take 15-20 minutes to travel to the Main Street due to the weight of traffic, and Mr Greer replied that he had said that it would be easier for some, depending on the nature of the transportation used. Mr Taylor highlighted parking issues in the town centre.
- 3.27.2. Mr Taylor asked if Mr Greer believed that the shop in Lawmuir Road was not well used. Mr Greer said that he did not have that information and Mr Taylor said that it was a busy shop.
- 3.27.3. Mr Taylor had no further questions. **The Chairman** invited questions from the Committee with Mr Aslam to ask questions first to Mr Greer.

3.28. **Questions from Mr Aslam to Mr Greer**

- 3.28.1. Mr Aslam asked if Mr Greer agreed with the Applicant's boundaries. Mr Greer said that he agreed in principle with the Applicant's boundaries.
- 3.28.2. Mr Aslam had no further questions. The Chairman invited Mrs Park to ask questions to Mr Greer

3.29. **Questions from Mrs Park to Mr Greer**

- 3.29.1. Mrs Park asked Mr Greer to define his neighbourhood, to which Mr Greer responded that it was the same as Mr Arnott and covered all parts of Bellshill.
- 3.29.2. Mrs Park asked about the availability of services in his unit, which Mr Greer said could be done.
- 3.29.3. Mrs Park had no further questions. The Chairman invited Mr Sargent to ask questions to Mr Greer

3.30. Questions from Mr Sargent to Mr Greer

- 3.30.1. Mr Sargent asked how often patients returned in order to have their prescription completed. Mr Greer said that they had a weekly report on Owings against which stores were measured, and that the availability would be caused by drug shortages, not by poor stock management.
- 3.30.2. Mr Sargent asked why someone was always informed that there was a manufacturing issue when they were unable to obtain their medications and asked if that was a standard response. Mr Greer said that his staff did not tell lies, and that they had a few stores so would try and seek the required medication from another store if possible.
- 3.30.3. Mr Sargent asked how many suppliers were used by Boots, and Mr Greer said that they had one main supplier but had to go through Head Office for other suppliers.
- 3.30.4. Mr Sargent asked what extended hours were offered. Mr Greer replied that in Hattonrigg the hours were 9pm 7 days a week.
- 3.30.5. Mr Sargent had no further questions. The Chairman invited Mr Woods to ask questions to Mr Greer

3.31. Questions from Mr Woods to Mr Greer

- 3.31.1. Mr Woods said that he had noticed that there had been very few complaints – 7 complaints in 3 pharmacies, with regard to accuracy of dispensing. Mr Greer sought to clarify the position. Patients Rights legislation had been introduced 3 years previously and every health professional was required to submit a quarterly report quarterly on any complaints that had been reported. These complaints were collated by the Health Board, and sent to the Government. For Boots, complaints were submitted centrally and then returned to the regional manager, so Mr Greer's role was to handle complaints across four Health Boards. Complaints would be passed to the local manager to ensure the information was correct before it was submitted with the quarterly figures, and they had 20 days in which to respond to any complaint, and after that point, it went to arbitration. So the 20 day period was key in gathering information about the complaint.
- 3.31.2. Mr Woods asked what had happened with regard the 7 complaints regarding accuracy of dispensing and Mr Greer said that it was human error. Every error presented a learning opportunity; a clinical error would need to be reported, and there was an online system where errors were investigated to see what had happened in order to prevent them from recurring.
- 3.31.3. Mr Woods had no further questions.

3.32. Questions from the Chairman to Mr Greer

- 3.32.1. **The Chairman** asked Mr Greer to comment on the impact on his business if the application was to be granted. Mr Greer said that it was difficult to provide an estimate, but he could not say that there would not be an impact on their business.
- 3.32.2. **The Chairman** asked whether it would be fair to say that the impact of a new pharmacy in Orbiston would be minimal because any change in business could be spread over two Boots pharmacies. Mr Greer said that business would be impacted but found it difficult to quantify.
- 3.32.3. **The Chairman** asked Mr Greer to explain the position for lunchtime coverage at his pharmacies. Mr Greer remarked that every pharmacist was entitled to take a break and although it was up to each pharmacy, they liked to be consistent. Whether the pharmacist remained on the premises was up to them.
- 3.32.4. The Chairman asked if dispensing ceased during the lunch break. Boots responded by saying that sometimes they had double cover and sometimes they closed at lunchtimes as it depended on the pharmacy. Some pharmacists took half an hour, but they kept the signage as a one hour closure, and if the pharmacist chose to remain on the premises, he could handle any emergencies that might arise.
- 3.32.5. **The Chairman** referred to Question 3 in the CAR, and asked if Mr Greer was surprised that so many people had responded that the service was inadequate. Mr Greer said that he needed more information as the responses did not provide sufficient information, but suggested that it referred back to opportunities and issues that patients had. Mr Greer acknowledged that any negative feedback was disappointing to receive, but that it was important to learn, in order to improve.
- 3.32.6. **The Chairman** had no further questions and asked if any party had any further questions to raise in consideration of all the responses provided by Mr Greer.
- 3.33. **Further Questions from the Committee, Applicant and other Interested parties to Mr Greer**
- 3.33.1. The Applicant referred to Question 3 of the CAR which showed that all services had been deemed inadequate and said that he could deliver on services which Mr Greer was not offering such as access to the minor ailment service (MAS). Mr Greer said that MAS was possible if pharmacists worked from information provided to them by the person's carer. The Applicant refuted this and said that a visit from a pharmacist was required. Mr Greer said that a pharmacist visit could be used via eMAS
- 3.33.2. The Applicant explained to the Committee that eMAS was for people who were housebound who wished to use MAS, and he believed that a pharmacist needed to visit the patient which Mr Greer disagreed with.
- 3.33.3. Mr Aslam clarified the position – that no pharmacy used eMAS to someone who was housebound unless they had been able to see the patient in person, since information needed to be obtained which could only be done in person by seeing the patient – such as an eye infection, where until the pharmacist had been able to see the issue for him/herself, the pharmacist would not know whether this was

something they could handle or whether they needed to refer the patient to their GP. The Applicant supported this view.

