

Minutes of the meeting of the Pharmacy Practices Committee (PPC) held on Monday 15 August 2022 at 09:45 in the Assembly Room, Low Parks Museum, 129 Muir Street, Hamilton, ML3 6BJ

The composition of the PPC at this hearing was:

Chair: Ms Lesley McDonald

Present: Lay Members Appointed by NHS Lanarkshire Board

Mr Michael Fuller

Mr John Woods

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

Mr Kenneth MacKenzie

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

Mr Arif Hanif

Secretariat: Ms Toks Coyle, Toks Rocks Virtual Assistant

Central Legal Office: Not in attendance but available via MS Teams if required

1. APPLICATION BY FERNIEGAI PHARMACY LTD

1.1. There was submitted an application dated and received 03 May 2022 by Ferniegair Pharmacy Ltd to have their name included in the Pharmaceutical List of Lanarkshire Health Board in respect of a new pharmacy at Unit 3, Allanton Gardens, Ferniegair, ML3 7GQ.

1.2. Submission of Interested Parties

The following documents were received:

- i) Letter dated 24 May 2022 from Mike Embrey, on behalf of WEB Pharmacy Ltd.
- ii) Letter dated 30 May 2022 from Joanne Watson, on behalf of Boots UK Ltd
- iii) Letter dated 15 June 2022 from Matthew Cox, Lloyds Pharmacy Limited.

- Information relating to the proposed site of the pharmacy - Unit 3 external and internal floor plans, acceptance of certificate of completion building (Scotland) Act 2003, letter from Wilson Developments confirming licence of the Unit to the applicant.

2. PROCEDURE

2.1. At 0930 hours on Monday 15 August 2022 the Pharmacy Practices Committee (“the Committee”) convened to hear the application by Ferniegair Pharmacy Ltd, Mrs Catherine Stitt and Mrs Catherine Bankier (“the Applicant”). The hearing was convened under Paragraph 2 of Schedule 3 of The National Health Service (Pharmaceutical Services) (Scotland) Regulations 2009, as amended, (SSI 2009 No 183, SSI 2011 No 32 and SSI 2014 No 118) (“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”.

2.2. The Chair welcomed all to the meeting and introductions were made. When asked by the Chair, all Committee Members confirmed that the hearing papers had been received and considered and that none had any personal interest in the application. The Chair informed members that Mrs Catherine Stitt, accompanied by Mrs Catherine Bankier, would make representations as the Applicant. There would also be representations from the following interested parties:

- (i) Mr Scott Jamieson on behalf of Boots UK Ltd accompanied by Ms Ruth Kozak.
- (ii) Mr Tom Arnott on behalf of Lloyds Pharmacy Limited
- (iii) Mr Noel Wicks on behalf of WEB Pharmacy Ltd.

The Chair also confirmed that the following parties were included in the consultation but did not respond:

- Well Pharmacy
 - Area Medical Committee – NHS Lanarkshire
 - Area Pharmaceutical Committee – NHS Lanarkshire
- The following Community Councils were invited to respond as the proposed neighbourhood is not covered by a Community Council and these were the closest. No responses were received.
- Hillhouse Community Council
 - Larkhall Community Council
 - Meikle Earnock Community Council

2.3. It was noted that Members of the Committee had previously undertaken site visits to Ferniegair and surrounding townships 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 immediate and surrounding areas such as, but not limited to, banks, post office, supermarkets, libraries, churches, schools and sports facilities.

- 2.4.** The Chair advised that Ms Toks Coyle, Toks Rocks Virtual Assistant was independent from NHS Lanarkshire and was solely responsible for taking the minute of the meeting.
- 2.5.** The Chair confirmed that the services of Central Legal Office had been retained and legal advice would be available via Microsoft Teams if required.
- 2.6.** There was a brief discussion on the application and the Chair invited Members to confirm an understanding of these procedures. Having ascertained that all Members understood the procedures the Chair confirmed that the Oral Hearing would be conducted in accordance with the guidance notes contained within the papers circulated. The Chair then invited the Applicant and Interested Parties to enter the hearing.
- 2.7.** The Open session convened at 1000 hours

3. ATTENDANCE OF PARTIES

- 3.1.** The Chair welcomed all and introductions were made. For the Applicant Ferniegair Pharmacy Ltd, Mrs Catherine Stitt would present, accompanied by Mrs Catherine Bankier. From the Interested Parties eligible to attend the hearing, the following accepted the invitation: (i) Mr Scott Jamieson representing Boots UK Ltd accompanied by Ms Ruth Kozak (ii) Mr Tom Arnott representing Lloyds Pharmacy Ltd, and Mr Noel Wicks representing WEB Pharmacy Ltd. The Chair stated that only one person would be permitted to speak on behalf of each party.
- 3.2.** The Chair advised all present that the meeting was convened to determine the application submitted by Ferniegair Pharmacy Ltd in respect of premises located at Unit 3, Allanton Gardens, Ferniegair, ML3 7GQ. The Chair 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 Chair read out in part:
- 3.3.** “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 by persons whose names are included in the Pharmaceutical List.”

- 3.4.** The Chair emphasised the three components of the statutory test and confirmed that the Committee, in making its decision, would consider these in reverse order in that they would determine the neighbourhood first and then decide if the existing pharmaceutical services in and to 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.
- 3.5.** The Chair confirmed that a statutory Joint Consultation had been undertaken to assess the current provision of pharmaceutical services in or to the neighbourhood and whether it was adequate and to establish the level of support of residents in the neighbourhood. The Consultation complied with the requirements of Regulation 5A(3)(b) which sets out the range of issues to be consulted upon. The Consultation Analysis Report (CAR) is presented as factual and has been provided to the Committee, the Applicant and all parties consulted. The Committee is required to include a summary of the CAR in its published determination and to illustrate how it was taken into account in its determination of the statutory test.
- 3.6.** The Chair confirmed that the Committee would also have regard to the Report on Pharmaceutical Services that had been circulated to all attending as part of the papers. That report showed services currently provided in the townships of Hamilton and Larkhall neighbouring Ferniegair and was a bespoke update on the services provided in those townships to that outlined in NHS Lanarkshire's Pharmaceutical Care Services Plan.
- 3.7.** The Chair advised that Ms Toks Coyle, Toks Rocks Virtual Assistant, would be present throughout the duration of the hearing for the purposes of providing secretariat support to the Committee. The Chair confirmed that Ms Coyle was independent of Lanarkshire NHS Board and would play no part in either the public or private sessions of the Committee.
- 3.8.** The Chair confirmed that Central Legal Office was available via Microsoft Teams in the event any legal advice was required so that all parties could hear the legal advice and be given the opportunity to ask questions. The parties had been notified in advance and had expressed no objections.
- 3.9.** The Chair confirmed that all members of the Committee had conducted site visits to the premises concerned on different days and at different times in order to understand better the issues arising out of this application. No member of the Committee had any interest in the application.
- 3.10.** The Chair stressed that, regardless of any references to any previous applications in written or verbal evidence, the current application would be considered solely on its merits based on the written and verbal evidence presented at the hearing that day. No previous decisions of the Pharmacy Practices Committee would have any bearing on the Committee's decision.

- 3.11. The Chair confirmed that the Oral Hearing would be conducted in accordance with the guidance notes contained within the papers circulated. She asked for confirmation that all parties fully understood the procedures to be operated during the hearing as explained, and whether they had any questions or queries about those procedures and whether they were content to proceed. All confirmed agreement on all these points. The Chair concluded the procedural part of the hearing by reminding each party that there could only be one spokesperson for each party.

4. **APPLICANT'S SUBMISSION**

The Chair invited Mrs Catherine Stitt on behalf of Ferniegair Pharmacy Ltd ("The Applicant") to speak in support of the application. Mrs Stitt read from a pre-prepared statement transposed below:

- 4.1. Thank you for giving us the opportunity to present to the Committee. My name is Catherine Stitt, and this is my business partner Kate Bankier. We are equal shareholders in the company set up for this application, namely Ferniegair Pharmacy Limited. We are community pharmacists, living and working in Lanarkshire where we own 2 village community pharmacies, New Stevenston Pharmacy for the last 18 years, and Cleland Pharmacy for the last 5 years.
- 4.2. We pride ourselves on providing a friendly, personal and efficient service, and we always try to go the extra mile for our patients. Over the years, many of the local nursing teams, and those from further afield have started to use the pharmacy in New Stevenston because of the service they receive.
- 4.3. We are part of a buying group for independent pharmacies. As part of this group we purchase medicines from many companies including Phoenix, Alliance, AAH, Ethigen, OTC Direct and Bestway. In addition, we also hold accounts with Aver and Target which we can use as a back-up.
- 4.4. Each week without fail, we receive calls from some of the primary care pharmacists based in the GP surgeries asking if we are able to source particular products that some other pharmacies are having difficulty sourcing. The pharmacists and the surgeries regularly suggest to patients to try our pharmacies if they are having difficulty obtaining a product.
- 4.5. During the 18 years we have owned a pharmacy, there have been no official complaints to NHS Lanarkshire. All our previous General Pharmaceutical Council inspections have required no action, and the inspectors have always commented that our staffing levels are good.
- 4.6. As you will see from the data from the two Freedom of Information requests provided, lots of pharmacies near the pharmacy in New Stevenston, and in NHS Lanarkshire as a whole are closing for part or all of a day on a regular

basis due to various factors including not having a pharmacist, or not having sufficient staffing. Having been pharmacists for over 30 years, we are shocked at the number of pharmacies closing. We are proud to say that at no point have we closed or reduced our opening hours including during the various lockdowns.

4.7. We also responded to the Scottish Government and NHS Lanarkshire request to remain open on all the bank holidays during the first lockdown in April and May 2020. This was to help alleviate some pressure from out-of-hours services and A&E and so that people could, 'Stay Local'.

4.8. In addition to these closures, you will see from the information provided that 7 pharmacies (5 Boots and 2 Lloyds) near to our pharmacy in New Stevenston have all requested to close on all or some of the Saturdays from 9th July-20th Aug this year. We have responded by making sure we have extra staff available on these Saturdays.

4.9. This is the first application that we have made to open a new contract.

4.10. NEIGHBOURHOOD

We propose that the neighbourhood be defined as follows:

North-the Avon Water till it meets the M74 motorway

West-Avon Water

South-Council boundary of Avon Water, un-named road to Carlisle Road, Lanark Road to Merryton Farm Cottage, then farm land till it meets the M74 motorway (this is the southern council boundary)

East-M74 motorway.

To help with defining the neighbourhood, we spoke to the local councillor Davie McLachlan, and received his input.

Of the 607 responses to the joint consultation analysis report conducted by Ferniegair Pharmacy Limited and NHS Lanarkshire, 93.6% agreed that this represented the neighbourhood.

4.11. FERNIEGAIR

Ferniegair is a village situated in South Lanarkshire between the towns of Hamilton and Larkhall. It has in the past been a vibrant mining village with schools, places of worship, and local services, but following the decline of employment due to the closure of the mines, people moved away. Although people still lived in what is referred to as the old part of the village, it was around 15 years ago that the train station re-opened and new housing started to be built signalling the start of the re-generation of Ferniegair.

4.12. The village has the following:

-Chatelherault train station and park and ride. Re-opened in 2005 after closing in 1917. Car park has a total of 98 spaces including 6 disabled spaces and 4 electric charging points.

-Hamilton Golf Club. Includes a shop, restaurant and bar.

-Chatelherault Country Park. Major visitor attraction which includes a café, gift shop, visitor centre and function facilities. **ANNUAL VISITOR NUMBERS OF MORE THAN 780,000.**

-Chatelherault Inn. Public house with a restaurant and function room.

-Brookside Garden Centre and Café.

-Dressed. Ladies clothes shop

-Vintage. Tea room.

-Hair Pod. Hair and beauty salon.

-Ferniegair Hall and grounds. Due to re-open on 15th August after being closed due to Covid restrictions. Used for art class, dancing class, dog training, spiritualist church, drama group for adults with learning difficulties, Gala Day Committee and fundraisers, yoga classes, Weight Watcher classes, councillor surgeries, private bookings and functions.

-Public park and various children's play areas.

-Wheatley Care. A housing support service for people who are homeless or at risk of becoming homeless.

-Co-op. Has a cash machine, parcel collection service and future plans to incorporate Post Office facilities.

-Nourish. Delicatessen.

In 2021, 3 new retail units were completed alongside 70 flats and terraced houses in association with Clyde Valley Housing Association just off Carlisle Road. The first two units are occupied by the Co-Op and Nourish Deli, and the 3rd one we have been renting since its completion in March 2021.

4.13. Ferniegair is listed along with Larkhall as a Community Growth Area in the latest South Lanarkshire Development Plan

4.14. Chatelherault Country Park is one of the busiest visitor attractions in Lanarkshire with annual visitor no's of 780,000 for the 12 months to end July 2022. The park has over 500 acres of countryside and woodland and over 10 miles of routed pathways. It features an adventure playground, picnic facilities and is home to a listed 18th century hunting lodge. As well as the former hunting lodge itself, people come to use the outdoor facilities to walk, cycle and jog, and it hosts many events and clubs throughout the year. This year saw the advent of a weekly Sunday outside market which has been running most Sundays since March and has proved very popular with over 40 stalls. Major events like Stereofunk Music festival and Cyclocross bike racing have been held in the last few months. Each week the park hosts many outdoor activity clubs for both adults and children. During the various lockdowns, visitor numbers increased dramatically as people tried to 'Stay Local'.

- 4.15.** On the 29 March 2022, planning permission was granted for 151 new homes on Clyde Terrace as outlined in the “Green Light for New Homes” article 14 April 2022, in The Hamilton Advertiser. There will be 67 three bedroom and 84 four bedroom terraced, detached and semi-detached homes. The applicant will provide a financial contribution towards education and affordable housing at the Ferniegair site.
- 4.16.** The people of Ferniegair very much see themselves as being a community, and each others’ neighbours.
- 4.17.** The village has hosted a Gala Day which has been held annually for over 50 years in the park at the bottom of the village. There is an active and well supported Gala Committee which as well as the Gala Day itself, organises events throughout the year including a children’s Christmas party, and a Christmas Eve visit by Santa in his sleigh around all the streets of Ferniegair. The village has 2 active Facebook pages namely Ferniegair Community, and Ferniegair residents.
- 4.18.** During the various lockdowns we were advised by the Government to ‘Stay Local’. If COVID has taught us one thing, it’s that what we actually need to live our daily lives is a food shop which Ferniegair now has, and a pharmacy. In lockdown these were pretty much the only businesses that the Government needed to keep operating.
- 4.19.** Population - we estimate the population of Ferniegair to be approx. 3,000 based on the data zone figures (2701 and 2702) and adding on the 70 new homes which were completed in 2021 and the 151 new homes which passed planning in March 2022. The NHS Pharmaceutical Regulations 2011 (PCA) P 7 (2011) state ‘In formulating its decision as to the need for additional pharmaceutical services, a PPC will need to take account of a number of factors. Some are listed. c. Anticipation of future developments; 1. Known fixed/firm plans for the development and/or expansion of new centres of population, eg, new or developing housing estates’.
- 4.20.** In addition to the 3,000 population, Ferniegair also has a large transient population of over 780,000 visitors each year (15,000 each week) who use Chatelherault Country Park, the park and ride facilities, and the golf club.
- 4.21.** We have taken the transient population in to account in the hours that we propose to open. These hours are 8.30-6pm Monday, Tuesday, Wednesday and Friday, 8.30-7pm on Thursday, 9-5pm on a Saturday, and 11-2pm on a Sunday.
- 4.22.** In Lanarkshire, applicants don’t often mention transient populations. The NHS Pharmaceutical Regulations 2014(PCA (P) (2014) 15) [sic] state ‘Among the

MINUTE: PPC/2022/02

factors which PPCs should consider in making a determination on an application are :-the likely demand for pharmaceutical services in the neighbourhood from both the resident and any transient population’.

- 4.23.** Question 6 of the Consultation Analysis Report (CAR) asked ‘Do you think the proposed hours are appropriate?’ and almost 91% of respondents thought they were.
- 4.24.** Application and Unit – we started the process of applying for a new contract in September 2018, almost 4 years ago. When lockdown hit in March 2020, Ferniegair was next in line to start the consultation process, but this was then delayed, and didn’t start until the 21st September 2021.
- 4.25.** Although the building of the units was stopped for a couple of months during the pandemic, building work re-started fairly quickly, meaning that the unit was granted a completion certificate from South Lanarkshire Council at the end of Feb 2021. We expected the unit to be ready around the same time as we anticipated our Committee hearing for Ferniegair to be heard. The delay in the hearing has meant that in order to continue with our application, we have had significant unplanned costs in rent. We hope the Committee will appreciate how committed we are to this, and how much we believe this application is important to the local community.
- 4.26.** The unit at Allanton Gardens is 89.6m² and the floorplan has been provided. If successful, we intend to install a Pharmaself24 prescription collection point or similar. Patients benefit from being able to pick up their prescription at whatever time of the day or night they choose. We see this as being particularly useful for anyone who is commuting. A prescription collection point like this is not available in any pharmacy in Larkhall or Hamilton.
- 4.27.** There are 15 free car parking spaces including spaces for the disabled at the front of the unit, and many more spaces available at the park and ride a short walk away. Many people walk to the units that are already open with prams, dogs and children on bicycles. There are car parking spaces to the rear of the unit which can be used by staff.
- 4.28.** The builder who is also the landlord had a lot of interest in renting out the unit, including from at least 4 other pharmacists, which shows that we are not the only pharmacists who think that a pharmacy in Ferniegair is required.
- 4.29.** If successful, we intend to have at any time a pharmacist, 2/3 pharmacy assistants and a delivery driver in the pharmacy. This would be reviewed as the business developed. We recognise that we will need to employ more staff than this to cover the extended hours.
- 4.30.** We have received letters of support from the local councillor Davie McLachlan, MSP Monica Lennon, and 4 of the GP surgeries namely Gallowhill Medical Practice, and Avon Medical Practice in Larkhall, and Hamilton West Medical Practice and Douglas Street Surgery in Hamilton
- 4.31.** The towns which neighbour Ferniegair are Larkhall and Hamilton.

- 4.32. LARKHALL** - Larkhall has a population of approx. 15,000. The town has four busy pharmacies. These pharmacies are: Boots (large) at 71/77 Union Street, Lloyds at 78 Union Street, Well at 102 Union Street and Boots(small) at 141 Union Street.
- 4.33.** The nearest pharmacies to the application address are Boots(large) and Lloyds which are both 2.6 miles away. It took me 50 minutes to walk the distance between these 2 sites.
- 4.34.** The average no of items in the 4 Larkhall pharmacies in the period shown is 8927 which is much higher than the average per pharmacy in Scotland of 6809. None of these pharmacies are open on a Sunday as the hourly Sunday rota for Larkhall was stopped a few years ago.
- 4.35.** There have been various comments on the Larkhall Facebook page about pharmacies in Larkhall not being open on a Sunday. Comments in the CAR about Sunday opening include 'Sunday opening would help the wider community as a Sunday pharmacy is a rare thing that would help take pressure off gp/out of hours services' and 'Sunday opening and late night would be ideal to allow access for working families'.
- 4.36.** Well Pharmacy at 102 Union Street is not represented here today as they did not respond to the consultation to interested parties. We don't therefore have the opportunity to ask them questions, and recognise that they won't be able to respond. The following is the experience that we had in Well:
- 4.37.** Visit 1-We asked for something on Pharmacy First for an occasional skin irritation, explaining that we had used aqueous calamine cream in the past and it had helped. The assistant said that they didn't have that cream, that there was no alternative on the formulary, didn't suggest anything to try instead, and suggested that we tried Boots or Lloyds.
- 4.38.** Visit 2-We asked about a dosette box and delivery for an elderly relative. We were told that they were full for dosettes, and at capacity for delivery.
- 4.39.** Visit 3-We presented a prescription for 2 popular items. We were initially asked to come back the next day. There were no other customers in the pharmacy. After explaining that we needed it today, we were told to come back in an hour. It was ready on return.
- 4.40.** Visit 4-From Saturday 13 August-sign on door stating 'Closed today. Due to staffing issues we will be closed between 3-4pm'.
- 4.41. HAMILTON** - Hamilton has a population of approx. 54,000. The town has 11 busy pharmacies, namely 1 Right Medicine, 6 Boots and 4 Lloyds.
- 4.42.** The nearest pharmacies to the application address are Boots in Regent Way (1.8 miles) and Right Medicine in Brandon Street (2miles). It took me 35 minutes to walk from Allanton Gardens to the Boots in Regent Way along a road which is extremely narrow in places.

