

PHARMACY PRACTICES COMMITTEE

Note of a Meeting held on

**Tuesday 28th February 2012,
Eglinton House, Ailsa Hospital, Ayr**

Present

Mrs K Darwent	Chair
Mr W McConnell	Lay Member
Canon M McManus	Lay Member
Mrs R Miller	Lay Member
Ms D Lamprell	Pharmacist Member
Mrs J Gallagher	Pharmacist Member
Mr W Stevenson	Pharmacist Member

In Attendance

Mr D Rowland	Head of Primary Care Development
Mrs A Shaw	Primary Care Manager - Pharmacy
Mrs M Scott	Primary Care Administrator - Pharmacy
Mr A Thomas	Lead Pharmacist – Public Health and Community

1. Apologies

Mr Devenish submitted his apologies due to family illness.

2. Application For Inclusion in the Pharmaceutical List

Case No: PPC 115

Mr Kismat Pall, 90 Main Street, Ochiltree

The Committee was asked to consider an application submitted by Mr Kismat Pall to provide general pharmaceutical services from premises situated at 90 Main Street, Ochiltree under Regulation 5(10) of the National Health Service (Pharmaceutical Services) (Scotland) Regulations 2009 as amended.

The Committee was required to determine whether the granting of the application was necessary or desirable to secure the adequate provision of pharmaceutical services in the neighbourhood in which the Applicant's proposed premises were located.

The hearing was convened under paragraph 3(2) of Schedule 3 to the National Health Service (Pharmaceutical Services) (Scotland) Regulations 2009 as amended ("the Regulations"). In terms of this paragraph, the PPC "shall determine an application in such a manner as

it thinks fit". In terms of Regulation 5(10) of the Regulations, the question for the PPC is whether "the provision of pharmaceutical services at the premises named in the application is necessary or desirable 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".

The Chair asked if any member of the Committee had an interest to declare. Mrs Miller advised that her daughter in law is a pharmacist employed by Lloyds Pharmacy in one of their branches in Ayr. This was felt not to constitute a conflict of interest.

The applicant and interested party joined the meeting.

The Chair invited the Committee and Board officers to introduce themselves.

The Applicant was represented in person by Mr Kismat Pall ("the Applicant"). The Interested Parties who had submitted written representations during the consultation period were Lloyds Pharmacy and the Area Pharmaceutical Professional Committee. The Area Pharmaceutical Professional Committee chose not to attend the hearing. Lloyds Pharmacy were represented by Mr Mark Malone ("the interested party")

The Chair asked the Applicant and the Interested Party to confirm that they were not attending the Committee in the capacity of solicitor, counsel or paid advocate. They confirmed that they were not.

Prior to the hearing, the Committee had as a group, visited the local area, in which the Applicant's proposed premises are sited, the existing pharmacies, GP surgeries and facilities in the immediate area and surrounding areas of Ochiltree as detailed in appendix (a) which gives details of the route taken and places visited by the Committee during the site visit.

The Committee noted that the premises were constructed and were subject to conditional contract, dependant on the Committee's decision on the application.

The procedure adopted by the Committee at the hearing was that the Chair asked the Applicant to make his submission. There followed the opportunity for the Interested Parties and the Committee to ask questions. The Interested Party would then make his submission. There followed the opportunity for the Applicant and the Committee to ask questions of the Interested Parties in turn. The Interested Parties and the

Applicant were then given the opportunity to sum up.

3. The Applicant's Case

The applicant was invited to present his case. The applicant provided the note taker with a copy of his presentation notes which he used to form his presentation. These notes have been replicated in the following paragraphs and represent the applicant's views and opinions.

The Applicants Presentation:-

Ochiltree is a village in East Ayrshire, located west of the larger village of Auchinleck. It is surrounded by large amounts of green area and is in my opinion isolated. It has an approximate population of 1200 people. It has had an increase in population size over the past few years due to a new estate being built on the west side of the village. Also according to local government plans detailed by East Ayrshire council, more sites around Ochiltree have been earmarked to have homes built upon them and therefore over the next few years the population will further increase. The isolated location that Ochiltree occupies has surrounding it a further rural community which would add to the population accessing services in the village rather than travelling to further out villages.

