Application by Dears Pharmacy for inclusion in the pharmaceutical list in respect of the address, Unit 1, New Retail Neighbourhood Parade, Southdale Way, Armadale, EH48 2JS.

The Pharmacy Practices Committee met at 1.30pm on 5 March 2018 to consider the above application in accordance with the National Health Service (Pharmaceutical Services) (Scotland) Regulations 2009, as amended.

Decision of the Pharmacy Practices Committee

The decision of the Committee was that the provision of pharmaceutical services at the premises was neither necessary nor 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 that accordingly the application should not be granted.

Pharmacy Practices Committee

Derek Milligan (Chair)
Julie Blyth (Non-contractor Pharmacist)
John Connolly (Contractor Pharmacist)
Margaret Tait (Lay member)
John Niven (Lay member)

In attendance

Mahyar Nickkho-Amiry (Applicant)
Barrie Dear (Dears Pharmacy, Applicant Support)
Rodney Haugh (Gordon’s Chemist, Interested Party)
Maria Donnelly (Gordon’s Chemist, Interested Party Support)
Balvinder Sagoo (Boots UK Ltd, Interested Party)
Emma Kean (Boots UK Ltd, Interested Party Support)
Tom Arnott (Lloyds Pharmacy, Interested Party)

Susan Summers (Administrator to the Pharmacy Practices Committee)

Application for inclusion in Board’s Pharmaceutical List

1. The Committee convened to consider an application for inclusion in the pharmaceutical list, submitted by Mahyar Nickkho-Amiry in respect of the address, Unit 1, New Retail Neighbourhood Parade, Southdale Way, Armadale, EH48 2JS under Regulation 5(10) of the National Health
Service (Pharmaceutical Services) (Scotland) Regulations 2009 as amended. A copy of the application had been circulated in advance to the Committee and the parties.

2. The Committee had to consider 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.

3. Written representations had been received from Lothian General Practitioners Sub-Committee of the Area Medical Committee; Lloyd’s Pharmacy; Gordon’s Chemist and Boots UK Ltd. The applicant and the interested parties were entitled to comment on the representations received. Copies of the written representations had been circulated in advance to the Committee and the parties.

4. The Committee had before them maps of the area surrounding the proposed premises detailing the location of the nearest pharmacies and GP surgeries, deprivation categories and population density. They had details of the numbers of prescriptions dispensed during the months August 2016 – January 2017 and during June 2017 - Nov 2017 by the pharmacies nearest to the proposed premises and the number of prescriptions they dispensed that were issued from the GP surgeries closest to the premises during the months January 2016 – January 2017. The Committee were also provided with “Pharmacy Profiles” of the nearest pharmacies detailing opening hours, premises facilities and services offered.

5. The hearing was convened under paragraph 3(2) of Schedule 3 to the National Health Services (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 paragraph 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 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.”

6. Prior to the meeting the Committee undertook a site visit. The Committee noted the location of the proposed premises, the pharmacies nearest to the proposed premises, the nearest GP surgeries and the neighbourhood as defined by the Applicant.

7. It had been confirmed prior to the meeting that the members present did not have an interest to declare.

8. The Committee agreed to invite the Applicant and those who were present who had made written representations (Interested Parties) to attend before them. The Applicant was represented in person by Mahyar Nickkho-Amiry, assisted by Barrie Dear. The Interested Parties who had submitted written representations during the consultation period and who had chosen to attend the hearing were Rodney Haugh (assisted by Maria Donnelly) of Gordon’s Chemist; Balvinder Sagoo (assisted by Emma Kean) of Boots UK Ltd and Tom Arnott of Lloyd’s Pharmacy.

9. The Chairman explained the procedure that would be followed and no person present objected.

10. The procedure adopted by the Committee was that the applicant made an opening submission to the Committee, which was followed by an opportunity for the Interested Parties and the Committee to ask questions. The Interested Parties then made their oral representations and the applicant and the Committee then asked the Interested Parties questions. The parties were then given an opportunity to sum up. Before the parties left the meeting the Chairman asked all parties if they felt that they had had a fair and full hearing. They confirmed that they had.
11. The Committee was required to and did take account of all relevant factors concerning the issues of 
nearby neighborhood, adequacy of existing pharmaceutical services in the neighborhood and whether 
the provision of pharmaceutical services at the premises named in the application was necessary or 
desirable to secure adequate provision of pharmaceutical services in the neighborhood in which 
the premises are located. 