- 4.43.** The average no of items in the 7 Hamilton pharmacies from the figures provided by NHS Lanarkshire is 10,075. Again like Larkhall, this is much higher than the Scottish average of 6809 items per pharmacy each month.
- 4.44.** Parking is not free in the town centre. Hamilton town centre as a shopping destination has seen a severe decline in recent years with many units either closing altogether or re-locating. There is currently only 1 shop unit occupied on the stretch of the Regent Shopping Centre facing on to the main thoroughfare of Duke Street from the site of the vacant Bairds department store to the vacant M&S unit. M&S closed earlier this year at the end of March and was a huge loss to the town. Many units inside the Regent Centre near to Boots are also vacant.
- 4.45.** In addition, many units are also vacant in the New Cross Centre near to Right Medicine in Brandon St and Lloyds in Quarry Place. These closures will have undoubtedly changed peoples shopping habits, and where they choose to access pharmacy services.
- 4.46.** **GPs and A&E** - Recent results from the Scottish GP Patient Survey 2022 have been published, and show that people are still finding it hard to access services with overall positive experience in Scotland being down by 12%. The Covid pandemic has resulted in only 37% of patients saying they received a face-to-face appointment (down 49%). At the same time, telephone consultations were up by 46%.
- 4.47.** Over the last few weeks there have again been reports on various media platforms in Lanarkshire asking patients who have conditions that are not life threatening to stay away from the 3 local A&E departments of Wishaw, Monklands and Hairmyres as they are extremely busy with long waiting times.
- 4.48.** There were also 2 reports in last weeks Hamilton Advertiser newspaper concerning pressures on A&E departments in Lanarkshire. One is from one of the MSPs Monica Lennon stating that there is a crisis of the new normal in our health service and about A&E departments, and the other one from last week's Hamilton Advertiser highlighting that hospitals are back to code black
- 4.49.** **CONSULTATION ANALYSIS REPORT(CAR)**
The joint consultation with NHS Lanarkshire started on 23 September 2021, and lasted for 90 working days, finishing on 2 February 2022. The consultation had 602 online replies, and 5 paper replies giving a total of 607 responses, which is the largest response to an application that NHS Lanarkshire have had by quite a significant amount. The previous application for Stonehouse had 298 replies and the largest previously was for Newton, Cambuslang with 413 replies.

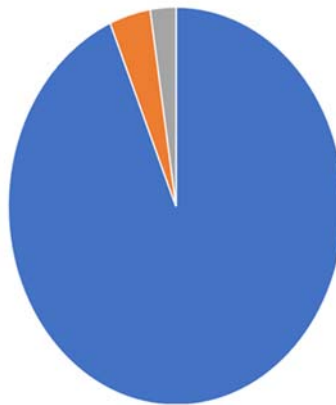
4.50. Ongoing Covid restrictions made the consultation more difficult as we were not able to hold public meetings to engage with the public. The consultation was also live over the Christmas and New year holiday period when people would have had other priorities.

4.51. The applicant read out the following excerpts from the CAR:

4.52.

Question 1: Do you agree that the area within the purple border represents the neighbourhood that would be served by the proposed pharmacy?

Response	Yes	No	Don't know
Number	568	24	15
%	93.57	3.95	2.47



Comments

The neighbourhood within the border adequately represents Ferniegair.

The growth of housing in the Ferniegair village requires further services, such as a pharmacy to be easily accessible and built at the community.

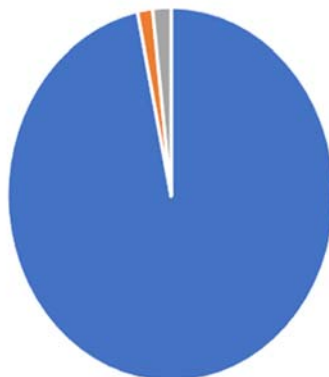
There are no pharmacies in this area of Hamilton, and other pharmacies are a distance away and not seen as local.

Total responses: 607
Skipped: 0

■ Yes ■ No ■ Don't know

Question 2: Would a pharmacy at the proposed location be accessible for patients in and around the neighbourhood?

Response	Yes	No	Don't know
Number	587	9	11
%	96.71	1.48	1.81



Comments

The location is well within walking distance of a large number of houses but there is also short-term parking space outside and in the nearby station car park.

I think this is a great idea and a fantastic location. It is on a bus route, it has car parking, it is flat so has disabled access.

Local residents and passing traffic would benefit from a pharmacy at this location.

Total responses: 607
Skipped: 0

■ Yes ■ No ■ Don't know

Question 3: 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?

Note

The draught version of the CAR had space for written comment however the live Survey Monkey did not.

Response	Yes	No	Don't know
Number	192	193	141
%	36.5	36.69	26.81



Total responses: 526
Skipped: 81

■ Yes ■ No ■ Don't know

Question 4: Do you think that the current provision of pharmaceutical services in and to the proposed neighbourhood has any gaps or deficiencies?

Comments

No pharmacy in Ferniegair. Pharmacies in Larkhall take too long to with prescriptions and can never supply the full amount. Tried to get a delivery last March and all said they were too busy. No delivery. My friend tried to get a tray for her tablets and no one would help.

As a Ferniegair disabled resident I currently get my dosette box delivered from Motherwell as the local pharmacies are unable to deliver as they have no vacancies.

The distance is an issue. The pharmacies in Larkhall have rude staff. The closest one in Hamilton is Boots and they don't even cover minor ailments-that is necessary in a pharmacy and I hope a new one here would provide this service

Response	Yes	No	Don't know
Number	304	119	104
%	57.69	22.58	19.73

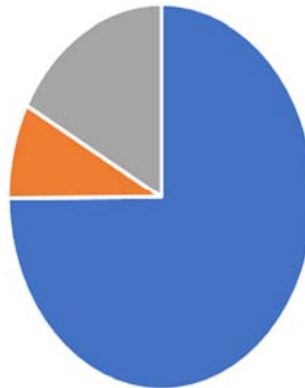


Total responses: 527
Skipped: 80

■ Yes ■ No ■ Don't know

Question 5: Ferniegair Pharmacy Ltd are proposing to provide the services listed below. Do you think the proposed pharmacy needs to open for people in the neighbourhood to have adequate pharmaceutical services?

Response	Yes	No	Don't know
Number	381	41	87
%	74.85	8.06	17.09



Total responses: 509
Skipped: 98

■ Yes ■ No ■ Don't know

Comments

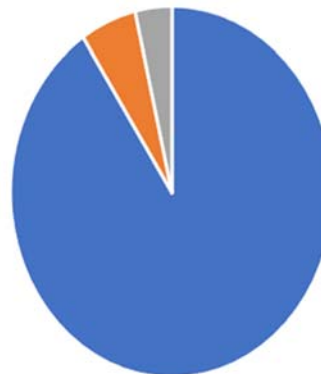
Absolutely. As previously stated, we have absolutely no services here, which is really outrageous. This pharmacy will be such a valuable addition to the area, and be beneficial for the entire community.

The dynamics of healthcare provision have changed due to COVID. A new pharmacy would significantly enhance the current offering.

A comprehensive pharmaceutical service would be well utilised

Question 6: Do you think the proposed hours are appropriate?

Response	Yes	No	Don't know
Number	459	29	19
%	90.53	5.72	3.75



Total responses: 507
Skipped: 100

■ Yes ■ No ■ Don't know

Comments

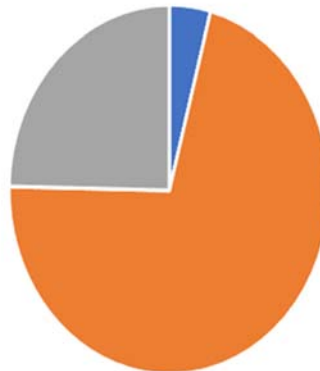
Excellent, especially the weekend opening and late night.

Sunday opening would help the wider community as a Sunday pharmacy is a rare thing that would help take pressure off gp/out of hours service.

The 8.30 am times are beneficial in that minor ailment medication could be obtained for children going in to school etc. Also closing times allow people to access after work, all in all suitable times.

Question 7: If this proposal is successful do you think that there would be any gaps or deficiencies in the pharmaceutical services provided?

Response	Yes	No	Don't know
Number	21	361	125
%	4.14	71.2	24.65



Total responses: 507
Skipped: 100

■ Yes ■ No ■ Don't know

Comments

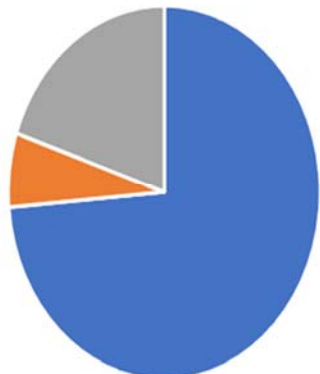
Every thing anyone needs would be available at a close proximity to the village.

The gap currently is pharmaceutical provision. It would only be if the application were unsuccessful, that there would be gaps.

It's a great start, Ferniegair again has no NHS services at all. A pharmacy is a great start and I would hope to see more to follow such as clinics or a GP surgery.

Question 8: In your opinion would the proposed application help other healthcare providers to work more closely together-eg GP's, community nursing, other pharmacies, dentists, optometrists and social services?

Response	Yes	No	Don't know
Number	364	32	98
%	73.68	6.48	19.84



Total responses: 494
Skipped: 113

■ Yes ■ No ■ Don't know

Comments

The pharmacy can advertise other health/NHS services. Can point to direct service and nearest support taking pressure off people phoning GP or going to A and E if advice close by.

Absolutely! Locally provided service assists with ease of access for both residents and providers of all healthcare services within the area. Joint working across all services has long been the preferred outcome for all involved but is known to be difficult to achieve. Having a local pharmacy might just provide a platform/space for the development and provision of subsequent complimentary health services in true joined up working. I can only hope that the planning to future proof this proposal is being considered.

Good to have a range of other support services for the area, which could lead to less reliance on GP services

Question 9: Do you believe this proposal would have any impact on other NHS services? Eg GP’s community nursing, other pharmacies, dentists, optometrists and social services

Response	Yes	No	Don't know
Number	157	194	143
%	31.78	39.27	28.95



Total responses: 494
Skipped: 113

■ Yes ■ No ■ Don't know

Comments

Could take pressure off GP and acute services as the pharmacy could be used as the first port of call for advice.

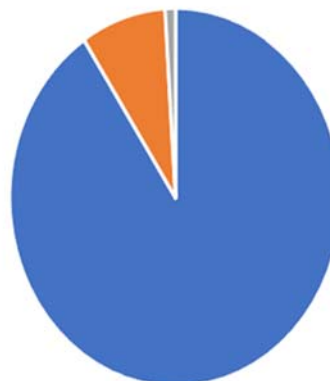
This pharmacy would supplement and support these services.

It would impact in a positive way , especially having minor ailments service as this would remove traffic to the local GPs.

We requested to change the wording to question 9 because we felt that people could answer it in either a positive way or a negative way depending on how they looked at it. We think that the answers to this reflect that people don't really know how they are supposed to answer. However, when we looked at the comments received we feel that a lot of them have responded from a positive perspective as listed.

Question 10: Do you support the proposal to open a new pharmacy at unit3, Allanton Gardens, Ferniegair. ML37GQ

Response	Yes	No	Don't know
Number	449	41	5
%	90.71	8.28	1.01



Total responses: 495
Skipped: 112

■ Yes ■ No ■ Don't know

Comments

As a local councillor for the area I have been in contact with very many constituents who have been asking for more services within the village.

I think this is a needed service and would bring us into line with other similarly populated villages eg Law village which is served by a pharmacy.

This will benefit a vastly increasing population in the area, and also reduce the pressures on the other pharmacies out with the boundary, who are getting more prone to delays and errors. The continued situation with Covid which is for the foreseeable future will only add to pharmacy demands, so this will help not just the people in Ferniegair, but also the people of Hamilton and Larkhall, again two areas which can become unreachable when motorway accidents occur, or when winter comes.

- 4.53. The responses and the comments from the CAR clearly demonstrate that pharmaceutical services in and to Ferniegair are not currently adequate. There are no existing services in the area and almost 75% of respondents think that the pharmacy needs to open for people in the neighbourhood to have adequate pharmaceutical services.
- 4.54. Almost 97% of respondents think that the location is accessible, and over 90% agree with the proposed opening hours. Almost 91% of respondents support the proposal to open a new pharmacy.
- 4.55. We think that the results from the CAR speak for themselves, and that along with the rest of our presentation and the questions that we are about to ask, and answer will demonstrate to the PPC that a pharmacy in Ferniegair is both necessary and desirable.
- 4.56. This concluded the Applicant's presentation.

5. INTERESTED PARTIES' QUESTIONS TO APPLICANT

5.1. Mr Noel Wicks of WEB Pharmacy Ltd was invited to question the Applicant.

5.1.1. Mr Wicks commented that he found it interesting that a third of respondents thought that the current services were adequate.

5.1.2. Mrs Stitt responded that a third also said "I don't know" perhaps indicating that they did not understand the question.

5.1.3. Mr Wicks then asked Mrs Stitt if she knew why so many visitors travelled into the village, with such a high transient population.

5.1.4. Mrs Stitt advised that Chaterherault Country Park attracted a number of visitors for leisure purposes.

5.1.5. Mr Wicks then asked Mrs Stitt for more details on their proposed opening times.

5.1.6. Mrs Stitt claimed that the community wanted those hours from a local pharmacy, as both she and Mrs Bankier had visited the village to hand out flyers in the community to get a flavour of what people wanted. They found that the community wanted a local independent pharmacy as opposed to another multiple like Boots UK Ltd or Lloyds Pharmacy Ltd.

5.1.7. Mr Wicks had no further questions.

5.2. **Having ascertained that Mr Wicks had no further questions, the Chair invited questions from Mr Tom Arnott, Lloyds Pharmacy Ltd to the Applicant.**

- 5.2.1.** Mr Arnott asked Mrs Stitt if she was aware that all existing pharmacies provided all core services, and if she was then why did they consider the current level of pharmaceutical services to be inadequate.
- 5.2.2.** Mrs Stitt replied that whilst they were aware that they provided all core services comments in the CAR suggested that respondents did not find them adequate enough.
- 5.2.3.** Mr Arnott then asked Mrs Stitt if they agreed that Ferniegair should be considered an affluent area, given the Scottish Index Multiple Deprivation datasets for the village.
- 5.2.4.** Mrs Stitt proffered that it was mainly middle-income families who lived in the area and that regardless this should not be a barrier for them being able to access healthcare services locally.
- 5.2.5.** Mr Arnott asked what had prompted only four medical practices out of nine to provide letters of support. He also asked that if they had considered asking the local Councillor along to the PPC hearing to lend support to their application.
- 5.2.6.** Mrs Stitt said that they had spoken to all the practice managers via telephone and some had advised that they would need to speak to the GPs first to ask if it was ok to write a supporting letter. Some responded and some did not, they did not pursue it with those that did not write but that they can confirm that all the practice managers were supportive of the proposal whilst speaking with them. With regards to the local Councillor Mrs Stitt advised that they did not approach them to ask nor had she ever been to a PPC hearing where this had happened.
- 5.2.7.** Mr Arnott referred to the pharmacy closure information received via their Freedom of Information request, and asked Mrs Stitt how many of the closures related to the areas of Hamilton and Larkhall.
- 5.2.8.** When Mrs Stitt advised that she was not aware of exact numbers Mr Arnott advised that there were only five closures in either town. This prompted Mrs Stitt to suggest that the pharmacies in those areas were being kept open given the pending application for a neighbouring area.
- 5.2.9.** Mr Arnott asked whether Mrs Stitt agreed that there was a critical shortage of pharmacists, to the point that Community Pharmacy Scotland had asked NHS boards to stop recruiting pharmacists.
- 5.2.10.** Mrs Stitt did not agree that there was a shortage, and was not aware of the detail around Community Pharmacy Scotland's request.
- 5.2.11.** Mr Arnott then asked how many people they thought would access their pharmacy from a transient population.

- 5.2.12.** Mrs Stitt did not have any figures to quote however gave an anecdotal example of a visitor to the area having to visit A&E department of a local hospital due to having no healthcare services within the village.
- 5.2.13.** Mr Arnott stated that from the CAR only 36% of respondents said that services were inadequate.
- 5.2.14.** Mrs Stitt agreed with this fact, but also highlighted how a lot of people did not answer that question at all, suggesting that they may not have understood the question. Also, that 74% of respondents thought a proposed pharmacy needed to open.
- 5.2.15.** Mr Arnott asked how many of the respondents live in the neighbourhood.
- Mrs Stitt advised that they wanted this question in the joint consultation survey but that NHS Lanarkshire would not allow it because people from outside the neighbourhood may want to access services within the village and should not be precluded from responding to the survey, or have their views dismissed. However, both Further, that both Mrs Stitt and Mrs Bankier did leaflet drop people in the village.
- 5.2.16.** Mr Arnott brought up the letter from Monica Lennon, MSP dated 9 August and asked if this was provided at request through contact by Mrs Stitt or Mrs Bankier.
- 5.2.17.** Mrs Stitt explained that they first had asked to meet with Monica Lennon MSP but she was already aware of the proposed application.
- 5.2.18.** Mr Arnott asked for clarification about their interpretation of the volume of services provided from the existing four pharmacies to the population of Larkhall, in so doing contesting that busier pharmacies would have higher staffing levels to meet that need.
- 5.2.19.** Mrs Stitt explained that they had taken the population figure from the 2011 census and using the number of items dispensed by each pharmacy divided by 4 (being the number of pharmacies) and compared it with national average dispensing figures demonstrating that Larkhall was 2000 more. Mrs Stitt commented that they considered the existing pharmacies to be very busy and and that they did not think that staffing levels in them was found to be sufficient.
- 5.2.20.** Mr Arnott reported that the average dispensing level in Scotland was 4,500 residents per pharmacy.
- 5.2.21.** Mr Arnott asked if the community would support a hot food shop over a pharmacy.

- 5.2.22.** Mrs Stitt said that there is no hot food licence for that unit and the reason for that is because of the neighbouring houses, to prevent smells etc thus they opine that residents living close by would not support it.
- 5.2.23.** Mr Arnott completed his questioning by noting that the proposed pharmacy opening times would be very expensive being open for 60 hours a week will cost almost £100,000 per week in pharmacist cover, which is a lot of money and that he doubted the viability. Mr Arnott asked if they agreed with this cost and the financial commitment.
- 5.2.24.** Mrs Stitt asserted that she and Mrs Bankier did not believe that it would cost as much as that and that they were in a position whereby they would be working some of those hours between them therefore reducing costs, as well as having a family member who is a pharmacist who will also provide cover.
- 5.3. Having ascertained that Mr Arnott had no further questions, the Chair invited questions from Mr Scott Jamieson, Boots UK Ltd to the Applicant.**
- 5.3.1.** Mr Jamieson wished to return to discussion about the workforce crisis and questioned why they do not believe that there is one, especially given that NHS Lanarkshire has granted permission for a consolidation of pharmacy opening times.
- 5.3.2.** Mrs Stitt explained their pharmacies never have any trouble getting local cover and never close due to pharmacy staffing issues. She emphasised how there are enough pharmacists out there and quoted Pharmacists Defence Association (PDA) who have stated that they do not believe that there is a shortage of pharmacists, rather that it is pay and working conditions in some pharmacies that deter pharmacists from wanting to work with them. Mrs Stitt advised that they believe that the vast majority of independent pharmacies would probably say they do not have trouble getting cover.
- 5.3.3.** Mr Jamieson asked Mrs Stitt to talk through what happens in primary care which has led to the shortage of pharmacists available to work in community pharmacy.
- 5.3.4.** Mrs Stitt explained that the Scottish Government has said they will provide pharmacist cover to each GP surgery. Many pharmacists from community and the acute sectors have gone to work in primary care and that this has been happening for a number of years, nothing different has happened otherwise than an explosion in closure request.
- 5.3.5.** Mr Jamieson asked why a commercial business providing essential services would choose not to open.
- 5.3.6.** Mrs Stitt claimed that the majority of multiples have deployed their pharmacists into other roles rather than patient facing which could prevent closures, she ventured that multiples are choosing which of their pharmacies to close as a way of influencing change in the regulations, and that it is not happening

across all health boards, only four out of fourteen Scottish boards have deployed the consolidation action. She added again that if the multiples reviewed their pay and working conditions then pharmacists would be more willing to work for them over other pharmacies.