The residents deserve to have an essential health service like a pharmacy available to them. Other villages comparable in size and population have core amenities necessary for day to day convenience. At the moment there is only limited amenities, namely two general stores, one with a post office, bakers, butchers, pub and primary school. A pharmacy will complement the existing amenities and provide residents with a service locally. All in all making Ochiltree a more attractive place to live, benefitting the plans that East Ayrshire council has for the occupation of future estates to be built around the area.

Moreover, residents currently only have access to a doctor on Tuesday and Friday for only one hour. In my opinion it would be very difficult to get an appointment within this time period. Therefore, forcing most residents to make appointments at a surgery in either Auchinleck or Cumnock. This would be costly and time consuming for elderly and parents with young children in particular and indeed for all residents.

A pharmacy in Ochiltree at the proposed premises will provide easy, local access and essential healthcare provision. It would become the central hub for healthcare provision within the village. There would be no more need to travel miles in either direction in order to see a doctor or to buy over the counter (OTC) medicines. A pharmacy would allow minor ailments requests, and OTC medicines and other health products to be

accessed or bought. In consequence filtering the patients who require a doctors appointment and those who could be best helped by the pharmacist. This would be in line with the Scottish executives pledge (which is detailed in the Right Medicine: A Strategy for Pharmaceutical Care In Scotland) to utilise the services pharmacies provide in order to save on the doctors and nurses workload and to make better use of pharmacist expertise.

Furthermore, the chosen premises is large enough, approx (4500 sq ft) so that it can provide designated areas for consultation, health promotion and sections for self selection for health products. Also discussions have been held with shopfitters and the East Ayrshire planning department so that premises can be made fit for purpose. All potential pitfalls due to the premises being a B listed building with historic value have been examined and successfully negotiated. There would be no issues regarding change of use or green cross signage outside pharmacy. Also disability inclusion will be provided. The building itself will be well maintained, security and CCTV will be installed as well. Internally it is in fairly good repair it already has disabled toilets and some good fittings which will be retained in order to save cost. So in this respect hopefully once the health board has granted permission then it would not take long it would not take long to establish operational premises.

Therefore, if it is a question of viability of having a pharmacy within Ochiltree. Then an assessment has been done to keep all start up costs to lowest level. Including purchase of property and any internal alterations. Due to my family members being able to help with building standards and joinery work all renovation will be kept cost effective. Also a wide range of services will be offered in order to achieve adequate remuneration and further bolster the viability of the business. Included will be Minor Ailment Service, Public Health Promotion, Weight Management Program, Smoking Cessation, Flu Vaccination etc and any other health board initiative which the pharmacy can get involved in. Also there is plans to hire out space within the pharmacy to other practitioners like a chiropodist for instance.

As detailed on the application I will be the pharmacist within this enterprise and I will be the driving force behind providing an efficient community based service which benefits the local residents and yet allows me to satisfy my own professional development and want, to run a small business serving and providing the local community a personal pharmacy service. Rather than what is provided at the moment which is a basic delivery service by one of the large multiple chains.

Residents will get an opportunity to speak to a pharmacist face to face without the need to travel miles made more difficult in cold weather. They

will be able to ask advice at the point of collection. In addition, the pharmacy will also provide some opportunity for employment within the village.

Finally, I have worked in community pharmacy for the past 14 years. In large multiples and independents and my conclusion is that a pharmacy provides an essential point of contact in small communities especially for the elderly for whom it may be the only chance to interact with other people. Therefore, I urge the panel to grant permission for the pharmacy so I can be given an opportunity to practice my profession in the way it was intended and because I feel passionate about providing a service that will contribute a great deal to a small village like Ochiltree and which will become one the communities strongest assets and allow the village to thrive.