3.33.4. There being no further questions, **the Chairman** invited Mr Razzaq to make his presentation.

3.34. **Mr Razzaq's Presentation**

3.34.1. Mr Razzaq said that he believed the neighbourhood to be: Hamilton Road to the west, meeting the A721 in the north, then down Motherwell Road to where it met Bankhead Avenue continuing along Community Road to the A721 which formed the southern boundary. Mr Razzaq did not accept the railway line as the northern boundary as people were used to crossing under the railway to access services and it could be crossed without any difficulty using at least 3 crossing points.

3.34.2. Mr Razzaq said that although the PPC and NAP had each defined the neighbourhood differently in previous applications, they had still concluded there was adequate provision of pharmaceutical services, so Mr Razzaq believed that whichever definition of the neighbourhood was used, the existing pharmaceutical services were adequate.

3.34.3. Mr Razzaq commented that he had been offered the opportunity to reapply for a new pharmacy contract at this site about 2 years ago but had refused since he genuinely felt that the existing services were adequate, following the decision by the PPC and NAP and believed that the application should be rejected on the grounds that it was neither necessary nor desirable, for the following reasons:-

3.34.4. There was conflicting opinion from local residents and not overwhelming support for this application. In Mr Razzaq's opinion, many residents had concerns with regard to the addiction services and the proximity to the nearby primary schools, and said that many local people had been unaware of the application or that there had even been a public consultation hence why someone had recently started a petition against the new pharmacy that had gained 236 signatures in just a few days which was more than double the number of respondents to the public consultation and clearly showed that the public did not support the new pharmacy. Mr Razzaq said that no mention of needles had been made in any emails or in the petition.

3.34.5. Mr Razzaq agreed with the APC that almost all the supportive responses to the CAR had been related to convenience not to inadequacy.

3.34.6. Mr Razzaq said that there was ample car parks and ample spaces, which were free designated car parks. In fact even on a Friday afternoon at 3pm he had observed empty spaces on Main Street right outside the Boots and Lloyds pharmacies when he had visited.

3.34.7. Mr Razzaq said that there were also many buses in the Applicant's defined neighbourhood with the 201 service running 6 buses an hour through the area which stopped close to the existing pharmacies on the Main Street and the pharmacy on North Road, and there was also the free M98 Mybus service which

was available to people with mobility difficulties. Mr Razzaq said that in his opinion, it was one of the best-served areas in North Lanarkshire in terms of public transport.

- 3.34.8. Mr Razzaq said that there were no barriers to access with several crossings over the railway line and direct passage to the Main Street. The proposed Pharmacy was under a mile distance from the nearest pharmacy, which was Lloyds at 174 Main Street. This distance would be less for someone walking since they would not need to go around the one-way system. Mr Razzaq commented that the walk from the proposed Pharmacy to the Lloyds at 174 Main Street had taken him around 11 minutes, and he believed that walking from the northern or eastern part of the Applicant's neighbourhood would take significantly less time.
- 3.34.9. Mr Razzaq noted that the population of Bellshill had actually decreased - taking figures from the 2011 census compared to 2001. Mr Razzaq added that he had spoken to the planning department for North Lanarkshire Council, who had confirmed that there are currently no proposed new developments in the area that would increase the population. Therefore, there was not going to be any sudden increased demand on the current pharmaceutical network anytime soon.
- 3.34.10. Mr Razzaq claimed that the location of the proposed pharmacy was not in a hub of services or focal point of the neighbourhood, since it was located next to a general store and there were no other retail services nearby. Mr Razzaq continued that the hairdresser that used to be located there had been trying to move location for a long time due to lack of business.
- 3.34.11. Mr Razzaq said that residents were used to travelling outwith the neighbourhood to access their daily needs. Indeed a large part of the neighbourhood in the north and west were more likely to travel to the Main Street as it is actually closer and would be the natural direction of travel for residents, given that the town's supermarkets, GP services and other amenities were located there.
- 3.34.12. Mr Razzaq noted that the most deprived area in the Applicant's defined neighbourhood was the "Jewel Scheme" situated in the northern part of the neighbourhood. For people there, Mr Razzaq believed it was easier to access services on Main Street than the Applicant's proposed location, especially since the large central grassy area could not be crossed. Mr Razzaq said that the proposed site would not be significantly more accessible than the pharmacies on the Main Street, given the proposed location was at the very southern end of the neighbourhood.
- 3.34.13. Mr Razzaq said that although the Applicant had defined a neighbourhood with no pharmacy, this did not automatically necessitate the need for one; and that even if the Applicant's neighbourhood was agreed, there were four pharmacies on the periphery of the neighbourhood and a further one close by on North Road, which all provided the full range of pharmaceutical services. The pharmacy on North Road was open 9am-9pm 365 days a year
- 3.34.14. Mr Razzaq said that although his pharmacy in North Motherwell was situated outwith the neighbourhood, they also provided pharmaceutical services to the

Applicant's neighbourhood, and had recently expanded into the adjacent shop unit to double the size of their dispensary, had many well-trained staff, provided all the core NHS services and had no capacity issues. They also delivered 6 days a week. Mr Razzaq continued that, during the week, he also had two pharmacists on duty, which allowed one to be available for home visits if required. They also collected repeat prescriptions from all of the GP surgeries in Bellshill and had developed good relationships and links with them. Mr Razzaq stated that he could easily cope with any extra demand if necessary.