- 5.3.7.** Mr Jamieson asked Mrs Stitt what they thought of what has happened to the pharmacist locum rate in past few months.
- 5.3.8.** Mrs Stitt responded that it has been very low for many years and needed to increase.
- 5.3.9.** Mr Jamieson stated that he pays £40 an hour and asked if they considered that pharmacists attracting this rate are choosing not to work full time.
- 5.3.10.** Mrs Stitt responded that some pharmacists continue to work full time.
- 5.3.11.** Mr Jamieson highlighted that their proposed hours and days of opening would rely heavily on locum and holiday cover being available.
- 5.3.12.** Mrs Stitt stated that they both think that it is manageable to work late at night and Sundays. Mrs Stitt and Mrs Bankier have job shared in their New Stevenston pharmacy for the last 18 years. When they acquired the Cleland pharmacy 5 years ago, they initially both went into work, and then eventually employed a pharmacist as a manager. They are now proposing this same model for this new pharmacy. Mrs Stitt advised that her daughter is also a pharmacist and would be available to help.
- 5.3.13.** Mr Jamieson asked about the need for Sunday cover and queried where residents would access healthcare at the moment on Sundays.
- 5.3.14.** Mrs Stitt replied that many residents do not know, according to a local Facebook group where many people have asked this question. These Facebook posters tend to get directed to the Boots at the retail park, but that store does not have a contract it is only a Boots store, the Boots Pharmacy is located in The Regent Centre, further that Mrs Stitt had actually visited it one Sunday and found it to be closed.
- 5.3.15.** Mr Jamieson cited data from the 2011 Census, highlighting that 84% of households in Ferniegair have access to a private vehicle and 39% of households have access to two or more vehicles, which is significantly higher than the national average (for the whole of Scotland, 69.5% have access to a vehicle and 27% have access to two or more vehicles).
- 5.3.16.** Mrs Stitt retorted that that data does not say how many adults in that household can drive, which not everyone does all the time.
- 5.3.17.** Mr Jamieson asked about other forms of transport in the neighbourhood.
- 5.3.18.** Mrs Stitt explained that there are bus and train services, but that these were greatly reduced during the pandemic.

- 5.3.19.** Mr Jamieson asked where the transient population access pharmacy services now.
- 5.3.20.** Mrs Stitt responded that they would access them where they live, and that the CAR demonstrated that a high percentage of respondents indicated that that a pharmacy in the neighbourhood would improve the current inadequacy of access to services.
- 5.3.21.** Mr Jamieson final question was to ask what evidence Mrs Stitt and Mrs Bankier had that current pharmacy services were inadequate.
- 5.3.22.** Mrs Stitt answered that the CAR with the high percentage of respondents and also the comments prove inadequacy and their presentation and the questions she will be asking would also prove inadequacy.

6. COMMITTEE QUESTIONS TO APPLICANT

Having ascertained that Mr Jamieson had no further questions, members of The Committee was invited to ask questions in turn of the Applicant.

6.1. Questions from Mr Kenneth MacKenzie to the Applicant.

- 6.1.1.** Mr MacKenzie asked Mrs Stitt if she was aware of the reasons behind the Larkhall rota being stopped.
- 6.1.2.** Mrs Stitt replied that the rota pharmacy had to open for one hour on a Sunday and that she thought that it stopped as the pharmacies felt that there was no requirement for it.
- 6.1.3.** Mr MacKenzie asked if they had approached the four surgeries who sent letters of support or if they had sent letters unsolicited.
- 6.1.4.** Mrs Stitt stated that they had approached all of the medical practices, some were aware of the application and some not. Some of the practice managers stated that they did not want show bias towards any particular pharmacy but that they thought their application was a very good idea.
- 6.1.5.** Mr MacKenzie enquired if the applicants had approached the Councillor and MSP or if they had actively contacted the applicants. Mrs Stitt replied that they had approached them both.
- 6.1.6.** Mr MacKenzie asked how many items they thought were needed to make the pharmacy viable.
- 6.1.7.** Mrs Stitt replied that they had formulated a business plan. She admitted that they had been conservative in their estimates; to get to 3000 items per month in the first year should ensure viability and that by the end of the second year they would begin to make a profit.

- 6.1.8.** Mr MacKenzie asked about the size of the proposed pharmacy unit.
- 6.1.9.** Mrs Stitt explained that the pharmacy in New Stevenson is about the same size as the proposed unit, and that the one in Cleland is about 40m². The developer offered them a choice of units and they opted for Unit 3 despite it being more expensive as they wished to have sufficient space.
- 6.1.10.** Mr MacKenzie had no further questions.
- 6.2. Questions from Mr Arif Hanif to the Applicant**
- 6.2.1.** Mr Hanif asked if they considered that Covid has affected the closures rate
- 6.2.2.** Mrs Stitt responded that all pharmacies managed to stay open during the pandemic.
- 6.2.3.** Mr Hanif asked about the bus services from within the village to other areas passing through Hamilton and Larkhall.
- 6.2.4.** Mrs Stitt explained that there are bus services every 30 minutes from various companies.
- 6.2.5.** Mr Hanif referred to their business plan and their estimate of 3000 items asking where he thought that the prescriptions would come from.
- 6.2.6.** Mrs Stitt asserted that whilst they do not have a split, they anticipate that they will be from all over Larkhall and Hamilton and will not make a difference on the overall business. Mrs Stitt also stated that one Hamilton pharmacy does not dispense over 3000 items a month and they are viable.
- 6.2.7.** Mr Hanif asked if they would provide an independent prescribing pharmacist service.
- 6.2.8.** Mrs Stitt explained that whilst they were not independent prescribing pharmacists they have a couple of pharmacist staff who are currently undertaking the training and that they are also looking to recruit one.
- 6.2.9.** Mr Hanif had no further questions.
- 6.3. Questions from Mr Woods to the Applicant**
- 6.3.1.** Mr Woods asked if the Applicant was aware that the Committee would take into account the pharmaceutical services in to the neighbourhood from pharmacies outwith the neighbourhood, when deciding the adequacy of the existing service.
- 6.3.2.** Mrs Stitt stated that they were aware of this.

MINUTE: PPC/2022/02

- 6.3.3.** Mr Woods asked the Applicant if they were aware that any perceived inadequacy of existing services should not be confused with convenience and queried the hours of opening of their existing pharmacies and if these pharmacies opened on a Sunday.
- 6.3.4.** Mrs Stitt said that their opening hours were based on the existing hours of the pharmacies when they acquired them. Whilst they had looked to review on numerous occasions e.g. keeping open on Wednesday afternoons, to see if any extra business came in it did not. They therefore deduced that people in the local areas did not expect it so there was no demand, and that this also applies to why they do not open on Sundays except by special request.
- 6.3.5.** This led Mr Woods to ask why they had then decided that Ferniegair would need a Sunday service.
- 6.3.6.** Mrs Stitt replied that many people think a Sunday service would be a good thing and that they believe that both the local and transient population would use it.
- 6.3.7.** Mr Woods asked if they thought that a pharmacy being busy means that services must be inadequate.
- 6.3.8.** Mrs Stitt responded that no, it just means that they are doing a lot of dispensing and may not have sufficient time for other services.
- 6.3.9.** Mr Woods asked if Mrs Stitt knew when the 151 new homes in Clyde Terrace for which permission was granted on 29 March 2022 were likely to be built.
- 6.3.10.** Mrs Stitt replied that they anticipated this to be later in the year, but that they had not definitive date.
- 6.3.11.** Mr Woods asked if their proposed pharmacy would be open throughout lunchtime period.
- 6.3.12.** Mrs Stitt responded with yes, that they encourage their pharmacists to have lunch on the premises and are paid for this.
- 6.3.13.** Mr Woods asked Mrs Stitt's views on the statistical consideration of the CAR in general when people say "don't know" it is not very helpful, and that looking at Q3 if we discard the "don't knows" it leaves the figures at 50/50 for respondents views on the adequacy of existing services being provided in and to the neighbourhood.
- 6.3.14.** Mrs Stitt responded that the question is asked another way looking at Q5: 75% say yes which is the same question asked another way. To which Mr Woods

responded that the question mark in Q3 also puts a question mark over Q5 but that is for the Committee to decide on adequacy.

6.3.15. Mr Woods had no further questions.

6.4. Questions from Mr Michael Fuller to the Applicant

6.4.1. Mr Fuller commented that before hearing their statement this morning he had wondered why they had made their neighbourhood boundary so tight. He now wishes to know what makes them think that the transient population will stop and use their pharmacy.

6.4.2. Mrs Stitt responded that the transient population is important to them, the road passing through the neighbourhood and village is busy and has access to the Clyde Valley. They think that people will use the pharmacy as they do the other shops beside the proposed unit.

6.4.3. Mr Fuller mentioned that on one of his visits he never stopped to use any of the shops when travelling by car and asked why they think that a lot of people will stop by to use them.

6.4.4. Mrs Stitt claimed that they believe that a lot of people will stop and use it. She added that she knew of someone in a local bike club who all stop in to use the coffee shop on the way home from a ride, and that he asked opinion from friends in the group who thought it would be useful.

6.4.5. Mr Fuller asked if they consider the transient population to be large enough to make the pharmacy viable.

6.4.6. Mrs Stitt answered that the pharmacy would be viable regardless with just the local population alone.

6.4.7. Mr Fuller contested that the features of Ferniegair are such that it is more of a residential development than an established community. Mr Fuller asked if this sort of clientele would appreciate a new pharmacy.

6.4.8. Mrs Stitt pointed out that there is also an old part to the village. She insisted that living in a new development house does not mean that the residents will not need the pharmacy, and that housing developments attract both young families and an elderly population who will need pharmacy services too.

6.4.9. Mr Fuller asked Mr Stitt what they thought of the claim that the residents are used to getting majority of their services in Hamilton or Larkhall, and that most are very mobile and have developed the habit of going elsewhere for what they need.

6.4.10. Mrs Stitt agreed with this but reiterated that there is still a need for pharmacy services locally. She added that many peoples' habits are likely to have changed, eg, many people do not go to the bank much anymore, and that they want sustainable lives and do not want to travel large distances to go to places. She

also stated that Mrs Bankier had said that the deli has been very busy and exceeded what level of business they thought they would do.

- 6.4.11.** Mr Fuller then asked if they have taken the absence of a medical practice into account and the tradition of getting prescriptions quickly after leaving the medical practice in terms of the usage of their pharmacy.
- 6.4.12.** Mrs Stitt stated that most people cannot access GP services in person as it is mostly by telephone, and that many pharmacies have opened without a medical practice located alongside or nearby.
- 6.4.13.** Mr Fuller asked if the pharmacy would generate enough income to sustain the cost of a workforce of a pharmacist, 2-3 assistants and a delivery driver, even on a semi-permanent basis.
- 6.4.14.** Mrs Stitt said yes it would and that initially they would have one assistant will do the driving until the business was more established.
- 6.4.15.** Mr Fuller was keen to learn why they were so confident that they could recruit staff when there has been much publicity about a national shortage of pharmacists.
- 6.4.16.** Mrs Stitt responded that, yes, they are confident. They have not actively sought to retain or recruit yet but have previous pre-registration pharmacists who still locum for them. There is also interest from potential staff and pharmacists via social media channels and when they were canvassing on the streets one pharmacist and two members of the public who currently work in pharmacies expressed an interest in working in the new pharmacy. They also know of pharmacists who live in Ferniegair so they are fully satisfied that staffing will not be an issue.
- 6.4.17.** Mr Fuller then asked about suppliers enquiring whether six suppliers were necessary or better than having access to two.
- 6.4.18.** Mrs Stitt confirmed that multiple suppliers try to get suitable alternatives if there is a national shortage of a particular item, and that they are part of a buying group where they can put information into a computer which decides where best to source supplies from.
- 6.4.19.** Mr Fuller highlighted that due to the requirements of the regulations there is very little freedom to manipulate or change the questions over which the potential applicant and the health board have to consult upon. This led Mr Fuller to refer to the dialogue over the apparent contradiction between questions 3 and 5. Mr Fuller also reinforced that the PPC need to look very hard at inadequacy, and asked Mrs Stitt to put forward one or two factors that they believed demonstrated inadequacy in the area.
- 6.4.20.** Mrs Stitt responded with reference to the transient and resident population who cannot access services locally as there are no pharmacy services at all in the neighbourhood. Further that due to the activity levels in the existing

pharmacies patients have to wait too long and also referred to their staffing issues.

6.4.21. On final questioning, Mr Fuller asked if they will be contributing towards education and affordable housing in the area referring to the Hamilton Advertiser article “Green Light for New Homes” submitted in their additional papers that said “The applicant will provide a financial contributions towards education and affordable housing at the Ferniegair site.”

6.4.22. Mrs Stitt replied no, it is the developers who are applying for the planning permission.

6.4.23. Mr Fuller had no further questions.

6.5. **Having heard the responses to the questions asked so far the Chair gave all Interested Parties and Committee members an opportunity to ask further questions of the Applicant. Having ascertained that there were no further questions for the Applicant, the Chair paused the hearing to allow all present to have a comfort break. She asked that everyone re-convene in ten minutes.**

7. THE INTERESTED PARTIES’ SUBMISSIONS.

The hearing restarted at 12:00 noon. The Chair invited Mr Noel Wicks to speak on behalf of WEB Pharmacy Ltd.

7.1. Mr Noel Wicks on behalf of WEB Pharmacy Ltd – made the following submission:

7.2. Mr Wicks began by explaining how he likes to think about the daily activities of a person who finds themselves in in Ferniegair. He stated that his definition of the neighbourhood is that it is part of the eastern side of Hamilton and part of the other smaller villages that circle around Hamilton.

7.2.1. The WEB pharmacy is located in Brandon Street, Hamilton, and relocated from one side of Brandon Street to the other to a former bank premises just over a year ago that has 450sqm over 2 floors. The new site allowed them to create a large dispensing area and they also installed 3 consultation rooms, 2 of which are currently operational as 2 pharmacists are on duty the vast majority of the time, one being an Independent Prescribing Pharmacist, and there is always one of them on site when open.

7.2.2. WEB Pharmacy offers a full range of core services. It has a delivery van covering all over Hamilton for free delivery, there are no limits to this. Mr Wicks is looking into Saturday deliveries to provide more flexibility for patients who perhaps aren’t in on weekdays. There are no waiting lists for any deliveries.

7.2.3. Part of the reason for moving to a larger premises was for space despite the cost involved in moving to a larger premises with larger overheads. One of the ways they were able to justify the move was that they recently won a contract

from a national chain of Nursing Homes so supply nursing homes outwith the Hamilton area from that pharmacy therefore around 2000 prescriptions are non-community patient related, they are nursing home specific.

- 7.2.4.** Taking this into account there will therefore be a rise in their prescribing figures and it may be some of Boots UK Ltd figures have dropped off because WEB have taken their business. Mr Wicks referred to the hub model used by Boots UK Ltd and assumed that some of their prescribing figures will also contain nursing home prescriptions.
- 7.2.5.** WEB struggled with the availability of pharmacists, especially during Covid where mandatory self-isolation has been required at little or no notice. That was a challenge and they noticed a reduction in the number of Pharmacists wanting to work full hours. They have not experienced any closures or reduction of services recently.
- 7.2.6.** Across the business, we feel the strains but because of the dual pharmacist set up but our pharmacy has been fine. The branch opens all day on a Saturday and didn't feel an impact from some of the other closures. Mr Wicks stated that Saturday is a fairly quiet day anyway so no extra staffing needed in order to open.
- 7.2.7.** Mr Wicks said looking at the datasets that he does not see how the Applicant calculates 3000 people in the neighbourhood. The applicant mentioned two datasets which they have combined and extrapolated some building hikes with average housing numbers to create a figure of 3000 but Mr Wicks asserted that the population of Ferniegair is more likely to be the 1000 – 1200 which is in one of the datasets.
- 7.2.8.** Mr Wicks believes that the southern part of the village lies in a different dataset which encapsulates an area called Quarter which looking on the internet has a population of 750 so the two datasets together make 2000, Mr Wicks is deducting 750 immediately due to the other large area in that 2nd dataset and will possibly add back in some future developments. He believes that his calculation brings the population closer to 1200-1300 now and maybe 1800 after the proposed house building is complete.
- 7.2.9.** In terms of those figures in relation to the liability of a pharmacy which intends to open 60 hours a week he finds that it's a complete mismatch. Mr Wicks believes that the anticipated 3800 scripts per month is aspirational within the neighbourhood.
- 7.2.10.** Mr Wicks accepts that the area has a great desire for convenience of local services but this is more an argument about convenience that anything else and that existing services provided through deliveries, online consultations are already adequate in the area.
- 7.2.11.** If patients in the area had to get to one of the other pharmacies, as we see they are a young, mobile population they have ample access with the park and ride at the train station and, although there are slight disruptions to rail services at the moment he believes this to be a short term issue.

7.2.12. Mr Wicks proffered that the residents tend to go outwith Ferniegair to access most other local services anyway and have a number of cars at their residence. Mr Wicks cannot see demonstrated that current service levels are inadequate given that there are 11 pharmacies in Hamilton and four in Larkhall. People in Ferniegair have a wide variety of choices, locations, ample parking, and even delivery services in order to access current pharmaceutical needs in terms of core services.

7.2.13. Therefore, on that basis Mr Wicks does not believe this application should be granted.

7.2.14. That concluded the representation by Mr Wicks.

7.3. The Chair invited questions from Mrs Stitt on behalf of the Applicant to Mr Wicks

7.3.1. Mrs Stitt said that if you Google Ferniegair, it has a Wikipedia page and asked if Mr Wicks agreed that Ferniegair was the neighbourhood of the proposed pharmacy and, if he accepted, that 93.57 % of respondents to the CAR also agreed with the neighbourhood so defined.

7.3.2. Mr Wicks said he does not know where those CAR respondents came from and that he did not know if the definition was clear.

7.3.3. Mrs Stitt explained that two data zones are 2701 and 2702, called Glassford, Quarter and Allanton and asked Mr Wicks if he was aware of two other data zones 2699 and 2700 also called Glassford, Quarter & Allanton.

7.3.4. Mr Wicks responded that he just looked to the map to see what fits their neighbourhood.

7.3.5. Mrs Stitt highlighted that there are no houses in the bottom end of data zones 2701, and that they have taken information provided by NHS Lanarkshire and added data zones 2701 and 2702 together, added the new builds completed in 2021 and the new houses that were due to be built and to get to the 3000.

7.3.6. Mr Wicks responded that he could not agree.

7.3.7. Mrs Stitt challenged the notion that this was an application of convenience. She asked Mr Wicks if he agreed that most comments related to a need for pharmaceutical services.

7.3.8. Mr Wicks responded no, from what he has heard and read he thinks that the comments are in respect of services in general, general comments about convenience for local services. This is not a necessarily a problem as all communities want that, but he had not picked upon a lot of themes stating that local pharmaceutical services were absolutely necessary.