Thank you for listening.

The Chair thanked the applicant for his presentation in support of his application and invited the Interested Party and then members of the Committee to ask questions of him.

Questions from the Interested Party present to the Applicant

The interested party had no questions for the applicant.

Questions from the Committee to the Applicant

Mr McConnell asked the applicant if he would accept that the distances quoted in his application at various points were incorrect, giving examples of Auchinleck which is noted as being a mile from Ochiltree when the actual distance is 3 miles and Drongan which is quoted as being 2 ½ miles from Ochiltree when in fact it is nearer 5 miles from Ochiltree.

The Applicant responded that the distances to Auchinleck, Drongan and Cumnock which he had provided in his application may not be exact but that he had made it as accurate as possible from the information he had gathered for his research prior to submitting his application.

Mr McConnell asked the applicant if he would agree that the population figure he had given in his application of 1200 was perhaps inaccurate and suggested that this figure is probably more accurately in the region of 900 as the new housing in the village is not included in the data zone population figure of 691 and asked the applicant if he would accept this.

The applicant replied that he would accept the approximate figure of 900

but added that rural communities would increase the population figures.

Canon McManus asked the applicant about the public meeting which was organised by the Ochiltree Community Council which the applicant had attended and asked for feedback from the meeting. The applicant stated that there was a fairly large turnout but that fears were raised over the methadone programme which he felt were unfounded. The applicant believed that there was a concerted plan to speak about methadone at the meeting and therefore all the questions directed to him were about that. He also believed that members of the public wanted clarification that the methadone programme would not be offered. The applicant felt that regardless of what he said, some people were happy with the proposal and some were not. He added that minutes of the meeting recording his responses to questions raised were supposed to be made available but to date he had not received them.

Canon McManus asked the applicant if he felt that he could have done more at the meeting to dispel the fears of the local community.

The applicant replied that he didn't think there was anything he could have said at the meeting which would have dispelled these fears although he had tried to explain the full range of services which would be offered in the proposed new pharmacy to those present at the meeting.

Canon McManus questioned the applicant on his experience of the meeting by asking the applicant if he felt that he would still like to open a community pharmacy in Ochiltree.

The applicant responded that he felt that he would still like to open in Ochiltree and added that there was space in the premises should he decide to reside there too which would allay one of the concerns of the local residents, although this was not definite at the moment. He added that as had been noted in the public consultation response from a local councillor, a lot of people did not understand the methadone programme.

Mrs Miller had no questions for the applicant.

Mr Stevenson asked if the applicant was going to be able to overcome the steps at the front of the building in relation to DDA

The applicant advised that discussions were ongoing with regard to making the proposed premises DDA compliant, but there was also a side entrance which could be used for DDA access. The applicant further advised that disabled toilet facilities are already installed within the premises.

Mrs Gallagher asked the applicant if he was a qualified independent prescriber

The applicant replied that he was not currently a qualified independent prescriber and also that he was not currently undertaking training to become an Independent Prescriber.

Mrs Gallagher asked the applicant if he felt that the establishment of a community pharmacy in Ochiltree was based on need or convenience and whether the applicant felt that the pharmaceutical service provided to Ochiltree from outwith the village was adequate.

The applicant responded that he did not think that there was adequate pharmaceutical service provided to Ochiltree from outwith the village as there was only a prescription delivery service available and this did not allow for any questions and/or consultations that patients may have. He added that the majority of villagers whom he had spoken to agreed with this.

Mrs Gallagher then asked the applicant if the fact that the people of Ochiltree are currently accessing pharmaceutical services in Auchinleck or Cumnock, possibly while accessing their GP practice indicates that these pharmacies provide adequate service provision.

The applicant said no, that there were very few amenities within the village and he felt that a pharmacy was a core service and that everyone deserved to be able to access this service as travel especially in winter was not always possible. The applicant also mentioned that by having a pharmacy in the village patients would be able to access the Minor Ailments Service which may prevent them from having to see their GP.