- 3.34.15. Mr Razzaq commented that the Applicant's neighbourhood comprised a large section of the population of Bellshill and a new contract could affect the viability of some existing pharmacies, since a new contract could destabilise the current pharmaceutical network in Bellshill. Mr Razzaq stated that there were currently 5 pharmacies serving a population of around 20,000 and a further new contract would dilute this and could adversely impact on the security of and sustainable provision of existing pharmaceutical services in the area.
- 3.34.16. Mr Razzaq said that the current Pharmaceutical Care Plan for NHS Lanarkshire had not highlighted any inadequacy in this area, there had been no evidence of inadequate pharmaceutical services in the Applicant's defined neighbourhood and he believed that the Applicant has failed to demonstrate any inadequacy.
- 3.34.17. Mr Razzaq concluded that the application was based on convenience, and was only for a small number of people who lived immediately beside Lawmuir Road, since the majority of residents would still find it easier and quicker to access the existing pharmacies in Bellshill Main Street. Mr Razzaq stated that he did not believe this application to be either necessary or desirable and respectfully asked that it be refused.
- 3.34.18. This concluded the presentation from Mr Razzaq. The Chairman invited questions from the Applicant

3.35. **Questions from the Applicant to Mr Razzaq**

- 3.35.1. The Applicant asked if Mr Razzaq agreed that Orbiston was a deprived neighbourhood with serious health problems, to which Mr Razzaq agreed that parts were deprived.
- 3.35.2. The Applicant asked why Mr Razzaq had changed his mind with regard to the boundaries of the neighbourhood and Mr Razzaq replied that although he agreed with the eastern and western boundaries, he felt that the southern boundary should be Commercial Road due to the different housing type, and for the northern boundary, he did not feel there was a barrier there as the railway line was easily crossed.
- 3.35.3. The Applicant referred to Mr Razzaq's statement that he had turned down the opportunity to reapply and said that this would not have been possible as he would have been time barred. Mr Razzaq replied that it was not something they had looked into and had refused immediately.

- 3.35.4. The Applicant asked if Mr Razzaq had submitted two applications. Mr Razzaq said one had been at a different location. The Applicant repeated his question and Mr Razzaq said that one application had been withdrawn.
- 3.35.5. The Applicant stated that Mr Razzaq had let down the residents of Orbiston and betrayed the community, which Mr Razzaq denied.
- 3.35.6. The Applicant asked Mr Razzaq about his comment that buses did nothing to reduce inadequacy to which Mr Razzaq responded that in this case, there was a good bus service in the area. The Applicant said that the service was the same as when Mr Razzaq had applied, and Mr Razzaq replied that he had abided by the decision of the PPC.
- 3.35.7. The Applicant had no further questions. **The Chairman** invited questions from the Interested Parties to Mr Razzaq. Mr Arnott was invited to question Mr Razzaq first.

3.36. **Questions from Mr Arnott to Mr Razzaq**

- 3.36.1. Mr Arnott asked where a resident of Orbiston would go for pharmaceutical services at 7pm on a Sunday evening, and Mr Razzaq replied that he imagined the resident would visit the Lloyds pharmacy in North Road, or visit another pharmacy on the Monday. The Applicant interjected that they would also be prepared to offer extended hours.
- 3.36.2. Mr Arnott had no further questions. The Chairman invited Mr Greer to ask questions to Mr Razzaq

3.37. **Questions from Mr Greer to Mr Razzaq**

- 3.37.1. Mr Greer had no questions. The Chairman invited Mr Taylor to ask questions to Mr Razzaq.

3.38. **Questions from Mr Taylor to Mr Razzaq**

- 3.38.1. Mr Taylor asked where Mr Razzaq had obtained his information on parking since, in his opinion, parking in the area was atrocious. Mr Razzaq said that he had visited the area on the Friday afternoon and looked at the facilities.
- 3.38.2. Mr Taylor asked if Mr Razzaq was aware that there was in fact a new housing development being proposed and Mr Razzaq said that he was not aware of it. Mr Taylor added that it was a build of between 10-15 houses, which Mr Razzaq dismissed as insignificant.
- 3.38.3. Mr Taylor had no further questions. The Chairman invited the Committee to ask questions to Mr Razzaq and Mr Aslam was invited to ask questions first.

3.39. **Questions from Mr Aslam to Mr Razzaq**

- 3.39.1. Mr Aslam had no questions. The Chairman invited Mrs Park to ask questions to Mr Razzaq

3.40. Questions from Mrs Park to Mr Razzaq

3.40.1. Mrs Park had no questions. The Chairman invited Mr Sargent to ask questions to Mr Razzaq

3.41. Questions from Mr Sargent to Mr Razzaq

3.41.1. Mr Sargent asked if Mr Razzaq was aware that the M98 MyBus service had limitations and restrictions – it needed to be booked in advance, there were a limited number of bus journeys that could be taken per week, and the bus route was also limited. Mr Razzaq replied that he was aware but had made the point that it was an available service.

3.41.2. Mr Sargent had no further questions. The Chairman invited Mr Woods to ask questions to Mr Razzaq

3.42. Questions from Mr Woods to Mr Razzaq

3.42.1. Mr Woods had no questions.

3.43. Questions from the Chairman to Mr Razzaq

3.43.1. The Chairman asked if there would be a significant impact on business if the application was granted, and Mr Razzaq said that there would be some impact, but not much.