- 7.3.9.** Mrs Stitt agreed that whilst some talked about convenience in their opinion the vast majority talked about a need for pharmaceutical services in Ferniegair, and asked Mr Wicks again if he was willing to agree.
- 7.3.10.** Mr Wicks stated that he could not agree.
- 7.3.11.** Mrs Stitt asked Mr Wicks his views on the unprecedented level of respondents to the joint consultation survey as evidenced within the CAR.
- 7.3.12.** Mr Wicks agreed that it was a high response albeit WEB Pharmacy Ltd had done a similar application in the past and had a slightly higher response rate with less work having only placed a notice in the window, a post on their Facebook page and newspaper advert, albeit it was a much bigger neighbourhood.
- 7.3.13.** Mrs Stitt asked Mr Wicks if he had managed to fill a vacancy that he has been recruiting for.
- 7.3.14.** Mr Wicks replied yes they had and that their former manager finished at the end of July and the new replacement manager was able to start the week before that for handover.
- 7.3.15.** Mrs Stitt asked why Mr Wicks has not completed the statutory complaints surveymonkey questionnaire on behalf of WEB Pharmacy Ltd as requested by the health board.
- 7.3.16.** When Mr Wicks mentioned that he thought he had noticed one complaint in relation to WEB Pharmacy, Mrs Stitt advised that she had approached NHS Lanarkshire and asked for information on complaints and was advised that there was a nil return for WEB Pharmacy.
- 7.3.17.** Mrs Stitt asked Mr Wicks where people require to park when using WEB Pharmacy.
- 7.3.18.** Mr Wicks identified parking at Hamilton Bus station, and train station car parks, city centre parking areas, and at the back of their pharmacy, he admitted that those were all metered parking however that customers can walk to park in a neighbouring street for free if they wish.
- 7.3.19.** Mrs Stitt asked Mr Wicks if he has noticed footfall to WEB Pharmacy reducing due to the number of commercial units failing.
- 7.3.20.** Mr Wicks replied no — that more people are asking for deliveries, and they are now returning to a hybrid model
- 7.3.21.** Mrs Stitt asked Mr Wicks how WEB Pharmacy decides who should get a delivery.
- 7.3.22.** Mr Wicks explained that as collection and delivery is not a core service there is no criteria to follow, but that they have no restrictions on who accesses this free service

- 7.3.23. Mrs Stitt asked Mr Wicks how Web Pharmacy would serve people in Ferniegair with Pharmacy First requests who are having transport issues.
- 7.3.24. Mr Wicks said they would speak with them by phone or offer video consultation.
- 7.3.25. Mrs Stitt wished to remain on the Pharmacy First service and advised that they had visited the pharmacies in Larkhall and Hamilton and requested aqueous calamine cream via Pharmacy First. Their experience was that Right Medicine were unable to provide this, no alternative was offered and the pharmacist was not consulted. She asked if this gave Mr Wicks cause for concern.
- 7.3.26. Mr Wicks thought it was difficult to answer: aqueous cream was not something that he would have recommended without seeing the patient and that as he had not been present he could not comment objectively.
- 7.3.27. Mrs Stitt stated that there are over 780,000 visitors to Chatlerhault Country Park covering all age groups and asked if Mr Wicks thought that the needs of this transient population were being met
- 7.3.28. Mr Wicks responded that his understanding of a transient population to be those who are coming in for a day's work not those who are there for a few hours or passing through so he did not think that there was a transient community requiring pharmaceutical services.
- 7.3.29. The Applicant had no further questions.
- 7.4. **Having ascertained that the Applicant had no further questions, the Chair invited questions from Mr Tom Arnott representing Lloyds Pharmacy Ltd, to Mr Wicks**
- 7.4.1. Mr Arnott asked if Mr Wicks agreed with the applicant's statement that there is no pharmacist shortage.
- 7.4.2. Mr Wicks does not agree — figures regarding primary care recruitment have been made public, hundreds of new posts have been created and larger numbers of students from Scottish universities are filling them. England has a similar amount of primary care vacancies filled. Annually we lose around 10% of our pharmacists to primary care positions, some of whom are now going to work in private care as they find it more lucrative or enjoyable than primary care work.
- 7.4.3. Mr Arnott mentioned the short supply of Hormone Replacement Therapy products.
- 7.4.4. Mr Wicks agreed that it is problematic, and that he is part of same buying group as the applicant.
- 7.4.5. Mr Arnott asked if Mr Wicks found that GPs were happy if asked to amend a prescription because the product is not available.

- 7.4.6. Mr Wicks thought patients were trying different pharmacies to source the item themselves. He thought that the multiple pharmacies would try to source a produce from other branches to fill the prescription. He thought that this was something that the pharmacists within the GP practices could perhaps lead on for mutual benefit of all concerned.
- 7.4.7. Mr Arnott asked Mr Wicks if WEB Pharmacy could maintain double pharmacist cover if they were losing a certain percentage of business.
- 7.4.8. Mr Wicks responded with no.
- 7.4.9. Mr Arnott asked Mr Wicks if collection and delivery was a core service.
- 7.4.10. Mr Wicks replied that it was not.
- 7.4.11. Mr Arnott asked Mr Wicks if in his opinion, looking at the population and demographics of Ferniegair, a pharmacy could open for 60 hours a week and be viable.
- 7.4.12. Mr Wicks replied that he did not think that it would be.
- 7.4.13. Mr Arnott had no further questions.
- 7.5. **The Chair then invited questions from Mr Scott Jamieson representing Boots UK Ltd to Mr Wicks**
- 7.5.1. Mr Jamieson asked if the Covid self-isolation requirements have had an impact on WEB Pharmacy Ltd workforce.
- 7.5.2. Mr Wicks replied that it had not, albeit that the last four months had been worse than earlier in the pandemic. He believes there has been little impact because WEB Pharmacy did a lot of good work at the start of the pandemic regarding infection protection control, but that the changes in testing etc and the last strain had brought its' challenges
- 7.5.3. Mr Jamieson had no further questions.
- 7.6. **Having ascertained that Mr Jamieson had no further questions, members of The Committee was invited to ask questions in turn of Mr Wicks. Mr Kenneth MacKenzie posed the following questions to Mr Wicks**
- 7.6.1. Mr MacKenzie asked Mr Wicks what his dispensing figures were without 2000 items for nursing home contract.
- 7.6.2. Mr Wicks responded that it depended on the nursing home cycle however they were around 5000 for Hamilton, then around 2000 more on top.
- 7.6.3. Mr MacKenzie queried whether or not an approximate 7% reduction in business would require Mr Wicks to look to reduce staffing levels.

7.6.4. Mr Wicks agreed that it was likely especially taking into account the increased overheads incurred through moving to the larger premises.

7.6.5. Mr MacKenzie had no further questions.

7.7. The Chair then invited questions from Mr Arif Hanif to Mr Wicks

7.7.1. Mr Hanif asked Mr Wicks if WEB Pharmacy's delivery service covered the village of Ferniegair

7.7.2. Mr Wicks replied that it did.

7.7.3. Mr Hanif asked Mr Wicks if he feels patients from Ferniegair collected their prescriptions from Right Medicine Pharmacy.

7.7.4. Mr Wicks advised that their patients were mixed due to their location being close to the train and bus stations so access was easy from outlying areas

7.7.5. Mr Hanif asked if both consulting rooms were on the ground floor and in use all day, everyday

7.7.6. Mr Wicks responded that they were on the ground floor and if the pharmacists needed or wanted to use them, they can do so and access any time as they are not used for any external services.

7.7.7. In final questioning Mr Harif brought up the fact that WEB Pharmacy Ltd and the applicant are in the same buying groups and asked if WEB Pharmacy's requests from GPs were for WEB Pharmacy patients or from other patients in Hamilton that cannot access their medication via their usual pharmacies.

7.7.8. Mr Wicks advised that it is both, and that they have good relationships with nearby independent pharmacies.

7.7.9. Mr Hanif had no further questions

7.8. The Chair then invited questions from Mr John Woods to Mr Wicks

7.8.1. Mr Woods asked Mr Wicks if WEB Pharmacy still experience stock shortages.

7.8.2. Mr Wicks replied that yes, shortages are rising, and stock issues have become a daily challenge.

7.8.3. Mr Woods noted that WEB Pharmacy has been accused of having an issue with dosette boxes and that discussions have touched upon staff shortages and long waiting times.

7.8.4. Mr Wicks responded that they have not experienced any such issues to a great extent and that their waiting time is on average 10-15 minutes, which they have not needed to extend.

- 7.8.5. Mr Woods asked if the nursing home contract is run from their Hamilton branch.
- 7.8.6. Mr Wicks responded yes, it runs as its own discrete entity and is linked to its own medication unit and is staffed separately.
- 7.8.7. Mr Woods asked Mr Wicks why WEB Pharmacy does not open on Sundays.
- 7.8.8. Mr Wicks explained that there is no demand from customers and that Saturdays already tended to be quiet and Sunday was not likely to be a profitable day.
- 7.8.9. Mr Woods asked Mr Wicks what a patient could do if they needed advice and could not get to a pharmacy.
- 7.8.10. Mr Wicks said that WEB Pharmacy would offer a phone consultation and can also send a pharmacist to the person's home if needed.
- 7.8.11. **Mr Woods had no further questions**
- 7.9. **The Chair then invited questions from Mr Michael Fuller to Mr Wicks**
- 7.9.1. Mr Fuller asked if Mr Wicks accepts the boundaries of the neighbourhood drawn up by the applicant.
- 7.9.2. Mr Wicks responded no, that they do not make sense to him. He would define the boundaries differently as you need to think about what the neighbourhood contains, and that there isn't much in Ferniegair to sustain the population which forces you to think about the wider community and include this in your definition. To do this for Ferniegair would see the boundaries move into Hamilton and/or Larkhall.
- 7.9.3. Mr Fuller asked if Mr Wicks accepted the applicant's figures that the population is expected to go up to 3000 with new 5-bedroom homes.
- 7.9.4. Mr Wicks wondered what other areas might be included in the second datazone external to Ferniegair.
- 7.9.5. Mr Fuller explained that datazone 2702 is 100% within the area, and 2701 tends to run out of the map and looks like green fields.
- 7.9.6. Mr Wicks was not sure if the yellow lines went around water.
- 7.9.7. Mr Fuller asked what the impact the proposed pharmacy would have on WEB Pharmacy business.
- 7.9.8. Mr Wicks claimed he would immediately lose more than 10% of business and that it would make some of his services unviable, as well as impact on staff.

- 7.9.9.** Mr Fuller asked, given the increase in housing development, whether WEB Pharmacy could cope with those extra patients.
- 7.9.10.** Mr Wicks said that they have invested in more staff and services and space and could easily do so.
- 7.9.11.** Mr Fuller noted how the applicants has produced four letters from medical practices who would support this proposed pharmacy. Mr Fuller asked why Mr Wicks might think these medical practices are unhappy with existing pharmacies, commenting that the increase in population and list size supported an increase in level of pharmaceutical services.
- 7.9.12.** Mr Wicks said he is not sure. Mr Wicks added that in their responses the medical practices may not appreciate the current difficulties being faced in community pharmacy e.g. problems with supply, adding that GPs do not always understand the nuances of the problems they have to deal with.
- 7.9.13.** Mr Fuller described how community pharmacy is best served when based on good relationships with local medical practices and that often the pharmacy is located nearby. For four out of nine practices to write that they would welcome an additional pharmacy to cope with waiting lists, Mr Fuller questioned if Mr Wicks thought that to be high.
- 7.9.14.** Mr Wicks responded that he does not have anything to compare it to so cannot say if it is high or otherwise, he suggested that some practices tend to favour or support an independent pharmacy over multiples however that is not specific to Hamilton.
- 7.9.15.** Mr Fuller noted how the CAR mentioned issues with manufacturing problems and asked Mr Wicks if that happens a lot in WEB Pharmacy.
- 7.9.16.** Mr Wicks explained that this is becoming an increasing problem in all pharmacies due to factory and Covid issues affecting supplies.
- 7.9.17.** Mr Fuller asked if Mr Wicks has a larger list of suppliers not being a pharmacy in a large multiple.
- 7.9.18.** Mr Wicks responded yes they have access to six suppliers the same buying group as the Applicant.
- 7.9.19.** This prompted Mr Fuller to ask why then if that was the case Mr Wicks and WEB Pharmacy also experienced supply issues.
- 7.9.20.** Mr Wicks said that it was hard to reach a conclusion with any degree of accuracy why it happens and whether they or say Boots UK Ltd experience it as they find that sometimes Boots may have supply and they don't as Boots may have bought more stock prior to other suppliers running out.
- 7.9.21.** Mr Fuller noted that that there was also a comment that some of the elderly residents have issues finding delivery slots from some of the existing pharmacies.

- 7.9.22. Mr Wicks said this he believes that this does not apply to WEB Pharmacy, and that they will always endeavour to deliver.
- 7.9.23. Mr Fuller's final questioning was in respect of viability, asking Mr Wicks if he saw any imminent reduction in either staff or services at WEB Pharmacy or in the future.
- 7.9.24. Mr Wicks replied that if this pharmacy contract were granted there would be an unknown impact which may affect them however if the number of existing pharmacies remain they will continue to provide services as they do currently.
- 7.10. **Having ascertained that there were no further questions to Mr Wicks from the applicant, interested parties or the Committee, the Chair then invited Mr Tom Arnott to make his representation on behalf of Lloyds Pharmacy Ltd. Mr Arnott read from a pre-prepared statement transposed below:**
8. **Mr Arnott thanked the Committee for the opportunity to speak today and made the following representation on behalf of Lloyds Pharmacy Ltd**
- 8.1. The Applicant's reason for making this application seems to be that the Pharmaceutical Services provided by current Contractors is inadequate only because there are no Pharmacy Premises in their definition of the neighbourhood
- 8.1.1. There are, as the Panel is aware numerous examples from Pharmacy Practices Committee (PPC) Hearings and numerous National Appeal Panel Hearings that adequate Pharmaceutical Services can be provided to a neighbourhood from Pharmacies situated out with that neighbourhood and this is the case in this in Ferniegair
- 8.1.2. Indeed the Committee will see from The Advice and Guidance for those attending, the PPC must consider what are the existing pharmaceutical services in the neighbourhood or in any adjoining neighbourhood.
- 8.1.3. There are numerous Existing Pharmacies situated in Hamilton and Larkhall which the residents of Ferniegair currently utilise, indeed there are 12 Pharmacies within 3 miles of the Applicants proposed site The Boots Pharmacy in Regent Way 2.2 miles from the Applicants proposed site is open 7 days
- 8.1.4. The Applicants proposed opening hours offer no more than those already available to the residents of Ferniegair through existing Pharmacies, The Opening Hours on the original Application appear to differ from those on the CAR
- 8.1.5. It was at this point that the Chair highlighted the need to consider the application with factual accuracy. All those present were advised that when printed the application form did not reflect the full hours of service being proposed, and that

the Chair and PPC members had been advised that the hours recorded on the electronic version of the application form were the same as those reflected and proposed in the CAR.

- 8.1.6.** Mr Arnott continued and highlighted that, should the application be granted, the Applicant at any time could reduce their proposed extended hours and that in his opinion the Applicant has simply stated these hours to add some substance to the Application. A Pharmacy opening almost 60 hours per week in this location, with the current demographics cannot be viable. Indeed, on visiting Ferniegair during the day I saw only 4 customers appear at the Co-Op supermarket in a 30 minute period.
- 8.1.7.** On visiting Ferniegair I could see no evidence of major housebuilding and therefore the population is likely to remain static for the foreseeable future indeed the Applicant has submitted evidence that in the next 5 to 6 years only 151 units will be built
- 8.1.8.** The population of Ferniegair is 1,049 which I have confirmed with South Lanarkshire Council. Information from the SIMD (Scottish Index of Multiple Deprivation) for Datazone S01027012 shows a population of 1,043 ranked 4,483 of the 6,976 Datazones in Scotland for income, it is ranked 4,800 and as regards Health 3,842, Ferniegair is not a deprived Area.
- 8.1.9.** I would also point out that the latest SIMD figures show that only 12.0% of the population of Ferniegair are aged over 65 years The Scottish Average is 18%, also many of the comments in the CAR state that any growth in population will generally be in the younger affluent age groups indeed there are only 37 residents aged between 60 and 64 years.
- 8.1.10.** On the Applicants application Datazone SO1012701 is included, in this datazone the ranking is 6,019. For income 6,787 and Health 5,955. And in this datazone only 15.7% of residents are aged 65 years and over. All this supports the fact that Ferniegair is generally young affluent and mobile.
- 8.1.11.** The following is taken from the NHS (Pharmaceutical Services) (Scotland) Regulations, as amended [sic]:
- Should the panel deem the existing service inadequate but also consider the applicant's business not likely to be viable, and therefore not securing adequate provision of pharmaceutical services, the Application should be refused
- 8.1.12.** Based on the demographics of Ferniegair I cannot see how a Pharmacy situated in Ferniegair could be viable
- 8.1.13.** Situated at the Applicant's proposed site there is a Co-Op Convenience Store and a small Café / Sandwich Shop called Nourish. It is obvious that on a regular basis the residents of Ferniegair are leaving the village to access services such as Supermarkets Banks and GPs as well as to access their place of work, and this is the same for Pharmacy Services

- 8.1.14.** Indeed Ferniegair does not have a Primary School
- 8.1.15.** The Panel must take account as to whether the granting of an Application would adversely impact on the security and sustainable provision of existing NHS primary medical and pharmaceutical services in the area concerned.
- 8.1.16.** All existing Pharmacies offer all Core Services and the Lloyds Pharmacies are fully engaged with Medicine Care Review, Pharmacy First and Acute Medication Scheme and although Collection and Delivery is not a Core Service this service is offered by all existing Pharmacies, and if a patient is genuinely housebound then a Pharmacy in Ferniegair would make no difference to their access to Pharmaceutical Services
- 8.1.17.** It is interesting to note with regard to Pharmacy First using information supplied by the Applicant that virtually all contractors are showing increased activity in both Pharmacy First Consultations and Dispensed items
- 8.1.18.** Convenience is not a reason for granting a pharmacy contract.
- 8.1.19.** This Application is all about Convenience not necessity.
- 8.1.20.** I must compliment the Applicant on the number of Responses to the Consultation Analysis Report although it is not clear from the CAR how many of the responders actually live within the neighbourhood (response page 27) Interestingly however only 193 (36.7%) of the respondents in response to Q3 With regard to the neighbourhood do you think that current Pharmaceutical Services being provided in and to the neighbourhood, said they were not adequate I also note there are no detailed responses to this question stating why they are inadequate
- 8.1.21.** There are also some really telling detailed responses such as and I quote You need to consider the Demographic of Ferniegair, now it is all young Professionals or medium Income families. Everyone has a vehicle, many households have two. The population by its affluence will be healthier and more active.
- 8.1.22.** I quote again (Q10 do you support the proposal to open a new Pharmacy) "My son who lives in Ferniegair brought this to my attention I am a recently retired GP from a Surgery in Hamilton for nearly 30 years. I am very familiar with the Area and in fact many Patients from Ferniegair were, and I believe still are registered at this Surgery. While I believe such a facility could be of use, do I think it is necessary? All I can say is that in all my time as a GP I never once heard a patient mention a need for a Pharmacy in Ferniegair. In my personal opinion there are areas of Hamilton in far greater need of better access to Pharmacy Services with greater Health Needs."
- 8.1.23.** Further quote: "From a personal perspective I don't see the demand given plenty of Pharmacies in Larkhall and Hamilton which are near GP Surgeries, the Co-Op provides sufficient small selection of painkillers, flu medicine etc. There is

limited retail outlets in the area and I would much rather have a service or shop, where there's a higher demand and I would actually use. I would love to support a family independently run business but I can't see myself using this at all. Judging on the fact the area is increasingly younger people and young families also I think if there was an older demographic who didn't drive then yes, but 6 minutes or so to a pharmacy as it is, the Co-Op and Nourish do ok by the looks of it but I've never found either really busy so I can't see passing trade coming to this Pharmacy much either."

- 8.1.24.** Further quote: "While many might say it would be handy or convenient to have a new pharmacy it is absolutely not necessary. Ferniegair is a very affluent small village with no schools, high car ownership and which until recently didn't even have a shop of any kind. There are also excellent transport links with a train and numerous buses to and from Larkhall and Hamilton Also many of the pharmacies are close by and also deliver."
- 8.1.25.** The Shop Unit itself has lain empty since it was built and I believe this to be an opportunistic application and not one of any real need I would have real concerns about its viability especially with the extended hours they are proposing. This is a small village not a bustling town.
- 8.1.26.** Up until Thursday 11 August the applicant had not provided Letters of support from Councillor's MSPs or MPs this is highly unusual. The Consultation process ended on 02 February suddenly however a letter of support dated 08 August 2022 has appeared and I can only assume in a last ditch attempt to add some substance to the application the applicant has contacted Monica Lennon and asked for a letter. I have attended only one PPC hearing where a letter of support from a MSP has not been. It would not be in their political interest not to support a pharmacy application
- 8.1.27.** Coincidentally also on 08 August an email from one on the GPs at Gallowhill practice has appeared. Yet again is this another example of the applicant scrambling to add some substance to her application. In this letter he states patients are having to travel to collect medication, perhaps he is unaware that all contractors offer a delivery service which is free.
- 8.1.28.** On 02 August an email was received from Hamilton West Medical Practice, in this email it states a need for an independent chemist as they would be able to access medication where there are manufacturing issues. The panel will know that when a manufacturer is out of stock it doesn't matter if you are independent or a multiple out of stock means out of stock.
- 8.1.29.** Another letter which I only saw on Thursday last week which was dated 23 May – I can't understand why it has only been produced 2 days ago, is from the Avon Medical Centre in which they also mention an independent pharmacy to sort out manufacturing and out of stock issues. Yet again if a manufacturer is out of stock no one can supply it.
- 8.1.30.** Another email coincidentally dated 23 May from Douglas Street Surgery talks of the elderly being able to walk a short distance to the pharmacy. From my visit a large number of residents would have a lengthy walk up a steep incline.