Ms Lamprell asked the applicant to elaborate on his statement that it could be difficult for some patients to get to their GP practice in an emergency.

The applicant replied that to someone with no health knowledge the simplest of things could constitute an emergency and for patients to be able to access a pharmacy in the village and receive the support or advice they need would be of benefit to them and that he would refer onto the appropriate service e.g. GP or ambulance if needed.

Mrs Darwent asked the applicant to confirm that his neighbourhood was the village of Ochiltree only and not including any other surrounding houses.

The applicant confirmed that his definition of the neighbourhood was

Ochiltree village only.

Mrs Darwent asked if the applicant had any information on walking routes and bus services into and out of the area as Ochiltree is described in the application as isolated.

The applicant responded that there is semi decent paving allowing Ochiltree residents to walk to the neighbouring village of Auchinleck a few miles away and there is a bus service available with a fairly constant service.

Mr McConnell asked the applicant if he had researched the long term viability of the proposed pharmacy

The applicant advised that viability of the business was long term and that he would be willing to take a minimal wage to finance the project but that it was more his need to satisfy his own professional development by providing all the services that a pharmacist can provide including independent prescribing which he would intend to do in order to provide the service to the residents of the village. The Applicant added that if he provided the only pharmaceutical service in the village, then people would use it and that he is not looking to make a large amount of money but to offer varied services for all to use.

4. The Interested Party's Case

The interested party was invited to present his case. The interested party provided the note taker with a copy of his presentation notes which he used to form his presentation. These notes have been replicated in the following paragraphs and represent the interested party's views and opinions.

The Interested Party thanked the Committee for the opportunity to submit comments as part of the consideration of the application for inclusion in the pharmaceutical list in Ochiltree.

The applicant agreed that the neighbourhood was Ochiltree.

The Health Board has confirmed that the population is only 687 in 2010. We would not dispute this. This is therefore a very small community. This is an affluent and mobile community.

We note there is a GP surgery in the village however; it is only a branch surgery which opens only at very limited times during the week. Most people therefore, are accustomed to accessing primary care services in the adjacent settlements such as Auchinleck.

In his application the applicant suggests that there is support for his application however, from the bundle of papers it appears this is far from the case.

There has been a considerable response by the local community to this application for a new pharmacy. For so many people to write in opposition to a new pharmacy opening is in our opinion a strong indicator that it is not required and that adequate pharmaceutical services are provided.

Appendix 2A is a response to the advert by the applicant by a local resident who says they would be extremely unhappy at a pharmacy opening and comments that pharmaceutical services are already provided by pharmacies from adjacent areas. There is no mention of any dissatisfaction with current arrangements. The resident also mentions they will be contacting the council to express their disapproval.

Appendix 2B refers to residents having concern about the proposal.

Appendix 2C confirms that Ochiltree is a small friendly community which enjoys low crime rates. The respondent has significant concerns over safety.

With regard to the public consultation we note the comments made in a letter dated 5th February 2012 that *"the majority of residents attend local surgeries in Auchinleck or Cumnock"*. They go on to say that *"Lloyds pharmacy also provides an excellent range of medicines; they have always fulfilled my prescription while I wait"*. The same resident also has concerns about the conversion of the premises which are a Grade 2 listed building.

A further letter states *"residents of this village have never required to have a pharmacy in the village due to the extremely adequate service provided by both Lloyds and Browns the newsagent"*.

As well as patients being able to access our premises directly we also deliver prescription items to Ochiltree. Residents will tend to leave the village to access most services and on doing so can also access pharmaceutical services. The vast majority of the responses enclosed in the bundle of papers from the local community are strongly opposed to the idea of a pharmacy opening therefore we do not believe the PPC can justify granting a new contract as being necessary or desirable.

The Chair thanked the interested party for his presentation and invited the Applicant and then members of the Committee to ask questions of

him.