3.43.2. The Chairman asked about lunchtime cover and Mr Razzaq said that they had two pharmacists, so there was always one person to cover the lunchtime period.

3.43.3. The Chairman asked about the CAR question regarding inadequacy on a range of services and asked for any insights as to the reason why. Mr Razzaq said that it depended on what the public believed to be adequate, but emphasised that the largest response was 54, which was not a significant number.

3.43.4. The Chairman had no further questions and asked if any party had any further questions to raise in consideration of all the responses provided by Mr Razzaq.

3.44. Further Questions from the Committee, Applicant and other Interested parties to Mr Razzaq

3.44.1. There being no further questions, the Chairman invited Mr Taylor to make his presentation.

3.45. Mr Taylor's Presentation

3.45.1. Mr Taylor explained that he was present on behalf of the people of Bellshill.

- 3.45.2. The Bellshill Community Council had agreed it would be a good idea to have a pharmacy in Orbiston and agreed with the definition of Orbiston as shown on the map, and that Main Street was classed as part of Bellshill rather than Orbiston.
- 3.45.3. Mr Taylor explained that he lived around the corner from the shop where the petition had been placed and that his daughter had brought it to his attention that there was a petition without a name. Mr Taylor added that he had asked the shop owner, who had said that the petition was being placed to stop them offering a needle exchange service. Four hours after he had been into the shop, the petition had disappeared.
- 3.45.4. Mr Taylor referred to the parking in Bellshill which he said was horrendous and would be for the next 2.5 years until the new roads were built.
- 3.45.5. Mr Taylor referred to waiting time issues, and that there were waiting time issues in all the pharmacies, as you either had a long wait, or were told to return later or the next day.
- 3.45.6. Mr Taylor said that they had discussed both the needle exchange service and methadone dispensing service, where people who were waiting for their prescriptions would be upset when a person requiring the methadone would enter and be immediately taken to another room to be served. Mr Taylor added that residents did not complain to pharmacies, but raised their issues with the Bellshill Community Council. Mr Taylor believed that the needle exchange service should be operated from a central point at a clinic.
- 3.45.7. Mr Taylor concluded that he believed that having a pharmacy in Orbiston would be good for the community as it was an area with an infirm and ageing population and although there were young families and people with cars, not everyone had access to a car. Mr Taylor said that he believed it would impact on the business in Main Street.
- 3.45.8. This concluded the presentation from Mr Taylor. The Chairman invited questions from the Applicant
- 3.46. **Questions from The Applicant to Mr Taylor**
- 3.46.1. The Applicant asked if Mr Taylor considered the bus service in Orbiston to be adequate. Mr Taylor said that the bus service in Orbiston was 201 and serviced two hospitals outwith. The 240 bus service went from Glasgow to Wishaw. Mr Taylor continued that, timing wise, the bus service was inadequate and that services had deteriorated and some services had been withdrawn.
- 3.46.2. The Applicant asked if Mr Taylor believed that the people of Orbiston had adequate access to pharmaceutical services or whether the current service was inadequate. Mr Taylor replied that as a whole, the service was inadequate for the size of the area.
- 3.46.3. The Applicant asked if Mr Taylor agreed that there was a lot of deprivation in Orbiston. Mr Taylor agreed that in his experience, Orbiston was more deprived than some other areas in Bellshill.

3.46.4. The Applicant had no further questions. The Chairman invited the Interested Parties to ask questions to Mr Taylor, with Mr Arnott being asked first.

3.47. Questions from Mr Arnott to Mr Taylor

3.47.1. Mr Arnott asked if Mr Taylor agreed that people from Strathview Road were deprived. Mr Taylor agreed that they were not, but that people had issues paying their mortgages due to lack of jobs, and that having a private house did not mean people were affluent.

3.47.2. Mr Arnott referred to Mr Taylor's comment that granting the application could have an impact on existing pharmaceutical services and asked that if the impact was that Lloyds reviewed their opening hours and closed at 6pm, where would people go. Mr Taylor said that other than going to the Applicant's pharmacy, if the person had a car, they could go to Coatbridge.

3.47.3. Mr Arnott had no further questions. The Chairman invited Mr Greer to ask questions to Mr Taylor

3.48. Questions from Mr Greer to Mr Taylor

3.48.1. Mr Greer asked about the bus service issues and asked if this was because they were not keeping to the timetable. Mr Taylor said that the bus services had deteriorated and buses were unable to keep to the timetable due to roadworks, which would be ongoing for a further 18 months, and sometimes the bus passed by while people were waiting at the bus stop.

3.48.2. Mr Greer had no further questions. The Chairman invited Mr Razzaq to ask questions to Mr Taylor

3.49. Questions from Mr Razzaq to Mr Taylor

3.49.1. Mr Razzaq asked if Mr Taylor agreed that not all residents supported the application. Mr Taylor responded that it was impossible to get all residents to agree 100%.

3.49.2. Mr Razzaq had no further questions. The Chairman invited the Committee to ask questions to Mr Taylor and Mr Aslam was invited to ask questions first.

3.50. Questions from Mr Aslam to Mr Taylor

3.50.1. Mr Aslam asked Mr Taylor whether the responses were more about inconvenience rather than inadequacy of service. Mr Taylor replied that it was a bit of both as it was more beneficial not to have to go up to Main Street, but on balance he felt it was more to do with inadequacy.