- 8.1.31.** Also last Thursday a list of pharmacy closures was produced. When I first saw this I was a bit taken aback. There are 263 closures listed however when I examined the data provided there were only 5 closures that affected Hamilton or Larkhall and not all were full day closures. This list goes back to 23 March 2021.
- 8.1.32.** Also last Thursday the applicant has provided further details on the 151 homes to be built over the next 5 years. Interestingly the developers have stated and I quote “There will be 386 parking spaces in the development with 2 being provided for 3 bedroom homes and 3 for the 4 bedroom properties.” I have mentioned mobility and affluence before and I think this statement fully supports the evidence that Ferniegair is for the most part young, healthy, mobile and affluent and will continue to be populated by residents who are generally young, healthy, mobile and affluent and are capable of accessing service including pharmaceutical services outwith their neighbourhood. Indeed many have chosen to live in Ferniegair in the knowledge that there are many services which necessitates them leaving the neighbourhood to access them.
- 8.1.33.** The Applicant has not provided letters of support from Councillor’s MSP s or MPs this is highly unusual.
- 8.1.34.** The residents of Ferniegair on a regular basis travel outwith the neighbourhood to meet their daily needs and access services including Pharmacy Services
- 8.1.35.** This Application is all about Convenience not Adequacy or need
- 8.1.36.** Convenience is not a reason for granting a pharmacy contract.
- 8.1.37.** There is at this time a critical shortage of Community Pharmacists and Pharmacy Staff Pharmacists are now on the Governments list of Professions where there are shortages and recruitment issues. Recently Community Pharmacy Scotland have requested that Health Boards stop recruiting Pharmacists and Technicians from Community Pharmacy, over the past 3 to 4 years almost 600 Pharmacists and 300 Pharmacy Technicians have been recruited in to General Practice.
- 8.1.38.** The granting of this unnecessary Contract would only exacerbate this shortage
- 8.1.39.** The Panel must consider “What are the existing pharmaceutical services in the neighbourhood or in any adjoining neighbourhood”
- 8.1.40.** Having examined the NHS Lanarkshire Pharmaceutical Care Services Plan I can see no reference to there being a need for a Pharmacy in the Applicant’s proposed neighbourhood
- 8.1.41.** I am unaware of any complaints to the Health Board regarding existing service provision
- 8.1.42.** This Application is all about convenience as current services are adequate

- 8.1.43.** Should the panel deem the existing service inadequate but also consider the Applicant's business not likely to be viable, and therefore not securing adequate provision of pharmaceutical services, the Application should be refused
- 8.1.44.** I would therefore ask the Panel to refuse this application as it is neither necessary nor desirable in order to secure the adequate provision of Pharmaceutical Services in the neighbourhood in which the premises are located
- 8.1.45.** That concluded the representation by Mr Arnott

8.2. The Chair invited Questions from the Applicant to Mr Arnott

8.2.1. The Applicant asked Mr Arnott the following questions

- 8.2.2.** Mrs Stitt disagreed with Mr Arnott's understanding of the population within the proposed neighbourhood and queried whether he had misinterpreted the data zones and also not taken the new housing population into account.
- 8.2.3.** Mr Arnott stated that he was comfortable with his assessment, disagreed with their population figures as he could not see how they reached the figure of 3000.
- 8.2.4.** Mrs Stitt reinforced her view on the population figures from 2020, updated figures in the data zone information which she believed Mr Arnott had failed to recognise, alongside the additional resident population through the new build housing development.
- 8.2.5.** Mr Arnott replied that he continued to disagree with Mrs Stitt's figures.
- 8.2.6.** The Chair indicated that this stage of the hearing was to allow Mrs Stitt to pose questions and Mr Arnott to answer them. The Chair then requested that Mrs Stitt restrict herself to posing questions.
- 8.2.7.** Mrs Stitt then asked Mr Arnott to clarify the figures relating to data zone 2702.
- 8.2.8.** The Chair clarified that neither Mr Arnott nor Mrs Stitt accepted the other party's population figures.
- 8.2.9.** Mrs Stitt accepted that she had produced their additional supporting information less than two weeks prior to today's hearing, but questioned Mr Arnott if it was necessary to get information for two weeks before the date of hearing.
- 8.2.10.** Mr Arnott replied that it depends — he only received it on Thursday last week and that it was lucky he was not on holiday and had time to look through it in depth, but some other interested parties may not have.
- 8.2.11.** Mrs Stitt asked if Mr Arnott considered that the young demographic should not have access to a pharmacy.

- 8.2.12.** Mr Arnott responded that of course they should.
- 8.2.13.** Mrs Stitt referred in her presentation to their existing pharmacies both being open on bank holidays in the first lockdown and asked why Lloyds or Web pharmacies did not open on those days.
- 8.2.14.** Mr Arnott replied that he had no idea — that if it was part of their contract they had to open, then they would have.
- 8.2.15.** Mrs Stitt claimed that it was a request from the Scottish Government and NHS Lanarkshire to open.
- 8.2.16.** Mr Arnott asked Mrs Stitt how this information was relevant.
- 8.2.17.** Mrs Stitt responded that they were encouraged to stay open by the government.
- 8.2.18.** Mrs Stitt claimed that it was down to a cost cutting exercise undertaken by Lloyds Pharmacy Ltd around 2021-2022.
- 8.2.19.** Mr Arnott responded this is not true and that Lloyds Pharmacy Ltd did a staffing review based on levels of business, which other companies do too. Mr Arnott added that some pharmacies actually received an increase in staff.
- 8.2.20.** Mrs Stitt queried this given that 190 branches closed or were in the process of closing.
- 8.2.21.** Mr Arnott responded that this was not a result of the recent review and was historical action.
- 8.2.22.** The Chair asked Mrs Stitt to indicate how this line of questioning was relevant to the application.
- 8.2.23.** Mrs Stitt claimed that Lloyds Pharmacy Ltd tend to not have a lot of staff, so things take much longer to do.
- 8.2.24.** Mr Arnott explained that he has worked with Lloyds Pharmacy Ltd 20 years as a manager and 20 years in McColl's, where reviews were normal.
- 8.2.25.** Mrs Stitt then asked about reports of staff redundancies.
- 8.2.26.** Mr Arnott replied that he has absolutely no idea about personal circumstances of others and that he could not answer as he does not know individual situations.
- 8.2.27.** Mrs Stitt brought up statutory closures and how 20 pharmacies have applied to close on Saturdays. Mrs Stitt asked why Lloyds Pharmacy Ltd closes some branches on Saturdays.

- 8.2.28.** Mr Arnott said that Lloyds Pharmacy Ltd received an offer to discuss the opportunity for consolidation of pharmaceutical services by the health board and accepted this in order to divert staff to the busiest branches on Saturdays.
- 8.2.29.** Mrs Stitt asked why independent pharmacies could get sufficient Pharmacist cover and that the multiple pharmacies could not.
- 8.2.30.** Mr Arnott suggested that one possible answer is that the pharmacist cover in the independent pharmacies is provided by the owners themselves.
- 8.2.31.** Mrs Stitt asked if cost is the major contributing factor.
- 8.2.32.** Mr Arnott replied no, and that they doing whatever it takes to keep their pharmacies open and where locums are available they meet their exorbitant rates if needed.
- 8.2.33.** Mrs Stitt asked whether their contract application had affected which branches Lloyds Pharmacy Ltd had chosen to keep open.
- 8.2.34.** Mr Arnott said it is nothing to do with that and described his experience managing Lloyds Pharmacies in NHS Lothian and NHS Fife board areas. That he had no issue getting pharmacist cover in Lothian, but that Fife was a “black spot”. He then stated that he does not understand the point that Mrs Stitt making.
- 8.2.35.** Mrs Stitt said she is questioning why pharmacies are closing on Saturdays if they do not need to be.
- 8.2.36.** Mr Arnott responded that the PDA need to look at places like NHS Fife and NHS Highlands and assess the shortage of pharmacies.
- 8.2.37.** Mrs Stitt asked if Lloyds Pharmacy Ltd charge for deliveries.
- 8.2.38.** Mr Arnott said they do not — if patients are housebound they will definitely get a delivery, but that Lloyds Pharmacy Ltd do try to discourage people not to avail themselves of the service if they do not require it.
- 8.2.39.** Mrs Stitt asked if same day delivery could be guaranteed for antibiotics and urgent medication.
- 8.2.40.** Mr Arnott stated that for an urgent request from a GP as a last resort they would put a member of staff in a taxi to deliver, and that they have always done this.
- 8.2.41.** Mrs Stitt stated she has made two Freedom of Information requests regarding pharmacy closures and asked Mr Arnott if he’d reviewed the information provided and noted that in a 12 months’ time period, 56 closures were made in NHS Lanarkshire, and 16 of them involved Lloyds Pharmacies.

- 8.2.42.** Mr Arnott explained their procedure for the rota team to contact the respective Health Board to report any closures.
- 8.2.43.** Mrs Stitt asked why in March to September 2021, there were no closures reported in this time.
- 8.2.44.** Mr Arnott questioned whether to answer this as he failed to see the relevance to consideration of the application.
- 8.2.45.** The Chair stated her concern that the conversation is going off topic again.
- 8.2.46.** Mrs Stitt clarified the point she was making is that a lot of pharmacy closures are not reported, and she is concerned that it is because their application had been submitted
- 8.2.47.** Mr Arnott asked if Mrs Stitt is accusing Lloyds Pharmacy Ltd of deliberately not reporting pharmacy closures.
- 8.2.48.** Mrs Stitt responded that she is coming to that. Mrs Stitt then asked Mr Arnott if he wondered how they know there have been closures in Hamilton and Larkhall not reported.
- 8.2.49.** Mr Arnott replied that he has seen no evidence to suggest deliberate or otherwise non reporting of closures.
- 8.2.50.** Mrs Stitt produced the second Freedom of Information request report from July. Mrs Stitt then detailed a Facebook post from 14 July that reported there was no pharmacist present in one of the Pharmacies “to sort prescriptions”.
- 8.2.51.** Mr Arnott said that he does not accept that, and that this sounds like “multiples bashing”.
- 8.2.52.** Mrs Stitt insisted no, that her point was just that it is the multiples that are closing, not the independent.
- 8.2.53.** Mrs Stitt noted that in the statutory complaints return three Lloyds Pharmacies stood out with Lloyds Pharmacy, Larkhall having 65 complaints and the two Lloyds Pharmacies in the Burnbank area of Hamilton with 84 and 52 complaints.
- 8.2.54.** Mr Arnott explained that Lloyds pharmacies are instructed to always log reports into their internal system if something happens, and then a standard report is issued to all health boards quarterly for the complaints returns. He added that some pharmacists report things as an issue even when they were easily resolved and not of any significant issue. That said his view was that Lloyds Pharmacy Ltd ask for all comments from patients to be registered as it was a useful and important learning opportunity. Mr Arnott would be more concerned if Lloyds pharmacies did not register their problems.
- 8.2.55.** Mrs Stitt asked if their waiting times are causing issues.

- 8.2.56.** Mr Arnott responded that people have different opinions of waiting times.
- 8.2.57.** Mrs Stitt stated that Lloyds Pharmacy Ltd has introduced a new dispensing systems that are causing prescription waiting times to be longer.
- 8.2.58.** Mr Arnott explained that it is a new service with initial teething problems that staff are getting used to, and that it was introduced for service improvement
- 8.2.59.** Mrs Stitt informed that she personally visited Lloyds Pharmacy in Larkhall a few times that has had a sign in the window since the start of May outlining these issues.
- 8.2.60.** Mr Arnott responded by asking for details on what pharmacy it is in order that they can discuss and issues and take the sign down, as it was considered that all teething issues were now resolved.
- 8.2.61.** Mrs Stitt then informed that she had discovered another Lloyds pharmacy not accepting walk-in prescriptions or answering phones because they were struggling to cope with a backlog caused by the new system.
- 8.2.62.** Mr Arnott reiterated that new systems will take time to get used to and that initial teething troubles were expected and dealt with for the resulting services benefits from the introduction of the system.
- 8.2.63.** Mrs Stitt asked if Mr Arnott was aware that none of the six Lloyds Pharmacies in Hamilton and Larkhall were able to accommodate new compliance aids patients or add them to the waiting list.
- 8.2.64.** Mr Arnott said that he would be amazed if that was to be the case, as any Lloyds pharmacy can use the Glasgow hub operation which will assemble dosette boxes for them so there should be no issue of turning people away.
- 8.2.65.** Mrs Stitt advised that she had attended a Lloyds Pharmacy branch looking for an aqueous calamine cream but none of the pharmacies visited had supplied, no alternative was offered, nor was the pharmacist consulted.
- 8.2.66.** Mr Arnott responded that all pharmacies, not just Lloyds Pharmacies, are increasing their Pharmacy First consultations and dispensing on a regular basis.

Having established that the Applicant had no further questions, the Chair invited questions from Mr Noel Wicks representing WEB Pharmacy Ltd to Mr Arnott.

8.3. Questions from Mr Wicks to Mr Arnott.

- 8.3.1.** Mr Wicks asked Mr Arnott whether he anticipated that the Saturday closures were going to carry on indefinitely.
- 8.3.2.** Mr Arnott responded that he hoped that the current recruitment issues would be resolved.

- 8.3.3. Mr Wicks wondered if Lloyds Pharmacy Ltd had considered a planned closure approach as WEB Pharmacy had given that patients and other interested bodies were informed in advance rather than having to react.
- 8.3.4. Mr Arnott advised that Saturdays are generally the quietest day for pharmacies so Saturday closures have the least impact on patients.
- 8.3.5. Mr Wicks had no further questions
- 8.4. **The Chair invited questions from Mr Scott Jamieson to Mr Wicks. Mr Jamieson advised that he had no questions to ask of Mr Arnott.**
- 8.5. **Having ascertained that Mr Jamieson had no questions the Chair then invited questions from Members of the Committee Members to Mr Arnott.**
- 8.5.1. **Mr MacKenzie asked the following questions**
- 8.5.2. Mr MacKenzie asked why Mr Arnott thought that the historic weekend rota for Larkhall had been stopped.
- 8.5.3. Mr Arnott replied that there had no longer been any need for it.
- 8.5.4. Mr MacKenzie asked what capacity the existing Lloyds Pharmacies had to cope with the anticipated increase in demand created through the proposed new housing in the area.
- 8.5.5. Mr Arnott replied that the pharmacies had capacity and that if there was any pressure they had the ability to take the work off-site to their assembly facility.
- 8.5.6. Mr MacKenzie asked that if the application was successful and existing Lloyds Pharmacies lost approximately 10% of their business would this affect viability of any of the branches.
- 8.5.7. Mr Arnott said none would become unviable but that it might necessitate a review of staffing levels.
- 8.5.8. Mr MacKenzie had no further questions
- 8.6. **Questions from Mr Hanif to Mr Arnott**
- 8.6.1. Mr Hanif asked whether there were any more Saturday closures planned.
- 8.6.2. Mr Arnott was not aware of any further planned closures.
- 8.6.3. Mr Hanif asked if Mr Arnott agreed that if a pharmacy is closed it is not providing core services.

MINUTE: PPC/2022/02

- 8.6.4.** Mr Arnott replied that he agreed but that the closures had been planned and agreed with the Health Board and there are plenty of choices for patients within the local area.
- 8.6.5.** Mr Hanif asked if Lloyds have a waiting list for delivery services.
- 8.6.6.** Mr Arnott claimed he did not think they had until the applicant provided evidence. He stated that a housebound patient would be guaranteed access to a delivery service.
- 8.6.7.** Mr Hanif asked which wholesalers Lloyds Pharmacies have access to.
- 8.6.8.** Mr Arnott advised that they have access to Alliance, AAH Pharmaceutical and and Epiderm Pharmaceuticals and that each of their pharmacies will help each other out when they can but if a manufacturer is out of stock, no one gets it.
- 8.6.9.** Mr Hanif asked if they were restricted to the products they can access.
- 8.6.10.** Mr Arnott responded that they have no restrictions on the products they can order.
- 8.6.11.** Mr Hanif asked about average waiting times for Lloyds Pharmacy branches.
- 8.6.12.** Mr Arnott replied that it is approximately 10-15 minutes in Hamilton.
- 8.6.13.** Mr Hanif asked if anything is officially recorded in respect of waiting times.
- 8.6.14.** Mr Arnott replied that it used to be before the pandemic, however now that things are recovering they are looking at putting new systems in now.
- 8.6.15.** Mr Hanif asked if all Lloyds Pharmacies in the vicinity provide MCR.
- 8.6.16.** Mr Arnott responded yes that they are all providing MCR and are increasing their activity.
- 8.6.17.** Mr Hanif asked for clarification that all 3 branches provide services to Ferniegair.
- 8.6.18.** Mr Arnott responded yes.
- 8.6.19.** Mr Hanif's last question was to enquire as to how Lloyds Pharmacy Ltd currently work out waiting times.
- 8.6.20.** Mr Arnott explained that they scan prescriptions as they come in and out, and a management report is produced. Whilst they do not currently have a target time to work to it is accepted that all branches aim to fulfil prescriptions in 10 minutes.
- 8.6.21.** Mr Hanif had no further questions

8.7. Questions from Mr Woods to Mr Arnott

8.8. Mr Woods asked Mr Arnott asked about closures and staffing issues.

8.9. Mr Arnott explained that if a pharmacy closes, it is more than likely a pharmacist staffing issue, not affected by other staff.

8.10. Mr Woods had no further questions

8.11. Questions from Mr Fuller to Mr Arnott

8.11.1. Mr Fuller asked if Mr Arnott accepts the definition of the neighbourhood by the applicant.

8.11.2. Mr Arnott asked where all the people come from — that they do not add up to near 3000 and he cannot see where there are another 2000 people.

8.11.3. Mr Fuller said Ferniegair is a healthy population and asked if there is a direct relationship between a need for this proposed pharmacy and the health of the population.

8.11.4. Mr Arnott replied that generally, yes — areas with more elderly residents and deprived areas would have more pharmacies.

8.11.5. Mr Fuller asked if Mr Arnott was suggesting that the new pharmacy would not be viable due to being located in an area with residents of good health.

8.11.6. Mr Arnott responded no, it is the staffing cost for a 60 hours opening time which make it unviable.

8.11.7. Mr Fuller reiterated that 4 out of 9 medical practices had written to express a need for additional pharmaceutical services which is high, and asked if Mr Arnott would accept that.

8.11.8. Mr Arnott replied that he would have to ask them about known national stock issues, which cannot be helped, and is also wondering about perceived delivery issues.

8.11.9. Mr Fuller asked Mr Arnott if there were manufacturing issues that were affecting them.

8.11.10. Mr Arnott responded that it was no more than other pharmacies are experiencing countrywide.

8.11.11. Mr Fuller asked how many suppliers Lloyds uses.

8.11.12. Mr Arnott replied that they use Alliance, AAH, Ethigen, and also AAH Specials.

8.11.13. Mr Fuller asked if Mr Arnott would accept that independents have access to a larger range of suppliers.

MINUTE: PPC/2022/02

- 8.11.14.** Mr Arnott stated that the applicant and WEB appeared to use six suppliers but that WEB had confirmed that they also experience difficulties, he added that he had never come across an area where pharmacies didn't help each other out.
- 8.11.15.** Mr Fuller asked if the lack of delivery slots apply to Lloyds.
- 8.11.16.** Mr Arnott replied that he does not know of any but will ask the area manager for an update.
- 8.11.17.** Mr Fuller asked if the application were to be rejected and the population to increase, would Lloyds be able to cope with increased demand.
- 8.11.18.** Mr Arnott responded that he does not think there would be an issue unless there was huge growth of like 15,000 people for one pharmacy.
- 8.11.19.** Mr Fuller asked if Lloyds is proposing reducing numbers of pharmacists or staff.
- 8.11.20.** Mr Arnott replied no, and that England closures are a separate issue. None are closing in Scotland.
- 8.11.21.** Mr Fuller went through the report from the statutory complaints report. On the accuracy of dispensing question he counted 206 complaints over 5 years, from that number 195 of those were in respect of Lloyds pharmacies. Lloyds Pharmacy Ltd had said they would investigate and take what actions were needed, so why in 2022 are they are still receiving many complaints.
- 8.11.22.** Mr Arnott explained that Lloyds Pharmacies are required to record all complaints by the pharmacy manager. When he was an area manager, he would log low level issues even when the had been easily resolved and of a minor level.
- 8.11.23.** Mr Fuller said that the complaints return highlighted a lot of complaints regarding dispensing.
- 8.11.24.** Mr Arnott responded that he would be concerned if there were no complaints to learn from.
- 8.11.25.** Mr Fuller talked about the staff comments and attitudes question, over 5 years there were 47 complaints recorded, with 28 being in respect of Lloyds pharmacies.
- 8.11.26.** Mr Arnott stated that if there was a pattern developing, they would highlight and investigate it.
- 8.11.27.** Mr Fuller stated that the report provides a longer period comparison, and that all pharmacies together amounts to less complaints than Lloyds pharmacies.
- 8.11.28.** Mr Arnott retorted that if he was 100% sure that every contractor was logging every incident and Lloyds Pharmacy Ltd still came out on top, then he would be concerned.