Questions from The Applicant to The Interested Party

The Applicant asked the interested party if he felt that by offering a delivery service alone allows customers to ask questions or seek advice at the point of delivery

The interested party stated that if customers using the delivery service had any questions they were able to telephone the pharmacist and speak directly to them.

The applicant asked the interested party if a face to face consultation would not be more beneficial,

The interested party said that if the patient's medication was prescribed by the GP then any queries they had could be raised with the GP, but that a telephone call to a pharmacist could be reassuring.

Questions from the Committee to the Interested Party

Mr McConnell asked if the interested party had experienced any problems with leaving prescriptions at the newsagents for collection

The interested party confirmed that arrangements for leaving and collecting prescriptions from the newsagent shop were long standing. He was unaware of any complaints regarding the arrangement.

Mrs Miller enquired about the scale of the service

The interested party said that he was unsure of the actual activity but around 600 items per month were generated from prescriptions with an Ochiltree post code.

Canon McManus asked the interested party if he agreed that it would be better for a patient to be able to ask the pharmacist regarding any changes to medication rather than the newsagent.

The interested party responded that obviously it would be better for the patient to pick up the phone and ask the pharmacist rather than the newsagent.

Mr Stevenson asked if the interested party provide a delivery service to Ochiltree.

The interested party confirmed that their delivery service to Ochiltree was

offered and that it was better utilised than the prescription collection/delivery from the local newsagent.

Mrs Gallagher asked if the people who request deliveries phone the pharmacy to request delivery.

The interested party confirmed that telephone requests from patients for delivery of medicines were usually repeat prescriptions. He also thought that if any of these patients had concerns about their medications they would telephone the pharmacist.

4. Summing Up

The Applicant and Interested Party were then given the opportunity to sum up.

The interested party summed up by saying that
"Local residents were opposed to the application and I hope that the PPC would take on board the comments made in my presentation".

The applicant summed up by saying that
"Although there has been some negativity by a minority of people from the village their fears are appreciated. However, the fact is that a pharmacy located in the village will have a positive effect now and for further developments in the future and the majority of people as the petition proves want this to happen. At the moment Lloyds pharmacy hold a monopoly in the nearby villages and of course they would not like that to be jeopardised so I therefore understand their attendance today, but it does not mean that a pharmacy in Ochiltree which is 3 miles away and is operated with different suppliers and a different management style to Lloyds is not desirable and in fact it gives people a choice which is very important. Finally, I would pose a question to the panel and ask them to consider the chicken and egg scenario, basically meaning that although Ochiltree has a small population today, and if the pharmacy is refused on these grounds then it is less likely for the village to grow due to lack of essential amenities, however, if it is granted, then more people would want to stay in the village and take up the new housing intended by the council and hence the population would rise. Therefore, the health needs of the growing population will be met by the granting of this application. Once again I'm grateful to have had this opportunity to present my proposal today".

Mrs Darwent asked the applicant and the interested party if they felt that they had had a fair hearing and both parties confirmed that they had.

5. Decision

Having considered the evidence presented to it, and its observations from the site visit, the Committee had to decide firstly, the question of the neighbourhood in which the premises to which the application related, were located.

The Committee considered the neighbourhood put forward by the Applicant, the Interested Parties, and from the APPC in relation to the application, as well as comments received from the public consultation. The Committee took into consideration, the Committee's obligations in terms of the Equality Act 2010 – the need to eliminate unlawful discrimination, harassment and victimisation and other conduct prohibited by the Act; advance equality of opportunity between people who share a protected characteristic and those who do not; foster good relations between people who share a protected characteristic and those who do not.

Neighbourhood

Taking account of all available evidence, the Committee determined that the neighbourhood should be defined as:

- the neighbourhood as defined by the APPC, i.e. the village of Ochiltree as defined in East Ayrshire Council's local plan and allowing for land zoned for housing development.