3.50.2. Mr Aslam had no further questions. The Chairman invited Mrs Park to ask questions to Mr Taylor.

3.51. Questions from Mrs Park to Mr Taylor

- 3.51.1. Mrs Park asked where the new housing development would be. Mr Taylor explained that it was by Douglas Park Cottages on the other side of the railway line to the south and thought that the original plan was for 13 high value houses.
- 3.51.2. Mrs Park had no further questions. The Chairman invited Mr Sargent to ask questions to Mr Taylor

3.52. Questions from Mr Sargent to Mr Taylor

- 3.52.1. Mr Sargent asked if Mr Taylor agreed with the Applicant's definition of Orbiston, and Mr Taylor said that he agreed that the defined area was Orbiston.
- 3.52.2. Mr Sargent had no further questions. The Chairman invited Mr Woods to ask questions to Mr Taylor

3.53. Questions from Mr Woods to Mr Taylor

- 3.53.1. Mr Woods asked how Mr Taylor knew that he represented the views of the residents of Orbiston. Mr Taylor said that when the Applicant had submitted his application, the Bellshill Community Council had sought to obtain as much information as possible and to ask the local residents for their opinions. Mr Taylor added that although a few residents did not agree with having a new pharmacy, when pressed as to a reason, they could only reply that they did want one since they could easily walk up to Main Street. Mr Taylor said that they had then asked what would happen for someone who was infirm and the responses were that they could easily get to a bus stop.
- 3.53.2. Mr Woods asked about Mr Taylor's thoughts on the centralisation of the needle exchange programme and asked if he had concerns with methadone users who were the same type of people. Mr Taylor said that it was difficult to wean someone off drugs, and even more difficult to wean someone off methadone. Mr Taylor acknowledged that people required medication but in his view, it would be better to have a centralised place for them to obtain the service, and that although it may affect a pharmacy financially, it would not prevent them from obtaining the methadone from a pharmacy.
- 3.53.3. Mr Woods asked about the issues with people obtaining methadone in the pharmacy, and Mr Taylor explained that they walked past the waiting customers and were taken into the back room to be given their methadone, while some customers may have been waiting for 20 minutes or more.
- 3.53.4. Mr Woods asked about concerns with a primary school being nearby. Mr Taylor acknowledged that the school was quite close.
- 3.53.5. Mr Woods had no further questions.

3.54. Questions from the Chairman to Mr Taylor

3.54.1. **The Chairman** asked about the two bus services and asked how close they went to Main Street in terms of access. Mr Taylor said that the 201 stopped about 150 yards from Main Street. The 240 was about the same distance away.

3.54.2. **The Chairman** asked how long it would take Mr Taylor to walk from Commercial Road to Main Street – ie how long to walk through Orbiston. Mr Taylor said that it would take him between 30-45 minutes.

3.54.3. The Chairman had no further questions and asked if any party had any further questions to raise in consideration of all the responses provided by Mr Taylor.

3.55. **Further Questions from the Committee, Applicant and other Interested parties to Mr Taylor**

3.55.1. Mr Aslam clarified the issue as to why methadone users were treated quickly in the pharmacy, which was in order to avoid any problems being caused within the shop.

4. **Summing Up**

4.1. After the Chairman had confirmed that there were no further questions or comments from those present and participating in the hearing, the various parties were asked to sum up their arguments in reverse order

4.2. **Summing up by Mr Taylor**

4.2.1. Mr Taylor said that he had covered everything.

4.3. **Summing up by Mr Razzaq**

4.3.1. Mr Razzaq said that there did not seem to be much support for this application which included a petition against a new pharmacy which had not mentioned needles, and any support received seems to be centred around convenience.

4.3.2. Mr Razzaq said that transport and travel in Bellshill has improved greatly in recent times, making access to current services easier.

4.3.3. Mr Razzaq commented that the population of Bellshill was decreasing, with no increase likely on the horizon. Although large parts of the neighbourhood were deprived, Mr Razzaq did not believe that the location of the proposed pharmacy did anything to make access easier, nor was it located in a focal point of the neighbourhood.

4.3.4. Mr Razzaq said that residents were used to travelling outwith the neighbourhood to access their daily needs and that there were 5 pharmacies in Bellshill, and 5 more nearby which provided a full range of services, which residents of the neighbourhood currently accessed.

4.3.5. Mr Razzaq stated that neither the pharmaceutical care plan for NHS Lanarkshire, nor the APC supported this application and the Applicant had failed to prove there

was inadequacy of service. Mr Razzaq concluded that the application should be refused, as it was neither necessary nor desirable.

4.4. Summing up by Mr Greer

4.4.1. Mr Greer concluded that the application offered no improvement on pharmaceutical provision other than convenience for those living immediately adjacent to it, it offered nothing to the vast majority of the population and therefore was neither necessary nor desirable.

4.5. Summing up by Mr Arnott

4.5.1. Mr Arnott affirmed that, in his view, the Applicant had shown no inadequacies in the current pharmaceutical provision, as there were three pharmacies within a mile of his proposed location, and there were five pharmacies providing a pharmaceutical service to the residents of Orbiston and Bellshill which had a combined population of 20,000.

4.5.2. Mr Arnott stated that there had been little or no public support for this application, that the residents had no difficulties in accessing the existing pharmaceutical services, and on a regular basis would travel outwith the neighbourhood to meet their daily needs. Mr Arnott repeated that the Application was about convenience, not adequacy or need.