- 8.11.29. Mr Fuller had no further questions
- 8.12. **Having established that members of the Committee had no further questions the Chair asked the following questions of Mr Arnott**
- 8.12.1. The Chair noted that it had been highlighted that the elderly population is lower than thought and queried the levels of children.
- 8.12.2. Mr Arnott explained that it depends on the level of health of the children rather than the number, as healthy children do not usually require frequent visits to a pharmacy and that his experience estimates that 80% of Pharmacy First visits are within deprived areas.
- 8.12.3. The Chair then asked Mr Arnott if he was aware of any closures of Lloyds Pharmacies not being reported.
- 8.12.4. Mr Arnott confirmed this not to be the case.
- 8.12.5. The Chair had no further questions.
- 8.13. **The Interested Parties, the Applicant and the Committee had no further questions to ask Mr Arnott.**
- 8.13.1. **Having ascertained that there were no further questions for Mr Arnott, the Chair paused the hearing to allow all present to have a comfort break. She asked that everyone re-convene in 10 minutes.**
9. **The hearing restarted at 1415 hours. The Chair invited Mr Scott Jamieson to make his representation on behalf of Boots UK Ltd. Mr Jamieson read from a pre-prepared statement transposed below:**
- 9.1. **Mr Jamieson's representation on behalf of Boots UK Ltd**
- 9.1.1. NEIGHBOURHOOD. The neighbourhood sits between the larger developments of Hamilton and Larkhall and has good transport links to both. The A72 links Hamilton and Larkhall and runs through Ferniegair. It is approximately a four minutes' drive from Allanton Gardens to Hamilton town centre Boots.
- 9.1.2. Facilities in the neighbourhood are limited – residents are likely to visit Hamilton and Larkhall on a regularly basis to access the wider range of amenities.
- 9.1.3. The neighbourhood defined by the applicant is covered in the main by two super output areas (S01012701 and S01012702) – as outlined in the map of data zones provided in the papers to the hearing.
- 9.1.4. Should the PPC accept the neighbourhood defined by the applicant, services provided to the neighbourhood from pharmacies outwith must be considered.

- 9.1.5.** FUTURE DEVELOPMENTS. The information provided by the Board suggests a future development of 151 units in Ferniegair starting in 2022/23 phased at around 25-30 units per annum. At this rate it will be 5-6 years before the development is complete.
- 9.1.6.** The council's website planning information is still showing the application for this site as 'awaiting decision'. The existing pharmacies have the capacity for any increase in demand for services arising from this development.
- 9.1.7.** DEMOGRAPHICS the Scottish Multiple Index of Deprivation data shows that the area of Ferniegair benefits from lower levels of deprivation.
- 9.1.8.** 2011 Census data:
- Car ownership: 84% of households have access to a private vehicle. 39% of households have access to two or more vehicles which is significantly higher than the national average (Scotland – 69.5% have access to a vehicle – 27% have access to two or more vehicles)
- Home ownership: 75% of households are owner occupied (with or without a mortgage). 9% are socially rented, the remainder being privately rented. (Scotland – 62% owned and 25% rented)
- General Health: 85% of residents rate their health as good or very good and only 4% rate their general health as bad or very bad which indicates better levels of health than the national average. (Scotland – 82% good/very good and 5.6% bad/very bad)
- 9.1.9.** Summary - the neighbourhood has a relatively small population, but it is one that benefits from high levels of car ownership, high levels of home ownership, good levels of general health and low levels of deprivation.
- 9.1.10.** Existing services to the neighbourhood. The pharmacies in Hamilton and Larkhall are the main providers of pharmaceutical services to residents of Ferniegair. In addition to the eight pharmacies plotted on the map provided there are an additional three pharmacies (Additional Boots stores 113 Wellhall Road and 7 Burnbank Centre, and Lloyds Pharmacy Ltd 15 Burnank Centre in Hamilton).
- 9.1.11.** There are currently no surgeries in Ferniegair. Therefore, residents will most likely be registered with practices in either Larkhall or Hamilton and will access the pharmacies there when visiting their GP.
- 9.1.12.** The nearest existing pharmacies are providing access to services six days a week with two Boots pharmacies in Hamilton opening seven days a week.
- 9.1.13.** Boots, Regent Way in the town centre is approximately 1.5 miles from the proposed site and is open seven days a week. Boots at Douglas Street is also open seven days a week and until 8pm weekday evenings.

9.1.14.

The existing pharmacies provide all core, national and locally negotiated services. Details of which can be found on NHS Inform, the pharmacy's own website, in printed material available in the pharmacy (leaflets etc) and the Pharmaceutical List.

Existing service provision

- Medications: Care and Review - is available in our pharmacies.
- Pharmacy First - is provided by all Boots pharmacies and all are participating
- Offer all public health services:
 - Emergency Hormonal Contraception
 - Bridging contraception
 - Smoking Cessation
- Palliative care - palliative care network pharmacies are located in Hamilton (Boots, Mill Road) and Larkhall (Well)
- Substance misuse care provided by all Boots pharmacies
- One store has a dedicated care home service
- Compliance aids dedicated space in each pharmacy
- Delivery service

9.1.15.

Access to the existing pharmacies: as mentioned previously, car ownership in the area is high. Patients wishing to access services by car will have a choice of pharmacies from which to do so, most of which have parking or have parking nearby.

9.1.16.

Bus services run from Larkhall to Hamilton and vice versa making stops at several locations in Ferniegair. There are a number of bus services that run between Larkhall and Hamilton with stops in Ferniegair. The 250, 253 and 254 services typically run half hourly throughout the day weekdays (six services an hour).

9.1.17.

Trains also run frequently between Chatelherault and Hamilton stations with an approximate journey time of 4 minutes.

9.1.18.

In addition to private vehicles and public transport, patients may also choose to use community transport or delivery services. MyBus, a door-to-door, wheelchair-accessible bus service booked in advance by phone, operates in South Lanarkshire with community services provided by Hamilton Volunteer Group and Larkhall and District Volunteer Group.

- 9.1.19.** Summary: the existing pharmacies are reasonably accessible from the defined neighbourhood. Patients have access to a range of pharmaceutical services from a choice of provider. Services are accessible seven days a week. The existing pharmacies provide an adequate level of pharmaceutical provision to the neighbourhood.
- 9.1.20.** The CAR Report: Page 9 of the CAR suggests that the questionnaire was accessed a number of times but that 183 'hits' did not progress to submitting a response.
- 9.1.21.** Question 1 - of those that did respond, the majority agreed with the neighbourhood definition. It is worthwhile noting the following comments were also made:
- Seems to capture the small community of Ferniegair Question 2
The majority felt that a pharmacy would be accessible for patients in and around the neighbourhood.
- 9.1.22.** However, this is not to say the existing pharmacies are not accessible, nor must convenience be confused with accessibility (and inadequacy for the purpose of the regulations). Furthermore, there are comments in the CAR that relate to parking, with one comment on page 20 stating that the car park at the proposed site is 'small and regularly busy'.
- 9.1.23.** Question 3 - 36.5% of respondents said that they thought that the current services being provided in and to the neighbourhood were adequate, with a further 26.8% responding 'don't know'. That is over 63%, almost two thirds of respondents who did not feel strongly that the existing services were inadequate.
- 9.1.24.** Question 4 - Do you think the current provision has any gaps or deficiencies? 57.7% said yes but less respondents considered the existing services not adequate (see question3). Furthermore, some respondents have stated:
- 'You need to consider the demographic of Ferniegair, now it is all young professionals or medium income families. Everyone has a vehicle, many households have two. ...'
- ' this is a small community of mostly middle aged professionals and families with children. Almost all are drivers and access most amenities in Hamilton or Larkhall. A pharmacy here is not required. Many use the on line services available'.
- 9.1.25.** There also appears to be a number of comments relating to not wanting substance misuse services available in the area.
- 9.1.26.** Question 10 - Do you support the proposal? 90% of respondents said yes, but almost two thirds did not think the existing pharmaceutical services were inadequate. It is worthwhile noting several responses to this question:
- Page 49: ...I am a recently retired GP from a surgery in Hamilton for nearly 30 years. I am very familiar with the area and in fact many patients from Ferniegair

were and still are registered at this surgery. Whilst I believe such a facility could be of use, do I think it is necessary? All I can say is that in all my time as a GP I never once heard a patient mention the need for a pharmacy in Ferniegair.

Page 52: 'while many might say it would be handy to have a new pharmacy or convenient, it is absolutely not necessary. Ferniegair is a very affluent small village with no schools, high car ownership, and which until recently didn't even have a shop of any kind. There are also excellent transport links with a train and numerous buses to and from Larkhall and Hamilton . Also, many of the pharmacies are close by and also deliver. The shop unit itself has lain empty since it was built and i believe this to be an opportunistic application, and not one of any real need. I would also have real concerns about its viability especially with the extended hours they are proposing. This is a small village, not a bustling town.'

9.1.27. We note that three community councils were included in the consultation but did not respond.

9.1.28. Summary: Not all comments are supportive of the application. Residents have voiced concerns regarding the provision of some the services the pharmacy proposes to provide. Convenience should not be confused with the strict interpretation of necessary, or of desirability in accordance with the regulations.

9.1.29. This concluded the representation by Mr Jamieson

9.2. The Chair invited questions from the Applicant to Mr Jamieson

9.2.1. Mrs Stitt questioned Mr Jamieson's statement that two thirds of people did not think services were inadequate.

9.2.2. Mr Jamieson answered that 26.8% said they do not know, so there is no strong motivation to say that they are inadequate.

9.2.3. Mrs Stitt stated that the number of responses is usually higher earlier at the start of completing the questionnaire, and that it may be an indication of "voter fatigue".

9.2.4. Mr Jamieson replied that if someone had chosen to take the time to participate and felt strongly about the proposal they would ensure that they made it known when completing the questionnaire.

9.2.5. Mrs Stitt then questioned why the retail only Boots Pharmacy store at Hamilton Retail Park, with free parking outside, had withdrawn their Pharmacist advice area.

9.2.6. Mr Jamieson replied that as this was a non-contract pharmacy store when the current Pharmacist workforce crisis started it was better to deploy the Pharmacist in a contract Pharmacy to protect the provision of pharmacy services, where they are most needed.

MINUTE: PPC/2022/02

- 9.2.7.** Mrs Stitt asked if it was correct then that no pharmaceutical services of any description can be accessed from Hamilton Palace Retail Park.
- 9.2.8.** Mr Jamieson confirmed but pointed out that over the counter medicines were available and that there are five other Boots Pharmacies in Hamilton including Regent Way which is a short walk away.
- 9.2.9.** Mrs Stitt then referred back to Easter Monday, 13 April 2020, remarking that it was noticeable that many pharmacies did not open. Mrs Stitt asked why only one Boots Pharmacy opened that day.
- 9.2.10.** Mr Jamieson replied that the Boots Pharmacy, Regents Way was open with good access.
- 9.2.11.** Mrs Stitt remarked that none of the Boots' pharmacies which provide palliative care and needle exchange were open on that day, and asked if Mr Jamieson thought this was right for patients not to be able to access those services.
- 9.2.12.** Mr Jamieson said that applications were considered by the health board and it was up to them to decide which community pharmacies were allowed to close.
- 9.2.13.** Mrs Stitt stated that the health board did ask and that according to the information she had Regent Way was not open but Douglas Street was.
- 9.2.14.** Mr Jamieson admitted that he does not have the information right now to research that and respond with accuracy.
- 9.2.15.** Mrs Stitt the asked Mr Jamieson to confirm the cost of their delivery service.
- 9.2.16.** Mr Jamieson confirmed that there is no charge to patients for this service.
- 9.2.17.** Mrs Stitt queried if he was sure because she has a patient who is a Boots Pharmacy delivery driver and that they told her that Boots UK Ltd apparently charge £5 per delivery, or £70 per year.
- 9.2.18.** Mr Jamieson reinforced his earlier response that if a patient needs a delivery, there is no question that they will received this service and that it will be free of charge. He cautioned Mrs Stitt that she has no evidence to refute his reply.
- 9.2.19.** Mrs Stitt then questioned the availability of the service advising that she had visited several branches who said there were no delivery slots.
- 9.2.20.** Mr Jamieson again said that there was no evidence to examine for this statement.
- 9.2.21.** Mrs Stitt asked if patients are ever charged for deliveries.
- 9.2.22.** Mr Jamieson replied that if a patient is asking for this service merely for convenience then personally he would think to charge them however the service is free.

- 9.2.23.** Mrs Stitt asked how Boots Pharmacies determine who needs their delivery service.
- 9.2.24.** Mr Jamieson answered that it would be decided by the pharmacist based on their professional opinion.
- 9.2.25.** Mrs Stitt asked if their delivery is outsourced, and if they have control over the way deliveries are made.
- 9.2.26.** Mr Jamieson confirmed that it is not outsourced, they have control of their deliveries and asked as to the relevance of this line of questioning.
- 9.2.27.** Mrs Stitt referred to the closure information mentioning again that there were 20 Saturday closures in total, and querying the amount of Boots Pharmacies that were affected.
- 9.2.28.** Mr Jamieson states that he does not have the information to check the information and that he has stated at length the issues faced through staffing levels, Covid measures and restrictions.
- 9.2.29.** Mrs Stitt asked why this does not appear to apply to other pharmacies, is Mr Jamieson suggesting that they are in a different position.
- 9.2.30.** Mr Jamieson responded no but that some of their staff are working 6 days, and that Boots UK Ltd are mindful to protect the wellbeing of their staff. Mr Jamieson added that this line of questioning seems like “bashing the multiples”.
- 9.2.31.** The Chair intervened and stated that the applicant and the interested party had made their positions sufficiently clear for the Committee to draw any necessary conclusions.
- 9.2.32.** Mrs Stitt stated that Boots UK Ltd have eight pharmacies in Hamilton and two in Larkhall, and that only one branch is closing on Saturdays, whereas five of their branches around their Pharmacies in New Stevenston and Cleland are closing, asking Mr Jamieson if their choice of pharmacies to close had been influenced by their contract application.
- 9.2.33.** Mr Jamieson responded that this would not be the case and that the managers based their decision on closures around having the least impact to patients.
- 9.2.34.** Mrs Stitt asked then asked Mr Jamieson how many Boots pharmacies are in Motherwell. When Mr Jamieson replied that he did not know, Mrs Stitt advised that there were five and that three were closing.
- 9.2.35.** Mr Jamieson said that this is nothing to do with this PPC hearing, and reiterated that decisions to close are made locally by area managers.
- 9.2.36.** Mrs Stitt noted that there is lots of media coverage and by the BBC about Boots UK Ltd stopping dosette boxes.

- 9.2.37.** Mr Jamieson confirmed that there is no change in Scotland at all. It is a different financial contract in England and remarked again that he did not see the relevance of this line of questioning.
- 9.2.38.** Mrs Stitt advised that she is aware that no Boots pharmacies could accommodate new patients for compliance aids or even add them to waiting lists
- 9.2.39.** Mr Jamieson stated that Mrs Stitt is presenting anecdotal evidence on which he cannot comment.
- 9.2.40.** This led Mrs Stitt to quote comments in relation to Boots pharmacies such as: “No availability and not able to leave details” and “Told not to take on any more trays.”
- 9.2.41.** Mr Jamieson contested this information as he works with the store management and area management teams and it is in contrast to his understanding of the position.
- 9.2.42.** Mrs Stitt reported that Mrs Bankier did a lot of this data collection and that Boots Pharmacy staff seemed really stressed. Mrs Stitt asked why no one took names for the dosette box request.
- 9.2.43.** Mr Jamieson indicated that he could not answer this as he was not aware of the particular circumstances.
- 9.2.44.** Mrs Stitt told of an instance of a patient asking for a dosette box or MAR chart and were advised that this was not Boots UK Ltd company policy.
- 9.2.45.** Mr Jamieson disputed this information.
- 9.2.46.** Mrs Stitt produced another person’s comment: “Really peeved by Boots not taking dosette boxes or MARs.” Mrs Stitt got a phone call from a local hospital asking for a patient to be put on a MAR chart. When Mrs Stitt asked why the local pharmacy was not doing this, they said they were told it was a health and safety issue. Mrs Stitt queried Mr Jamieson about this.
- 9.2.47.** Mr Jamieson retorted that this is still too anecdotal to answer.
- 9.2.48.** The Chair said no new information was being introduced and the Committee was clear as to the position of the applicant and the interested party.
- 9.2.49.** Mrs Stitt moved on to pharmacy closures and freedom of information requests mentioning that in the first report Boots UK Ltd had 8 closures out of 56.
- 9.2.50.** Mr Jamieson explained that they do checks with the deployment teams who produce their reports on closures and marry up the two to look out for any discrepancies which are followed up.
- 9.2.51.** Mrs Stitt stated looking at the second FOI request information - in less than 5 months there are 173 closures mainly from multiples. If the same rate of closure for a year is assumed that would equate to a staggering 750% increase in

closures on the previous year. Of the 173 closures 132 are Boots closures – she asked why Boots have so many more closures than for example Asda, Rowlands, even Lloyds?

- 9.2.52.** Mr Jamieson responded that the opening hours affected by closures amounted to less than 1% of Boots total opening hours, and that Boots work very hard to remain open when they are meant to trade.
- 9.2.53.** Mr Jamieson suggested that Mrs Stitt is making this a much bigger issue than it should be.
- 9.2.54.** Mrs Stitt said that it was actually a massive issue as she has never closed a branch. Mr Jamieson reinforced earlier statements about the current finite resource of pharmacists and pharmacy support staff.
- 9.2.55.** Mrs Stitt asked if Boots are trying to protect those pharmacies located in Hamilton or Larkhall due to their application.
- 9.2.56.** Mr Jamieson responded no.
- 9.2.57.** Mrs Stitt then progressed to discuss the “Locate a Locum” App – which is used by pharmacies to advertise shifts that they need covered. She then focussed on 16 entries that were all for Boots Pharmacies in Hamilton and Larkhall, and many of them looked to be unfilled. When she cross checked the dates of those entries against the closure information provided she did not see any closure notices for any of the 16 entries. Mrs Stitt then asked what happens in a morning if Boots do not secure locum Pharmacy cover.
- 9.2.58.** Mr Jamieson responded that the deployment team will look at where they can move resources around – there are some stores that have two or three pharmacists so if needs be a pharmacist will be pulled from one of these in order to allow a branch to keep open.
- 9.2.59.** Mrs Stitt asked if it was likely that some of these shifts would not have been covered and that Boots UK Ltd failed to report the closure to NHS Lanarkshire.
- 9.2.60.** Mr Jamieson thought that this would be fairly unlikely as they are normally congratulated by their reporting of closure accuracy, and had never had a concern raised by NHS Lanarkshire regarding not reporting correctly
- 9.3. Having established that the Applicant had no further questions, the Chair invited questions from Mr Wicks to Mr Jamieson**
- 9.3.1. Questions from Mr Wicks to Mr Jamieson**
- 9.3.2.** Mr Wicks asked if some shifts that were appearing on the locum app were not real ones but potential shifts.
- 9.3.3.** Mr Jamieson replied that yes, deployment is a moving feast to keep stores open, and they are dealing with so many variables to manage that situation.

- 9.3.4. Mr Wicks spoke on closures and asked how long ago Lanarkshire invited applications to consolidate Saturday closures.
- 9.3.5. Mr Jamieson responded that it was the end of June.
- 9.3.6. Mr Wicks asked if this would this have been considered six months ago, to which Mr Jamieson replied no.
- 9.3.7. Mr Wicks then asked what about 6 months' time, and Mr Jamieson replied that the closures are a transient issue.
- 9.3.8. Mr Wicks had no further questions.
- 9.4. **The Chair invited questions from Mr Arnott to Mr Jamieson**
- 9.4.1. Mr Arnott asked Mr Jamieson if he feels there has been “multiples bashing” by the Applicant.
- 9.4.2. Mr Jamieson responded yes.
- 9.4.3. Mr Arnott asked Mr Jamieson if supply of dosette boxes is a core service.
- 9.4.4. Mr Jamieson confirmed that it was not.
- 9.4.5. Mr Arnott asked if Mr Jamieson would consider a pharmacy looking to open for 60 hours a week being viable.
- 9.4.6. Mr Jamieson replied that he struggles to see it.
- 9.4.7. Mr Arnott asked what the highest rate was that Mr Jamieson had to pay for Pharmacist cover on a Sunday commenting that they pay £120 per hour.
- 9.4.8. Mr Jamieson responded £130 an hour.
- 9.5. **Having ascertained that Mr Arnott had no further questions the Chair then invited questions from Members of the Committee to Mr Jamieson. Mr MacKenzie asked the following questions.**
- 9.5.1. Mr MacKenzie asked Mr Jamieson if he were to lose 10% of the number of items for any of their Hamilton and Larkhall pharmacies what that would mean for viability for these branches
- 9.5.2. Mr Jamieson said that none of the branches would be unviable however his company systems would measure the prescriptions and services provided and if they decreased that staffing levels would be impacted.
- 9.5.3. Mr MacKenzie asked if the application were unsuccessful and all the proposed new house building went ahead would Boots Pharmacies have the capacity to deal with the increased workload
- 9.5.4. Mr Jamieson responded yes.