The Applicant’s Case 

12. The Applicant thanked members of the Committee for the opportunity to put forward his application 
for inclusion in the pharmaceutical list. 

13. The Applicant gave an overview of Dears Pharmacy stating that there were five pharmacies within 
the group with three in Edinburgh and two in Fife. These pharmacies have been under the same 
ownership of Barrie Dear since the 1990’s and is a family owned business. The focus is on 
supporting the health and well being of patients in the community with established close working 
relationships with local GPs, healthcare professionals and third sector care. All five pharmacies are 
modern and fitted to a high standard. 

14. The Applicant stated that Dears Pharmacy focus on achieving excellence in pharmaceutical care 
and has a commitment to increase access to community pharmacy as the first port of call for 
managing self-limiting illnesses and to support self-management of stable long term conditions in-
hours and out-of-hours. 

15. The Applicant stated that if the application was successful, the pharmacy would provide the 
following: 
- Independent prescriber to help with management of long term conditions and chronic medication 
  service 
- Provide core services and ensure patients were aware of these services 
- Locally commissioned services 
- A range of private additional services including travel clinics, children’s vaccination, diagnostic, 
  enhanced minor ailment services 
- 7 day opening 
- Free prescription collection and delivery service 
- Three consultation rooms including one for use by healthcare/social professionals 

16. The Applicant provided details of the proposed pharmacy layout. This would be: 
- 120 sq.m in space 
- Retail area 
- Three consultation rooms, 1 of which will be for use of local health and social care teams 
- Disabled access 
- Automatic doors 
- Structured dispensary to support all levels of activity in dispensing 
- Digital screens highlighting services and health promotion 

17. The Applicant stated that Armadale is a core development area within the West Lothian strategy. 
The expansion of Armadale (to the south) has resulted in 365 houses built so far with a further 500 
awaiting final planning permission. The Applicant showed the Committee and Interested Parties 
annotated maps and aerial views showing the proposed development area and the range of 
affordable housing to be built along with other amenities such as the new neighbourhood retail 
parade. The Applicant added that NHS Lothian had approached the developer regarding the
possibility of building a new Health Centre to cope with the increase in patients wishing to register with a GP in the area. There would also be ample parking for the proposed retail area which already includes an Asda supermarket and primary school.

18. The Applicant stated that the residents in the south Armadale area would experience long walking times to access current pharmaceutical services.

19. The Applicant advised the Committee that if the application was successful the proposed pharmacy would be built within 6 months as confirmed with the developer. The pharmacy would be located within the new retail parade situated within the new area of expansion in south Armadale.

20. The Applicant went on to speak about the concept of neighbourhood. The Applicant stated that the definition of a neighbourhood is a tool which gives a better understanding of the needs of a distinct population. It is also a useful tool in the Joint Consultation as it defines the area whose residents need to be consulted about their existing pharmaceutical services. The Applicant added that PPC's now regularly refuse applications in neighbourhoods they define as having no existing pharmacy and also grant applications in neighbourhoods where there is an existing pharmacy.

21. The Applicant added that in his view the key decision within the legal test asks if there is a significant population in the vicinity of the proposed premises who have poor access to a pharmacy (i.e. an inadequate pharmaceutical service) and will the granting of the application remove this inadequacy. The Applicant went on to say that with the expansion of Armadale, there is now an even greater demand being put on the existing two pharmacies that are near one another.

22. The Applicant stated that he believes that there is now an inadequacy as this neighbourhood is growing with a huge population and the existing pharmacies will be unable to cope with the needs of the population and the issues with the Armadale Surgery having a restricted patient list and additional burden being put on the next surgery in Blackridge.

23. Before defining the neighbourhood, the Applicant stated that it was difficult to define this neighbourhood due to the expansion which has taken place and that in 2010 the major relocation by Gordon’s Chemist had the neighbourhood defined as 1 mile radius of Armadale. The Applicant went on to define the neighbourhood as:

- North – A89
- South – A706
- West – Intersection A706, railway, A89
- East – A801

24. The Applicant then went on to speak about the proposed opening hours of the proposed pharmacy. These would be Monday to Friday 8.30am to 6.30, Saturday 9am to 5pm and Sunday 10am to 4pm. The Applicant added that he had spoken to the nearby Asda supermarket to determine the peak times and that the pharmacy opening hours would reflect this.