4.5.3. Mr Arnott remarked that in consideration of the question of “What are the existing pharmaceutical services in the neighbourhood or in any adjoining neighbourhood”, his response was that there were three pharmacies within a mile of the proposed site, and that Lloyds were currently open 9am-9pm 7 days a week. Mr Arnott noted that the Applicant had been quick to also offer extended hours but had not been so quick to offer a needle exchange service.

4.5.4. Mr Arnott said that he had examined the NHS Lanarkshire Pharmaceutical Care Services Plan and could find no reference to there being a need for a pharmacy in the Applicants proposed neighbourhood.

4.5.5. Mr Arnott urged the Committee to refuse the application as it was neither necessary nor desirable in order to secure the adequate provision of Pharmaceutical Services in the neighbourhood in which the premises are located.

4.6. Summing up by The Applicant

4.6.1. The Applicant said that it was clear that his definition of the neighbourhood of Orbiston was agreed by the expert from the area.

4.6.2. The Applicant said that Orbiston was deprived and there were people with health issues. There were no pharmacies in Orbiston, and services outwith were inadequate. The Applicant continued that services outwith could not be regarded adequate for such a large population, in view of the elderly and infirm and a poor bus service.

- 4.6.3. The Applicant said that it would take someone further to walk to the bus stop than to walk to the pharmacy and said that the CAR was a robust method of obtaining the opinions of the local community, and that the majority of people who had responded believed there was inadequacy.
- 4.6.4. The Applicant reiterated that adequacy and pharmacies had changed over the years, with more services needing to be delivered, which was not adequate for a large deprived community.
- 4.6.5. The applicant repeated that a service could not be a bit inadequate and the only way to address the inadequacy would be to grant the application.
- 4.6.6. The Applicant said that data would support whether a 9am-9pm service was needed and would fill the need if it was required.
- 4.6.7. The Applicant said that the Committee had a real opportunity and responsibility in making a decision for Orbiston, and to change the health of the community. It was why he had become a pharmacist, in order to improve the health of the community and encouraged the Committee to grant the application, which he regarded as both necessary and desirable.
- 4.7. The Chair thanked all for contributing and for the written statements provided.

5. Retiral of the Parties

- 5.1. **The Chairman** then invited each of the parties present that had participated in the hearing to individually and separately confirm that a fair hearing had been received and that there was nothing further to be added. Having been advised that all parties were satisfied, **the Chairman** advised 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 issued to all parties as soon as possible. The letter would also contain details of how to make an appeal against the Committee's decision and the time limits involved.
- 5.2. **The Chairman** reminded the Applicant and Interested Parties that it was in their interest to remain in the building until the Committee had completed its private deliberations. This was in case the open session was reconvened should the Committee require further factual or legal advice in which case, the hearing would be reconvened and the parties would be invited to come back to hear the advice and to question and comment on that advice. All parties present acknowledged an understanding of that possible situation.
- 5.3. The Meeting adjourned at 13:40

6. Supplementary Information

- 6.1. Following consideration of the oral evidence, the Committee noted:

- 6.1.1. That each member had independently undertaken a site visit of Orbiston noting the location of the proposed premises, the pharmacies, general medical practices hosted and the facilities and amenities within.
- 6.1.2. A map showing the location of the proposed Pharmacy in relation to existing Pharmacies and GP surgeries within Orbiston and the surrounding area.
- 6.1.3. Prescribing and Dispensing Figures Report for GP practices and pharmacies close to the proposed premises from April 2015 - March 2016.
- 6.1.4. Demographic information for the townships of Bellshill, Holytown, New Stevenston and Motherwell taken from the 2011 Census.
- 6.1.5. Information extracted from pharmacy quarterly complaints returns to NHS Lanarkshire April 2013 – April 2016
- 6.1.6. Complaints received by NHS Lanarkshire about pharmacy services in North Lanarkshire
- 6.1.7. Report on pharmaceutical services provided within the townships of Bellshill, Holytown, New Stevenston and the closest located pharmacies in Motherwell.
- 6.1.8. The application and supporting documentation including the Consultation Analysis Report provided by the Applicant on 25 May 2016.
- 6.1.9. Petition against the proposed new pharmacy received on 30 June 2016 with 227 signatures.

7. Summary of Consultation Analysis Report (CAR)

7.1. Introduction

- 7.1.1. NHS Lanarkshire undertook a joint consultation exercise with Orbiston Pharmacy regarding its proposed application for a new pharmacy contract at 23 Lawmuir Road, Orbiston, Bellshill, ML4 2BZ
- 7.1.2. The purpose of the consultation was to seek views of local people who may be affected by this new pharmacy. The consultation also aimed to gauge local opinion on whether people felt access to pharmacy services in the area was adequate, as well as measuring the level of support for the new pharmacy.

7.2. Method of Engagement to Undertake Consultation

- 7.2.1. The consultation was conducted via SurveyMonkey to capture respondents' definitive responses and free text views for accurate reproduction graphically and textually. The consultation link was hosted on NHS Lanarkshire's (NHSL) public website www.nhslanarkshire.org.uk
- 7.2.2. The Consultation was publicised via a press release, NHSL Facebook page, Twitter account, rolling banner on the NHSL website homepage and statistically on the Get Involved page. North Lanarkshire Council was also notified for dissemination to local groups and elected representatives and the relevant Public Partnership Forums.