9.5.5. Mr MacKenzie had no further questions

9.6. The Chair then invited questions from Mr Hanif to Mr Jamieson

9.6.1. Mr Hanif asked if Boots Pharmacies provide all core services when their pharmacies are open.

9.6.2. Mr Jamieson confirmed that they do.

9.6.3. Mr Hanif asked if all seven Boots Pharmacies in Hamilton and Larkhall provide dosette boxes.

9.6.4. Mr Jamieson replied yes they do, they have a centralised service via their Douglas Street branch.

9.6.5. Mr Hanif asked if their delivery service is free.

9.6.6. Mr Jamieson replied that it is free to those who need it, and that a charge is made to those who do not require it on health grounds but ask for it for convenience. They do have guidance to follow to help determine the patients to charge but it is not strictly applied. In the main, there is no charge for deliveries.

9.6.7. Mr Hanif then brought up the closures issue and whether there were further planned ones in Hamilton.

9.6.8. Mr Jamieson responded that they did not intend to make further requests.

9.6.9. Mr Hanif asked if they are ending next week then so back to full opening levels on Saturdays.

9.6.10. Mr Jamieson replied that yes, they intend that to be the case.

9.6.11. Mr Hanif asked if there were any specific statistics on waiting times within Boots pharmacies.

9.6.12. Mr Jamieson stated that is captured as part of their patient survey, and that they are currently sitting at around 10-15 minutes.

9.6.13. Mr Hanif had no further questions.

9.7. The Chair then invited questions from Mr Woods to Mr Jamieson

9.7.1. Mr Woods asked if Boots UK Ltd do not have a similar check in check out system to measure waiting times similar to Lloyds Pharmacy Ltd.

9.7.2. Mr Jamieson replied that their system is to measure by patient surveys.

9.7.3. Mr Woods asked what happens to staff when their pharmacy closes.

9.7.4. Mr Jamieson confirmed that they are deployed in another Boots Pharmacy.

- 9.7.5.** Mr Woods asked Mr Jamieson if a branch was short of an item, how would staff source it.
- 9.7.6.** Mr Jamieson explained there is a stock check system to check other branches, a WhatsApp group that teams use to communicate, and they also talk with other nearby pharmacies.
- 9.7.7.** Mr Woods asked if this was to all the Boots in Scotland. Mr Jamieson replied that it is more local. Their delivery team delivers mostly to patients but also delivers stock where needed and available in another local branch. A company system covers the whole of UK, but it is rare to go outside of Scotland.
- 9.7.8.** Mr Woods had no further questions
- 9.8. The Chair then invited questions from Mr Fuller to Mr Jamieson**
- 9.8.1.** Mr Fuller asked if Mr Jamieson agrees with the boundary lines set by the applicant.
- 9.8.2.** Mr Jamieson replied that this is fine.
- 9.8.3.** Mr Fuller asked if it was concluded that the neighbourhood was a middle-class area whether Mr Jamieson would consider that there was a need for a pharmacy in that area.
- 9.8.4.** Mr Jamieson explained that sadly, the more deprived the area, the poorer their health, as they tend to have more smokers, higher cancer rates, higher cardiovascular rates, and drug use is higher due to social mobility issues. Therefore, more community centres are needed.
- 9.8.5.** Mr Fuller asked if this application were to be granted, how it would impact Mr Jamieson's business.
- 9.8.6.** Mr Jamieson replied that it is hard to say. If successful, they may go aggressively on deliveries and market all of Hamilton or wider that would have an impact, especially if they targeted the care home business. Whatever the level of impact it would be reflected in staffing reductions.
- 9.8.7.** Mr Fuller asked if the application is not granted and demand increases, would Boots pharmacies be able to cope.
- 9.8.8.** Mr Jamieson replied yes, as they have capacity for growth in all five pharmacies in Hamilton and the two in Larkhall.
- 9.8.9.** Mr Fuller noted two issues from the CAR, one being manufacturing problems, and asked Mr Jamieson if this was experienced in any of the Boots pharmacies.
- 9.8.10.** Mr Jamieson replied that Hormone Replacement Therapy supplies have been an issue, as with all pharmacies. Global market is challenging and there are supply issues in various countries. This is no more related to Boots than anyone else.

- 9.8.11. Mr Fuller asked how many suppliers Boots has.
- 9.8.12. Mr Jamieson replied that they have three main suppliers and can also source locally.
- 9.8.13. Mr Fuller asked if Mr Jamieson accepted that Boots pharmacies were at a disadvantage compared to independents in terms of the number of suppliers they could access.
- 9.8.14. Mr Jamieson did not believe that this was the case and in reality they are not given they are not limited to one supplier.
- 9.8.15. Mr Fuller noted that the Applicant had alluded to a problem with people getting delivery slots and asked if there were any issues with Boots UK Ltd delivery systems.
- 9.8.16. Mr Jamieson replied no, as they have a huge delivery team. Boots pharmacy teams care and want to help people.
- 9.8.17. Mr Fuller asked if application were rejected, what assurance would Mr Jamieson give the panel in stability of existing services in Hamilton and Larkhall.
- 9.8.18. Mr Jamieson responded that there would be no negative impact as they have capacity to cope.
- 9.8.19. Mr Fuller had no further questions.
- 9.8.20. **The Chair established that neither the Applicant, the Interested parties, or members of the Committee had any further questions to ask of Mr Jamieson.**

10. **SUMMARIES**

The Chair having confirmed that there were no further questions or comments from those present and participating in the hearing, invited the various parties to sum up their arguments. The Chair advised that this would happen in reverse order.

As Mr Arnott had indicated that he may have resolved his previous confusion as to the population of the neighbourhood, the Chair asked all parties and, in particular the applicant, whether there would be any objection to Mr Arnott addressing this in his summing up on the basis that any other party would also be able to comment. All parties indicated that they had no objection to this approach.

- 10.1. **Mr Jamieson on behalf of Boots UK Ltd was invited to sum up.**

10.1.1. Mr Jamieson advised that the neighbourhood has a relatively small, fairly wealthy, population, but it is one that benefits from high levels of car ownership, high levels of home ownership, good levels of general health and low levels of deprivation.

The neighbourhood also has good transport links to Hamilton, Larkhall and beyond with good road links, frequent bus services and regular train services. Community transport and delivery services are also available.

The existing pharmacies provide access to a full range of services as well as access to services seven days a week. Data for Boots pharmacies shows good levels of participation in services and have the capacity to do more.

He questioned the viability of the proposed pharmacy.

10.1.2. This concluded the summary by Mr Jamieson

10.2. Mr Arnott on behalf of Lloyds Pharmacy Ltd was invited to sum up

10.2.1. Mr Arnott clarified population figures and says residents of Quarter were included in the Applicant's figures (Quarter being outwith the proposed neighbourhood). Mrs Stitt disagreed and stated that Quarter was covered by a separate data zone.

10.2.2. The Chair thanked both parties and stated that the Committee would reach a conclusion on this point which would be included in its decision.

10.2.3. Mr Arnott did not think that there were 3000 people in the population. Mr Arnott argued that the population is 1043 and possibly 300 more. He stated that this population was young, healthy, mobile, affluent and capable of accessing pharmacy services in nearby areas. He presumed that they had chosen to live where they do, and often travelled to meet their regular needs. Mr Arnott believed this argument is mainly about convenience, and that the Applicant provided no evidence of need, but numerous attacks on multiples. He referred to the critical shortage of community pharmacists as detailed on government lists and referred to the increased deployment of pharmacists in primary care settings putting community pharmacies under pressure. Mr Arnott was unaware of any complaints to the health board regarding current services. He did not consider the Applicant's business to be viable as proposed in the application and a non-viable service was not an adequate service.

10.2.4. Therefore, Mr Arnott requested that the Committee refuse this application.

10.2.5. This concluded the summary by Mr Arnott

10.2.6. Mr Wicks on behalf of WEB Pharmacy Ltd was invited to sum up

- 10.2.7. Mr Wicks stated that he does not see any real demonstrations of inadequacy of the current pharmaceutical service in and to the proposed neighbourhood. Many people did not feel strongly enough to state that it was inadequate. Even if the population is 3000 considering potential new builds, that would still be way below the average of pharmacy needs.
- 10.2.8. The community is very young, mobile and wealthy. Mr Wicks did not believe this proposed pharmacy would be viable to such a small community like this as they were already accessing services as needed elsewhere. The Applicant would then look to secure prescriptions by aggressive marketing far and wide that might have consequences for the viability of existing pharmacies.
- 10.2.9. Mr Wicks said that it is neither necessary or desirable to approve this application, and ask that the Committee refuse it.
- 10.2.10. *This concluded the summary by Mr Wicks*

10.3. The Applicant was invited to sum up

- 10.3.1. Having used Chatelherault Country Park over the years and watched the growth of Ferniegair with all the new house building, we have believed for some time that Ferniegair required a pharmacy, but the issue was always that there were no vacant retail units. When we became aware of plans to build units, in an accessible location with parking, and at the heart of the village, we expressed an interest at an early stage. It appears that we were not the only pharmacists that thought this with at least 4 others expressing interest.
- 10.3.2. The Ferniegair resident population of 3,000 and the transient population of in excess of 870,000 need a pharmacy, and this is evidenced from the answers and comments contained in the Consultation Analysis Report with 607 responses, the highest ever response in Lanarkshire by some 47%.
- 10.3.3. Applications have been passed in recent years in Lanarkshire for pharmacies with much smaller populations, and no transient population namely Overtown (approx. 2,000), Calderbank (approx. 1560) and Carstairs (approx. 1600) and there are many other examples across Scotland of neighbourhoods with smaller populations being granted a contract due to the need for pharmaceutical service. It is notable that there was no objection from Well group of pharmacies who are represented in Larkhall, as well as no objections from the Area Medical Committee and the Area Pharmaceutical Committee.
- 10.3.4. Some of the interested parties have argued that Ferniegair is an affluent area. We believe that all patients regardless of their age, their income, education, or disability have the right to receive high quality pharmaceutical care. Patients are still finding it difficult to access GP services, A&E services and even some pharmacies with the explosion in pharmacy closures.
- 10.3.5. Ferniegair patients using pharmacies in Larkhall and Hamilton areas are struggling with long waiting times, obtaining deliveries and accessing dosette boxes.

- 10.3.6. We have letters of support from 4 of the local surgeries and from Monica Lennon MSP, and Davie McLachlan, councillor for Ferniegair.
- 10.3.7. We believe that our presentation, the evidence from the CAR, and the answers to the questions from the interested parties clearly demonstrate that a pharmacy in Ferniegair is both necessary and desirable, and respectfully request that our application be granted.

This concluded the summary by the Applicant

11. **RETIRAL OF PARTIES**

- 11.1. The Chair then invited each of the parties present to individually and separately confirm that a fair hearing had been received and that there was nothing further to be added. The Applicant and each of the Interested Parties, separately confirmed that they had had a fair hearing and that they had nothing further to add. The Chair advised that the Committee would consider the application and representations in detail and in private prior to making a determination.
- 11.2. The Chair reminded the Applicant and Interested Parties that it was in their interest to remain available until the Committee had completed its private deliberations. If the Committee required further factual or legal advice, the open session would be reconvened so that all parties could hear the advice and have the opportunity to challenge or comment on that advice. They would be notified when the Committee's deliberations were completed.
- 11.3. The Chair informed all parties 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. The time limit for any appeal would commence with the publication of the Committee's decision.
- 11.4. ***The hearing adjourned at 1545 hours and the Applicant and the Interested Parties, along with their companions left the meeting room.***

12. **COMMITTEE DELIBERATIONS**

12.1. **Supplementary Information**

The Committee noted and took into account the following information:

- (i) That each member had independently undertaken a site visit of Ferniegair noting the proposed premises and the facilities and amenities within the neighbourhood, and of those within the surrounding townships of Hamilton and Larkhall noting the location of the pharmacies and general medical practices hosted therein.

MINUTE: PPC/2022/02

- (ii) Maps showing the location of the proposed Pharmacy in relation to existing Pharmacies and GP surgeries within Hamilton and Larkhall.
- (iii) Community Pharmacy Activity relevant to the application as at 15 July 2022.
- (iv) Datazones 2020 for Ferniegair and the surrounding areas
- (v) Scottish Index of Multiple Deprivation (SIMD) indicators 2020 for Ferniegair and the surrounding areas.
- (vi) Report on the range of Pharmaceutical Services provided by existing pharmaceutical contractors within the neighbouring areas of Hamilton and Larkhall. This report provides an update to the list of services provided within this area as contained within Pharmaceutical Care Services Plan
- (vii) Extract of statistics from the 2011 Scotland Census relating to health, household tenure, car or van availability, economic activity, population, age and structure, households with dependent children, dependent, lone parents with dependent children, limiting long-term health, occupation groups and travel to work in the townships of Hamilton and Larkhall.
- (viii) Population statistics obtained from statistics.gov.scot website for Datazones around the proposed pharmacy location.
- (ix) Detailed Information extracted from pharmacy quarterly complaints returns to NHS Lanarkshire from Quarter 1 2017/18 to Quarter 4 2021/22.
- (x) Note of complaints received by NHS Lanarkshire regarding pharmacy services in South Lanarkshire during the last five years.
- (xi) Housing in Ferniegair report from South Lanarkshire Council Planning Department
- (xii) The application submitted by the applicant on 03 May 2022 and the Consultation Analysis Report agreed jointly by NHS Lanarkshire and the applicant following the joint consultation process.

12.2. The Committee also considered the following additional information submitted by the applicant and circulated to all parties prior to the hearing:

- Letter dated 09 August 2022 from Monica Lennon, MSP for Central Scotland (Scottish Labour and Scottish Co-op) to Heather Knox, Chief Executive, NHS Lanarkshire
- Copy of information from George Lindsay, Chief Pharmacist – Primary Care, NHS Lanarkshire providing details of consolidation of community pharmacy services on Saturdays from 09 July to 20 August 2022

- Information on community pharmacy closures obtained via Freedom of Information legislation by the applicant covering the period 23 March 2021 to 25 February 2022 and 25 February 2022 to 14 July 2022.
- Letter of support from P Alamantha, Associate Manager, Hamilton West Medical Practice
- Letter of support from Dr P Chellamuthu, General Practitioner, Gallowhill Medical Practice
- Letter of support from M Turnbull, Practice Manager, Douglas Street Surgery
- Letter of support from L Thomson, Practice Manager, on behalf of The Avon Medical Practice
- Letter of support from Cllr Davie McLachlan, Chair of Housing and Technical Resources, Ward 17 Hamilton North and East, South Lanarkshire
- Excerpt from South Lanarkshire Development Plan, Chapter 4, Community Growth Areas (pages 10 and 11)
- Article from Hamilton Advertiser Newspaper, 14 April 2022 “Green light for new homes”
- Information relating to the proposed site of the pharmacy - Unit 3 external and internal floor plans, acceptance of certificate of completion building (Scotland) Act 2003, letter from Wilson Developments confirming licence of the Unit to the applicant.

13. SUMMARY OF CONSULTATION ANALYSIS REPORT (CAR)

13.1. Introduction.

13.1.1. NHS Lanarkshire undertook a joint consultation exercise with Ferniegair Pharmacy Ltd regarding their proposed application for a new pharmacy contract at Unit 3 Allanton Gardens, Ferniegair ML3 7GQ (all as referred to on page 1 of the CAR)

13.1.2. The purpose of the consultation was to seek views of local people who may use 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.

13.2. Method of Engagement to Undertake Consultation

13.2.1. The consultation was conducted via Survey Monkey 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.

13.2.2. The Consultation was publicised via:

- NHS Lanarkshire press release published on Daily Record website on 24 September 2021

MINUTE: PPC/2022/02

- Newspaper advertisements in the Hamilton Advertiser on 23 September, 4 November and 16 December 2021
- NHSL Facebook page and Twitter accounts direction towards NHSL website and consultation survey. Posts and tweets appeared on the following dates: 24 September 2021, 20, 25, 28 and 31 January 2022, and 1 February 2022.
- To promote the survey the website link to the consultation survey appeared on a rolling banner on the NHSL website homepage and as static on the Get Involved page for the duration of the consultation period (23 September 2021 to 02 February 2022).
- South Lanarkshire Council was also notified for dissemination to known local groups, elected representatives, and relevant Public Partnership Forums.
- Notice of the joint consultation process being undertaken and the reasons for it was also given to Larkhall Community Council, Hillhouse Community Council, Hillhouse Community Council, and Meikle Earnock Community Council on 23 September 2021.
- The newspaper advert, and the NHS Lanarkshire website, also advised that paper copies of the consultation questionnaire could be provided to members of the public with no access to the internet to submit their views. A copy of the questionnaire in different format or language could be made available if requested.

13.3. Summary of Questions and Analysis of Responses within the CAR

13.3.1.

	Question	Yes	No	Don't know	Replied	Skipped
Q1	Do you agree that the area within the red border represents the neighbourhood that would be served by the proposed pharmacy	568	24	15	607	0
Q2	Would a pharmacy at this proposed location be accessible for patients in and around the neighbourhood?	587	9	11	607	0

MINUTE: PPC/2022/02

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?	192	193	141	526	81
Q4	Do you think that the current provision of pharmaceutical services has any gaps or deficiencies?	304	116	104	527	80
Q5	Fernigair Pharmacy Ltd are proposing to provide the services listed below. Do you think the proposed pharmacy needs to open in order for people in the neighbourhood to have adequate pharmaceutical services?	381	41	87	509	
Q6	Do you think that the proposed hours are appropriate?	459	29	19	507	100
Q7	If this proposal is successful, do you think that there would still be any gaps or deficiencies in the pharmaceutical services provided?	21	361	125	507	100

MINUTE: PPC/2022/02

Q8	In your opinion, would the proposed application help other healthcare providers to work more closely together – e.g. GPs, community nursing, other pharmacies, dentists, optometrists and social services?	364	32	98	494	113
Q9	Do you believe this proposal would have any impact on other NHS services, e.g. GPs, community nursing, other pharmacies, dentists, optometrists and social services?	157	194	143	494	113
Q10	Do you support the proposal to open a new pharmacy at Unit 3, Allanton Gardens, Ferniegair, ML3 7GQ?	449	41	5	495	112
Q11	I am responding as	Individual = 495 Group/Organisation = 0			495	112

14. DISCUSSION

14.1. The Committee in considering the written evidence submitted during the period of consultation, written and oral evidence presented during the hearing, the contents of the CAR 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.

14.2. Neighbourhood

14.2.1. The Committee discussed the neighbourhood in detail and noted:

- that two of the interested parties accepted the Applicant's definition and boundaries without reservation
- that the third interested party declined to accept but, when questioned, declined to specify which additional parts of the neighbouring townships of Hamilton or Larkhall he proposed should be added to it
- the maps provided in the consultation document; the maps supplied with the papers;
- natural and physical boundaries such as roads, waterways and open land observed during site visits

- 14.2.2.** The Committee recognised that the size of the neighbourhood was small, and included only some of the facilities you would normally expect to find in a neighbourhood but, even so, there was a clear geographical logic to the boundaries drawn by the applicant around the village of Ferniegair, which included a river, motorway, and open land.
- 14.2.3.** The Committee then reviewed and discussed the number and type of general amenities available within the neighbourhood as defined by the Applicant. This discussion was informed by observations during individual site visits, and also outlined in detail by the Applicant in their presentation such as Chatelherault Train Station and Park and Ride, Chaterherault Inn, local Co-Operative supermarket, Nourish Delicatessen, Hair Pod, Village Hall, Public park and Playground, Brookside Garden Centre and Café hosting a number of small independent shops, Hamilton Golf Club and the community and recreational facilities within Chatelherault Country Park.
- 14.2.4.** The Committee also considered the population of the proposed neighbourhood. The map established that the neighbourhood included the whole of data zone S01012702 and appeared to include most of S01012701. Following differing views put forward by the applicant and interested parties as to whether data zone S0102701 included Quarter, the Committee carried out further research by accessing data zone information on the internet and concluded that not all of data zone S01012701 was shown on the map and that it did not include Quarter but did in fact include part of Low Waters in Hamilton. The Committee therefore made an allowance for that by reducing the population figure by a third.
- 14.2.5.** Likewise, with future housing developments, the Committee took into account evidence of houses built since the data was finalised and considered the additional 151 houses which had been granted planning permission earlier in 2022 and noted that they were due to be built over a period of five years. Taking into account these "known fixed/firm plans for the development and/or expansion of new centres of population e.g. new or developing housing estates" the Committee was of the view that no evidence had been submitted that existing services could not accommodate an additional 30 houses per year (66 additional population). No further evidence of anticipated future developments was submitted.