Adequacy of Existing Provision of Pharmaceutical Services and Necessity or Desirability

Having reached their decision on the definition of the neighbourhood, the Committee then required to consider the adequacy of pharmaceutical services within that neighbourhood, and whether the granting of the application was necessary or desirable to secure adequate provision of pharmaceutical services in that neighbourhood.

It was noted that there were no indications in the public consultation responses that pharmacy services to the neighbourhood were not good.. It was also noted that the local councillor indicated that a service in the village would be good.

The Committee noted that within the defined neighbourhood there were no pharmacies. All pharmaceutical services to the neighbourhood were provided from pharmacies outwith the neighbourhood. The Committee considered that the level of existing services to and within the defined neighbourhood provided unsatisfactory access to pharmaceutical services for those resident in the neighbourhood.

Further the Committee was satisfied that the evidence produced by the Applicant (and from supporting information supplied to the committee) had demonstrated that there was no safe walking route to the neighbouring villages of Auchinleck or Cumnock. It was acknowledged that there was a bus service to the nearest pharmacy.

Having regard to the overall services provided by the existing contractors within the vicinity of the proposed pharmacy, the number of prescriptions dispensed by those contractors in the preceding six months, and the level of service provided by those contractors to the neighbourhood, the Committee agreed that the neighbourhood was inadequately serviced. By deduction the Committee therefore determined that the provision of Pharmaceutical Services within and into the neighbourhood were inadequate.

As part of it's decision making process the Committee considered the following factors:-

- A prescription collection and delivery service was currently in operation within the village, operating from the newsagents
- Lloyds pharmacy also operated a home delivery service from their pharmacies in the neighbouring villages of Auchinleck and Cumnock
- Whether the provision of these collection and delivery services demonstrate that pharmacy services in the neighbourhood are inadequate
- Mr Malone from Lloyds had indicated that, in his opinion, more use was made of the home delivery service offered by Lloyds than the service from the newsagents
- Face to face service contact with a pharmacist offers the full range of pharmacy services and was better for the patient than either of the delivery options currently on offer
- No current pharmacy provision in the village
- Rising bus and fuel costs
- Statistics showed that 32% of the village population had no car, 45% had one car, 19% had two cars and 5% had 3 cars or more.
- There was no safe walking route from Ochiltree to Auchinleck or Cumnock
- Bus services provided 3 buses per hour on one route and one per hour on another route
- Large number of village residents are over 60 – figure quoted is two and a half per cent above the East Ayrshire average
- Although Ochiltree is not particularly deprived in comparison to other areas in East Ayrshire, it is still a deprived and vulnerable community
- High level of disabled or sick – 9.66% which is higher than both

- the East Ayrshire and Scottish average
- Fifteen per cent of the population are retired
 - Use of Minor Ailments Scheme would be quite valuable in a village environment such as Ochiltree
 - Indication was made in the public consultation that young mothers struggle to go to either of the neighbouring villages to access pharmacy services with young children
 - Concerns of villagers re provision of a methadone service and people accessing this service from outwith the village
 - Disabled access could be an issue but could be resolved by use of the side door and Committee noted that Mr Pall is in discussion with the local council on this issue
 - Small isolated community with little or no passing trade as premises are located away from the main road through the village
 - In a number of households one member may work outwith the village and therefore take the family car to work with them leaving the rest of the family with no access to private transport

In accordance with the statutory procedure the Pharmacist Contractor Members of the Committee, and Board Officers, were excluded from the decision process.

Decided

The PPC was satisfied that the provision of pharmaceutical services at the premises of the Applicant was necessary and desirable in order to secure adequate provision of pharmaceutical services in the neighbourhood in which the premises were located by persons whose names are included in the Pharmaceutical List and in the circumstances, it was the majority decision of the members of the Pharmacy Practices Committee entitled to vote that the application be granted.

Signed: Kirsty Darwent

**Kirsty Darwent
Chair
Pharmacy Practices Committee**

Date: 14/3/12