7.3. Summary of Questions and Analysis of Responses

	Question	Yes	No	Don't Know	Replied	Skipped
Q1	Do you agree with the area within the red border in the above map describes the neighbourhood where the proposed pharmacy is based	85	14	9	108	0
Q2	Do you think the location of the proposed premises is accessible for patients in and around the neighbourhood	93	10	5	108	0
Q3	With regard to the neighbourhood, as defined in Section A, do you think that the current pharmaceutical services being provided in and to the neighbourhood are adequate	See below			88	20
Q3a	Dispensing of NHS Medications	35	53	-	88	-
Q3b	Supply of medicines under the Minor Ailment Service	37	51	-	88	-
Q3c	National Pharmaceutical Public Health Services including smoking cessation and supply of emergency hormonal contraception	39	49	-	88	-
Q3d	Chronic Medical Service – for people with long term conditions	35	53	-	88	-
Q3e	Substance Misuse services	37	51	-	88	-
Q3f	Stoma Service – appliance supply for patients with a colostomy or urostomy	39	49	-	88	-
Q3g	Gluten Free Foods	38	50	-	88	-
Q3h	Unscheduled Care – urgent health matters/supply of emergency prescription medicines	34	54	-	88	-
Q3i	Support to Care Homes	37	51	-	88	-
Q4	The following list of services are being proposed by Orbiston Pharmacy. Please indicate whether you feel these are required within the neighbourhood, as defined in Section A.	See below			88	20
Q4a	Dispensing of NHS Medications	69	19	-	88	-
Q4b	Supply of medicines under the Minor Ailment Service	69	19	-	88	-

Q4c	National Pharmaceutical Public Health Services including smoking cessation and supply of emergency hormonal contraception	69	19	-	88	-
Q4d	Chronic Medical Service – for people with long term conditions	69	19	-	88	-
Q4e	Substance Misuse services	42	46	-	88	-
Q4f	Stoma Service – appliance supply for patients with a colostomy or urostomy	66	22	-	88	-
Q4g	Gluten Free Foods	66	22	-	88	-
Q4h	Unscheduled Care – urgent health matters/supply of emergency prescription medicines	68	20	-	88	-
Q4i	Support to Care Homes	65	23	-	88	-
Q5	Do you think that the proposed hours are appropriate	64	13	9	86	22
Q6	Do you believe there are currently any gaps/deficiencies in the proposed provision of pharmaceutical services in and to the neighbourhood, as defined in Section A	31	39	16	86	22
Q7	In your opinion, would the proposed application help other healthcare providers to work more closely together – eg GPs, community nursing, other pharmacies, dentists, optometrists and social services	53	19	13	85	23
Q8	Do you believe this proposal would have any impact on other NHS services, eg GPs, community nursing, other pharmacies, dentists, optometrists and social services	29	41	15	85	23
Q9	Do you support the opening of a new pharmacy being proposed at 23 Lawmuir Road, Orbiston, Bellshill, ML4 2BQ	61	20	4	85	23
Q10	I am responding as	Individual = 73 Group/Organisation = 2			75	33

7.4 There were a number of other questions that related to contact information.

7.5 In total 108 responses were received, 107 via SurveyMonkey with 1 paper questionnaire returned out of 2 requests. All submissions were made and received within the required timescale, thus all included in the Consultation Analysis Report.

8. Decision

8.1. The Committee in considering the written evidence submitted during the period of consultation, written and oral evidence presented during the hearing and recalling observations from site visits carried out on different days and at different times, first had to decide the question of the neighbourhood in which the premises, to which the application related, were located.

8.2. Neighbourhood

8.2.1. The Committee noted the neighbourhood as defined by the Applicant and the views expressed by the Interested Parties. A number of factors were taken into account by the Committee when defining the neighbourhood, including those resident in it, natural and physical boundaries such as railways, major roads, waterways and open land, general amenities such as schools/shopping areas, the mixture of public and private housing, the provision of parks and other recreational facilities, the distances residents had to travel to obtain pharmaceutical and other services and also the availability of public transport and the level of mobility provided by the spread of car ownership. The Committee took into account the views expressed by the representative of the Bellshill Community Council during the hearing.

8.2.2. The Committee was in agreement with the northern and western boundaries proposed by the Applicant but not the southern and eastern boundaries. The Committee agreed that the neighbourhood should be defined as:

To the North - From the point where Hamilton Road (B7070) intersects the railway line by the entrance to Bellshill Station, heading east until the railway line intersects Motherwell Road (A721).

To the East – Heading south from the point where the railway line intersects Motherwell Road (A721) until it intersects South Calder Water just below Calder Road.

To the South - Following South Calder Water westwards until the point it meets the railway line to the south, and continues west along the railway line until it intersects the A725.

To the West - From the point where the railway line to the south intersects with the A725, heading north along Hamilton Road (B7070) until it intersects with the railway line in the north near to the entrance to Bellshill Station.