Accordingly, the Committee calculated the current population based on 2020 figures to be as shown below:

S01012701: $1352 \times \frac{2}{3} = 901.33$ (1/3 deducted to allow for the part of S01012701 that lies outside the applicant's neighbourhood)

S01012702: 1049

To these figures the Committee added 70×2.13 (avg occupancy rate South Lanarkshire) to reflect the 70 houses completed in 2021 and allowed for the first 30 of the 151 houses approved to be occupied within a year.

$900 + 1049 + 149 + 64 = 2162$

- 14.2.6.** After consideration, the Committee agreed that the neighbourhood defined by the Applicant in their Form A1 was logical for the purpose of considering the application. This being the area bounded by:

North: Avon Water until it meets the M74 motorway

West: Avon Water

South: Council boundary of Avon Water, unnamed road to Carlisle Road, Lanark Road to Merryton Farm Cottage, then farmland until it meets the M74 motorway

East: M74 motorway;

- 14.2.7.** The Committee noted that only 3.95% (24) of respondents to the Joint Consultation questionnaire did not agree that the neighbourhood defined by the Applicant represented the area that would be served by the proposed pharmacy.

14.3. Adequacy of existing provision of pharmaceutical services and necessity or desirability

- 14.3.1.** Having reached a conclusion as to the defined neighbourhood, the Committee was then required to consider the adequacy of pharmaceutical services in and 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.

- 14.3.2.** The Committee recognised that there were no existing pharmaceutical or medical services within the neighbourhood defined and was therefore obliged to focus on the range and adequacy of pharmaceutical services into the neighbourhood from the eleven existing pharmacies in the nearby towns of Hamilton and Larkhall:

14.3.3. Pharmacy Table

Lloyds Pharmacy Ltd, t/a Lloyds Pharmacy, 33 Burnbank Road, Hamilton, ML3 9AA
Lloyds Pharmacy Ltd, t/a Lloyds Pharmacy, 8 Quarry Place, Hamilton, ML3 7BB
Lloyds Pharmacy Ltd, t/a Lloyds Pharmacy, 57 Portland Place, Hamilton, ML3 7LA
Boots UK Ltd, t/a your local Boots pharmacy, 9 Mill Road, Hamilton, ML3 8AA
Boots UK Ltd, t/a your local Boots pharmacy, Unit 2, 1 Douglas Street, Hamilton, ML3 6BP
WEB Pharmacy Ltd, t/a Right Medicine Pharmacy, 26 Brandon Street, Hamilton, ML3 6AB
Boots Chemist Ltd, 44 Regent Way, Hamilton, ML3 7DZ
Lloyds Pharmacy Ltd, t/a Lloydspharmacy, 78 Union Street, Larkhall, ML9 1DR
Bestway National Chemists Ltd, t/a Well Pharmacy, 102 Union Street, Larkhall, ML9 1EF
Boots UK Ltd, t/a your local Boots pharmacy, 141 Union Street, Larkhall, ML9 1EE
your local Boots pharmacy, 71/77 Union Street, Larkhall, ML9 1DZ
Not on Map
Lloyds Pharmacy Ltd, t/a Lloyds Pharmacy, 15 Burnbank Centre, Hamilton, ML3 0NQ
Boots UK Ltd, t/a your local Boots pharmacy, 7 Burnbank Centre, Hamilton, ML3 9HH
Boots UK Ltd, t/a your local Boots pharmacy, 113 Wellhall Road, Hamilton, ML3 9XN

14.3.4. The Committee noted that the Applicant highlighted the transient population that goes through Ferniegair to visit Chatelherault Country Park, which they estimated at some 780,000 people per year and that it was relevant to take that population into account in determining the application. The Committee discussed this issue because the regulations require them to look at the transient population as well as the fixed one but there is no definition of what constitutes transient in the regulations.

14.3.5. In fulfilling its obligation to consider the likely demand for pharmaceutical services in the neighbourhood from both the resident and any transient population the Committee therefore considered what would generally be understood by transient and took a common sense view that transient, in those terms, meant people who came into the neighbourhood on a regular basis to work or to shop but that the word transient would not normally include occasional visitors or tourists to a major attraction such as the Country Park. The applicant specifically excluded employees in her definition of the transient population. The Committee took the view that a visit to the park by those who did not live in the neighbourhood was not likely to form part of their daily routine and that any minor issue such as a headache encountered while visiting could be addressed by over the counter medication from the Co-Op shop. Any major athletic event would have bespoke first aid cover and while it was possible that advice would be sought for a minor injury the numbers involved would not have a discernible impact on demand for pharmaceutical services particularly given that visitors to the park would largely visit outwith opening hours of the pharmacy. In addition, the Committee was of the view that visitors to the Park - often in cars - were unlikely to go out of their way to visit a pharmacy outside of the Park and less

likely to visit for one of the core services provided by that pharmacy. The Committee therefore decided that any transient population did not require specific further consideration.

14.3.6. The Committee discussed all the issues that had arisen out of the written and verbal evidence and found that the local support for a new pharmacy, expressed via the CAR, letters from four medical practices, and letters from two local political representatives, all related primarily to one of convenience and benefit for a small population and that there was little, if any, substantial evidence of an inadequate service being provided to the neighbourhood population from the existing pharmacies outwith the neighbourhood. The Committee's interrogation of the comments made is considered in more detail in its analysis of the CAR. People living in that neighbourhood were of higher income levels, were not deprived, were very mobile and were used to getting the majority of all their services from either Hamilton or Larkhall.

14.3.7. The Committee was mindful of the information provided by Mr Jamieson in his representation:

2011 Census data:

Car ownership: 84% of households have access to a private vehicle. 39% of households have access to two or more vehicles which is significantly higher than the national average (Scotland – 69.5% have access to a vehicle – 27% have access to two or more vehicles)

Home ownership: 75% of households are owner occupied (with or without a mortgage). 9% are socially rented, the remainder being privately rented. (Scotland – 62% owned and 25% rented)

General Health: 85% of residents rate their health as good or very good and only 4% rate their general health as bad or very bad which indicates better levels of health than the national average. (Scotland – 82% good/very good and 5.6% bad/very bad)

14.3.8. The Committee also questioned all the interested parties on the potential impact on their businesses of a new pharmacy in Ferniegair. Each one emphasised the existing national shortage of pharmaceutical staff and estimated that if the application was successful, then it would definitely have an impact on their ability to maintain existing service and staffing levels into the future. The Committee was aware that they had to bear the factor of securing and maintaining an adequate pharmaceutical service in mind.

14.4. Existing Pharmaceutical Services

14.4.1. The Committee acknowledged that there were currently no pharmaceutical services provided within the defined neighbourhood. The Committee noted that each of the 11 pharmacies in Hamilton and Larkhall provided all core pharmaceutical services, along with a range of additional services. Further the Committee was satisfied that this information was confirmed and provided to all parties attending the hearing via the report on the range of pharmaceutical

services provided by existing pharmaceutical contractors within the neighbouring towns of Hamilton and Larkhall. Indeed this report provides an update to the list of services provided within those areas as contained within the Board's Pharmaceutical Care Services Plan.

- 14.4.2.** The Committee considered the comments made by the Applicant around the perceived increase in population resident within the neighbourhood and their reliance on the transient population. The Committee however opined that their analysis of the data zones, recognition of the anticipated completion dates of the proposed housing developments, alongside their common sense view of what a transient population was, all as outlined in paragraph 14.3.5 showed that there was no immediate concern over increased demand for pharmaceutical services which could not be absorbed by the existing pharmacies in Hamilton and Larkhall. The Committee noted that all three interested parties were clear that they had the capacity to cope with the likely increased demand. The Committee further noted that WEB Pharmacy had relocated to larger premises just over a year ago to provide a larger dispensing area and three consultation rooms. The existing pharmacies indicated that they were not only able to cope but would be adversely affected should the application be granted.
- 14.4.3.** Accordingly, the Committee considered that the Applicant had provided no firm evidence to show that the current pharmaceutical network would not be able to adapt to cope with any additional population that might happen in the future.
- 14.4.4.** The Committee discussed the Applicant's assertion that the Boots and Lloyds pharmacies in Hamilton and Larkhall regularly experienced difficulties in securing stock to allow them to fulfil every prescription fully at the initial presentation. The Applicant had further stated that this was due to Boots' and Lloyds' reliance on one single supplier. However, both Boots and Lloyds confirmed that they had a number of suppliers and indicated that some of those suppliers were also used by the independent pharmacies.
- 14.4.5.** The Committee noted that the applicant stated that they used Phoenix, Alliance, AAH, Ethigen, OTC Direct and Bestway. In addition, they also held accounts with Aver and Target which they can use as a back-up. Mr Wicks advised that WEB was part of this buying group also.
- 14.4.6.** Lloyds advised that they used Alliance, AAH, Ethigen, and also AAH Specials. Boots stated that they used three main suppliers but did not name them.
- 14.4.7.** The Committee considered the Applicant's claim however was mindful that WEB Pharmacy Ltd also experienced stock shortages despite using the same supplier that the Applicant uses currently and proposes to continue to use should the application be granted. The Committee was also mindful of the professional advice available from the Pharmacist members of the Committee who confirmed that national shortages occurred from time to time and that these affected every pharmacy's ability to secure some medications.
- 14.4.8.** The Committee was further aware that in some instances GP practices continued to prescribe items which were subject to shortage, despite intervention

from the Primary Care prescribing support function. In such instances this could result in a delay for patients.

- 14.4.9.** The Committee was also aware that supply issues were prevalent in these uncertain times, not only in pharmacy, but in many other areas. The Applicant had suggested that their access to multiple suppliers would alleviate supply issues for patients, however given the current climate, the increase in national shortages, and the verbal evidence provided during the hearing the Committee did not agree that the Applicant's proposed business would be in a demonstrably better position than the existing providers. The Committee noted that Lloyds and Boots had access to more than one supplier as stated above. The Committee also noted that pharmacists in different pharmacies worked together to fulfil prescriptions. After detailed discussion and consideration, the Committee determined that the difficulties being experienced in securing stock were not particular to Boots UK Ltd and Lloyds Pharmacy Ltd and did not support a conclusion that the existing services were inadequate.
- 14.4.10.** In respect of the Applicant's reference to the statistical returns on complaints the Committee was advised by the Pharmacist members of the Committee, that this differed because of the different methods operated by the interested parties in completing the statutory return to NHS Lanarkshire. The Committee noted that many of the complaints had been dealt with internally and to the customer's satisfaction, and that most of the complaints did not refer to the core services provided by those pharmacies.
- 14.4.11.** The Committee noted the explanation provided by Mr Arnott in relation to the high number of complaints recorded in relation to accuracy of dispensing/medication. Mr Arnott stated that Lloyds Pharmacy recorded in their returns any discrepancy picked up at the stage of the Pharmacist's check for training and improvement purposes whether or not any complaint was made. The applicant referred to two complaints in her summing up. The Committee noted that the information submitted in relation to complaints did not record the pharmacies concerned and, in any event, neither complaint was upheld. After detailed discussion and consideration, the Committee determined that the information in the quarterly complaints returns did not support a conclusion that the existing services were inadequate.
- 14.4.12.** The Applicant placed emphasis in their presentation on pharmacy closures and the recent increase in the number of such closures. The Committee considered the Applicant's submission and noted that pharmacy closures had increased due to a number of factors associated with the COVID-19 pandemic including the requirement for short term closures to meet additional infection protection control and hygiene requirements and impact of COVID-19 infection and isolation on staffing levels within pharmacies. In response to this situation NHS Lanarkshire had invited pharmacies to apply to close on certain Saturdays to allow resources to be effectively deployed and ensure accessible Saturday cover in and to all areas. Some of the interested parties had made such applications. The Committee concluded that there was no evidence of non-reporting or under-reporting of such closures, nor that Lloyds Pharmacy Ltd or Boots UK Ltd had elected to seek closures in other areas as a result of the application. As detailed

in the questions at the hearing the pharmacist members of the Committee advised that the last two and a half years had been exceptional in the pressures faced and that it was not anticipated that these circumstances would subsist. The Committee determined that the evidence presented in this regard did not demonstrate inadequacy of service.

- 14.4.13.** The Committee was of the view that the Applicant's case sought to demonstrate inadequacy by focussing on non-core services e.g. delivery services and availability of dosette boxes as indeed did the detailed responses in the CAR. The advice and information on the delivery of core services was available to the Committee independent of the interested parties and Applicant from the pharmacist members of the Committee.
- 14.4.14.** The Committee carefully considered the applicant's submissions as to adequacy of the services provided by pharmacies which currently provide services to the neighbourhood having regard to the applicant's experience visiting these pharmacies. It noted that the provision of dosette boxes and delivery were not core services and did not consider that there was any evidence of excessive waits for prescriptions to be fulfilled. Detailed consideration of the Pharmacy First experience in relation to an occasional skin irritation was undertaken with advice from the Pharmacist members of the Committee. The pharmacist members advised that the responses were reasonable and the Committee concluded that the applicants had not provided evidence that the Pharmacy First services currently provided were inadequate.
- 14.4.15.** The Committee noted the Applicant's submissions in relation to the absence of free parking immediately adjacent to the number of existing pharmacies and that Boots in Palace Ground Retail Park did not provide pharmacy services. From the submissions made at the hearing and their own site visits to the existing pharmacies the Committee concluded that no evidence had been submitted that demonstrated inadequacy of service due to the availability of parking taking into account the choice of pharmacies
- 14.4.16.** Likewise, the letters of support that the applicant submitted from local Medical Practices related more to the convenience of having an additional pharmacy to assist with patients than to any complaints about core services currently available to the neighbourhood. The Committee considered that the letters did not detail or outline any exact or specific issues, merely that they supported an increase in pharmaceutical services.
- 14.4.17.** The Applicant had not in the Committee's opinion provided evidence to show that existing services were inadequate. The resident population enjoyed easy access to services provided by the existing 11 pharmacies in the neighbouring towns of Hamilton and Larkhall. This provided the resident population of the neighbourhood with a level of choice. The Applicant had referred to the increase in population from the new residential developments and a transient population to seek to establish that the existing pharmacy network could not cope. The Committee opined that this was an entirely theoretical argument of inadequacy and that there was no evidence that existing services could not accommodate the increase in population brought by 30 houses per year for five years nor

occasional demand from park visitors and was not based on any factual evidence around existing services.

14.5. Consultation Analysis Report

14.5.1. The Committee then went on to consider some of the issues raised in the Consultation Analysis Report (CAR).

14.5.2. The Committee noted that there were 607 responses to the Consultation.

14.5.3. The Committee noted there was no detailed commentary on the responses to Question 3 *“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?”* within the CAR, so the Committee relied on the detailed comments in response to Question 4 *“Do you think that the current provision of pharmaceutical services has any gaps or deficiencies?”* and 5. *“Ferniegair Pharmacy Ltd is proposing to provide the services listed below. Do you think the proposed pharmacy needs to open in order for people in the neighbourhood to have adequate access to these services?”*

The lack of commentary did not pose any difficulty to the Committee as the comments on those questions were very similar, indeed somewhat repetitive, and as expected the different parties to the hearing extracted those comments that best suited their arguments.

14.5.4. The Committee noted that 36.5% (192 of 526) of respondents who answered Question 3 considered that current services were adequate.

14.5.5. Q4. *“Do you think that the current provision of pharmaceutical services has any gaps or deficiencies?”*

14.5.6. The Committee noted that 57.69% (304 of 527) of respondents who answered Question 4 stated that there were currently gaps and/or deficiencies.

14.5.7. Q5. *“Ferniegair Pharmacy is proposing to provide the services listed below. Do you think the proposed pharmacy needs to open in order for people in the neighbourhood to have adequate pharmaceutical services?”*

14.5.8. The Committee noted that 74.85% (381 of 509) of respondents who answered Question 5 considered that a new pharmacy was needed for people to have adequate access to the dispensing of NHS prescriptions.

The applicant highlighted that respondents had been unable to make comments in relation to question 3. The applicant and the interested parties put forward different interpretations of the data and comments in relation to adequacy of services and any gaps or deficiencies. The Committee therefore analysed in detail the comments made in relation to questions 4 and 5 and determined that a clear majority of respondents commenting in favour of the provision of a pharmacy at this location had focussed on convenience, ease, desirability, the

requirement to travel to access pharmaceutical services, the growth of Ferniegair and a desire for any additional service within Ferniegair. The phrase “easier to access” is repeated regularly. Other comments refer to a pharmacy being a valuable addition and of benefit to the whole community. On the other hand some respondents indicate that existing services are easily accessible and that a pharmacy would not be their first choice of additional service. There is some reference to difficulty in accessing some pharmaceutical services but a lack of specific examples.

- 14.5.9.** The Committee took the responses to each of the three questions fully into account and examined them for clear evidence of any inadequacies. As found to be the case, many of the CAR comments dealt in great detail with convenience and ease of access and the benefits to a community and made very little mention at all of specific examples of an inadequate service. Indeed, members of the Committee questioned all of the interested parties at considerable length on their current services, on their ability to cope with an increase in demand and on the complaints that had been registered against them during the past five years.
- 14.5.10.** The Committee analysed the responses to Questions 6 to 9. The Committee noted that the responses to Question 6 indicated that Sunday opening was desirable however it was mindful that Sunday opening in Larkhall had ceased due to lack of demand. The Committee considered that the responses to Questions 7 to 9 had been fully discussed as part of the hearing.
- 14.5.11.** Q10. *“Do you support the proposal to open a new pharmacy at Unit 3, Allanton Gardens, Ferniegair, ML3 7GQ?”*
- 14.5.12.** The Committee noted that the majority of respondents were in favour of the proposal to open an additional pharmacy 90.71% (449/495) 8.28% were not (41/495). The Committee expressed some concern that 112 of the respondents had not answered this question and “skipped” past what was, in the Committee’s opinion an important consideration. The Committee noted that a further notional examination of the responses provided 60% (44) in favour and 40% (28) against when convenience and indeterminate answers were not included. Of the responses in favour the majority referred to the provision of a pharmacy as being a good idea or generally needed rather than identifying any perceived inadequacies of the existing service in and to the neighbourhood.
- 14.5.13.** Q11. It was noted that all responses were from individuals
- 14.5.14.** In the Committee’s opinion the views of the respondents were relatively mixed, and that there was a high level of the text explanations that related to convenience rather than gaps in the service.
- 14.5.15.** The Committee had heard a considerable amount of anecdotal evidence on the perceived issues relating to the current provision of pharmaceutical services caused by planned and unplanned closures, supply issues and pharmacist staffing issues. The Committee was also asked to consider the need for pharmaceutical services in the neighbourhood for the resident and transient population. The Committee noted from presentations and questions made

during the open part of the hearing, that the majority of the issues were not specific to the pharmaceutical provision provided by the existing pharmacies in the neighbouring towns of Hamilton and Larkhall.

Accordingly, following thorough consideration the Committee concluded that the CAR did not raise any issues which had not been fully discussed and addressed at the hearing, and that the Committee was fully satisfied that due consideration had been given to any issues raised within the CAR.

15. DECISION

Mr Hanif and Mr MacKenzie withdrew from the meeting room.

- 15.1.** Following the withdrawal of the pharmacist members in accordance with the rules of procedure on applications contained within Paragraph 6, Schedule 4 of the National Health Service (Pharmaceutical Services) (Scotland) Regulations 2009, as amended, the voting members were satisfied that the Committee had taken all of the statutory factors into account and, for the reasons set out above, considered that the pharmaceutical service provided to the neighbourhood was adequate.
- 15.2.** Accordingly, the decision of the Committee was unanimous that the establishment of a new pharmacy at Unit 3, Allanton Gardens, Ferniegair, ML3 7GQ 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, of the National Health Service (Pharmaceutical Services) (Scotland) Regulations 2009, as amended.
- 15.3.** Mr Hanif and Mr MacKenzie were requested to return to the meeting, and informed of the decision of the Committee

The meeting closed at 1725 hours