- 8.2.3. The neighbourhood proposed by the Committee contained the following amenities: a convenience shop, a hairdresser, a nursery, two primary schools, two churches, a community centre, a neighbourhood centre, a golf club, a public house a bowling club, a training centre and both private and social housing developments, as well as a park and recreational green.
- 8.2.4. The Committee noted that although there were no pharmacies within the defined neighbourhood, there were five pharmacies just outwith the neighbourhood providing a full range of pharmaceutical services and that the local buses passed close to the Main Street. Three pharmacies were clustered close together on Main Street, just north of the northern edge of the neighbourhood, with an additional pharmacy further north which operated extended opening hours. The Committee also noted that there was one pharmacy to the east further along Main Street which was close to the three medical centres that served the defined neighbourhood.
- 8.3. **Adequacy of existing provision of pharmaceutical services and necessity or desirability**
- 8.3.1. Having reached a conclusion as to the defined neighbourhood, the Committee was then required to consider the adequacy of pharmaceutical services to that neighbourhood and, if the Committee deemed them inadequate, whether the granting of the application was necessary or desirable in order to secure adequate provision of pharmaceutical services in the neighbourhood.
- 8.3.2. The Committee deemed it more likely that residents at the northern part of the neighbourhood would find it easier to visit one of the pharmacies on Main Street outwith the neighbourhood as opposed to travelling to the Applicant's proposed premises.
- 8.3.3. The Committee considered the other amenities, and acknowledged that there was no bank, post office, library, petrol station, optician or dentist within the defined neighbourhood but that people living within the defined neighbourhood were used to travelling outwith the neighbourhood in order to obtain many services, facilities and amenities. The Committee acknowledged that although there was a cash machine and a convenience store, many residents would be likely to travel outwith to the main shops and retail premises, many of which were clustered around the Main Street and surrounding streets just north of the defined neighbourhood.
- 8.3.4. The Committee considered access to the pharmacy and discussed the transport links and parking availability. The Committee recognised the limited use of the MyBus service, considered the other bus routes and time tables, and concluded that residents of Orbiston were provided with a sufficient level of public transport in order to travel to the existing pharmacies in a reasonable manner. The Committee also

noted the level of car ownership amongst the residents in the defined neighbourhood and considered the parking available near the existing pharmacies and in the area by the proposed premises, and the Committee concluded that parking was sufficient in both the area surrounding the proposed premises and near the other pharmacies outwith the neighbourhood. Although the Committee accepted that the Main Street was very busy at times, nevertheless the Committee noted that there were no less than five car parks within walking distance of the Main Street and that parking facilities were also available nearby in a number of large retail premises.

- 8.3.5. The Committee considered the availability of the dispensing service at lunchtimes, noting the Applicant had stated that his pharmacy would remain open to dispense prescriptions over the lunch period, although other pharmacies closed their dispensing facility over the lunch period. The Committee concluded that a pharmacy unable to dispense prescriptions during the lunch period could not be deemed to be providing an inadequate service as the requirement was not contained within the core opening hours.
- 8.3.6. The Committee considered the petition and observed that nobody had represented the petitioners at the hearing. The Committee agreed to accept and acknowledge the petition, appreciating that residents had been concerned enough to sign it, recognised that the petition was limited in terms of its argument, noted the allegation about the needle exchange service and acknowledged the concerns with regard to the residency of people who had signed the petition.
- 8.3.7. The Committee deemed that the type of people who would be participating in the needle exchange service would likely be the same type of people taking part in the substance abuse programme (methadone scheme), and referred to the Applicant's statement that although his other pharmacies participated in the substance abuse programme (methadone service), a needle exchange service was not currently provided, and that he would need to conduct a risk assessment before considering whether the needle exchange service would be offered at his proposed premises.
- 8.3.8. The Committee discussed at length the size of the neighbourhood known as Orbiston, the accepted population of 5,200, the range of pharmaceutical services provided by the five pharmacies and the days and times that those pharmacies were open. The Committee also took into account the small number of complaints and the reasons given for wanting a pharmacy in the south part of Orbiston, and whether there were existing and adequate pharmaceutical services within reach of people living within the defined neighbourhood.
- 8.3.9. The Committee then went on to consider in detail the Consultation Analysis Report (CAR). Although the response numbers had been limited, it was noted that the majority of respondents' comments related to inconvenience rather than necessity.

The Committee also considered the possibility that some respondents may not distinguish between necessity and having convenient access to services.

- 8.3.10. Regarding Question 3 of the CAR, which asked whether the current pharmaceutical services being provided in and to the neighbourhood were adequate, it was noted that 88 responses had been received, of which a slight majority had responded that they disagreed that the services were adequate. However, 45 out of 108 respondents had provided additional comments and, after removing comments that were deemed to be irrelevant, that left 42 comments to be considered. Of those, 10 people had said that the existing services were adequate, which left 32. Of those 32 responses, 22 people's comments had related to convenience, which left only 10 responses providing other arguments.
- 8.3.11. The Committee acknowledged that the CAR had elicited 108 responses, with a slight majority indicating that pharmaceutical services provided in and to the neighbourhood were inadequate. The Committee spent a great deal of time examining the reasons given for those responses - waiting times, mobility issues, car parking problems, lunchtime closures – and compared those written comments with the evidence provided and considered and challenged at the hearing itself. The Committee used its own local knowledge of the area and its services and facilities to attach an appropriate weight to those objections and eventually reached the conclusion that the overwhelming majority of the objections were based on arguments of convenience and that there was insufficient evidence to show that the existing pharmaceutical services were inadequate.
- 8.3.12. Following the withdrawal of Mrs Park and Mr Aslam 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 Committee, for the reasons set out above, considered that the pharmaceutical service within Orbiston was adequate. The Committee concluded that the three nearby pharmacies, together with the other two pharmacies within walking distance, provided an adequate service to the neighbourhood of 5,200 people and there was no evidence of any substance provided to demonstrate any inadequacy of pharmaceutical services to the defined neighbourhood.
- 8.3.13. Accordingly, the decision of the Committee was unanimous that the establishment of a new pharmacy at 23 Lawmuir Road, Orbiston, ML4 2BZ was neither necessary nor desirable in order to secure adequate provision of pharmaceutical services within the neighbourhood in which the premises were located by persons whose names were included in the pharmaceutical list, and accordingly the application was rejected. This decision was made subject to the right of appeal as specified in Paragraph 4.1, Regulations 2009, as amended.

8.3.14. Mrs Park and Mr Aslam were requested to return to the meeting, and informed of the decision of the Committee.

The meeting closed at 15:40 hours