25. The Applicant stated that with the Armadale expansion, the new Southdale Primary School which opened in 2016 with 160 pupils had the capacity to accommodate 230 pupils with space for further expansion if necessary. He added that the Asda store is open seven days per week with a week on week growing footfall. There is also a Nursery within this area, a proposed new retail parade to include the proposed pharmacy, dentist, optician and post office. The Applicant stated that there is also a proposal for a new Health Centre along with a Veterinary Practice and leisure facilities.
26. The Applicant added that the existing services in this new area are fulfilling day to day community needs except there is no community pharmacy. The population need to travel outwith the area to access pharmacy services.

27. The Applicant then went on to speak about the Legal Test. The Applicant stated that the PPC needs to take account of how people live their daily lives and that the new services trading are here to support the expansion of Armadale. While somebody living in the ‘historic’ part of Armadale may be closer to a pharmacy, they will shop in the Asda located in the newly developed area and their children may attend Southdale Primary School and Nursery.

28. The Applicant went on to state that the following should be considered:
   - The adequacy of existing services
   - How the population access services
   - How the population commute to existing pharmacies
   - Opening a new pharmacy in the new location will remove inadequacy
   - It is unusual not to have new health services in significant expansion
   - The two existing pharmacies are clustered together
   - New government strategy to increase greater access to pharmacy
   - It is up to the existing pharmacies to prove to the PPC that despite lack of pharmacy in the new area the residents have an adequate service

29. The Applicant highlighted some statistics to the Committee which he felt were key; 62.5% of the population in the Armadale area are of working age, 21.6% are children, 15.9% are pensioners. The Armadale Group Practice has a restricted patient list (12,699 patients registered) and are only accepting new registrations from new babies of existing patients and immediate family of existing patients. The nearest GP practice is in Blackridge and their patient list size is growing at approximately 100 patients per quarter. Their list size is currently 3,244 which is a 31% increase in the last 3 years. This practice may need to review their registration situation with the steady growth of patient numbers.

30. The Applicant went on to speak about the Consultation Analysis Report (CAR). He stated that it was a useful addition to a PPC but only if people respond. He pointed out that 89.8% of responders had agreed the neighbourhood as defined by the Applicant. The Applicant added that he has met with Community Council representatives, Councillor’s and MSP who represent the interests of the communities they serve and who have given overwhelming support to a third pharmacy in Armadale. The Applicant went on to say that 72.9% of responders had agreed that there were agreed gaps/deficiencies in service, 82% agree a positive impact of new pharmacy in neighbourhood, 87% agree with the location of new pharmacy, 76% agree positive impact of new pharmacy to existing health services.

31. The Applicant spoke about the opening hours of the GP practices and pharmacies in the area. He pointed out that both the Armadale practice and Blackridge Health Centre were open Monday to Friday from 8am to 6pm. The two pharmacies in Armadale were open Monday to Friday, 9am-6pm, Saturday 9am to 5.30pm (Gordon’s Pharmacy) and Monday to Friday, 9am to 5.30 pm, Saturday 9am to 5pm (Lloyd’s Pharmacy). The Armadale expansion area (Southdale) had no pharmacy provision. The existing pharmacies have not aligned their opening hours to the GP practices hours. The Applicant stated that no local pharmacies were open on a Sunday.

32. The Applicant then went on to speak about transport between the proposed pharmacy and the two GP practices. To Armadale practice it is a 1.4 mile drive, 1 bus every 30 minutes and a 26 minute walk. To Blackridge Health Centre it is a 3.8 mile drive, choice of 2 buses every 30 minutes and a 1
hour 9 minute walk. The Applicant added that car ownership is 74% but 55% of residents commute over 5km to work.

33. The Applicant went on to speak about the existing services available in the area. He stated that there were 182 pharmacies in Lothian with an average of 4604 patients per pharmacy. The Armadale population of over 15,000 was well above the average in Lothian for the two Armadale pharmacies. Script growth in Lothian overall was 11.2% for 2016-17 compared to 2011-12 whereas in the two pharmacies in Armadale the increase was 27%. The Applicant added that as there had been what he considered a significant increase in demand, this results in capacity issues. The pharmacies are not taking on patients for community blister packs and a free delivery service is not being offered by one of the pharmacies.

34. The Applicant stated that dispensed items had increased by 27% in Armadale with Gordon’s Pharmacy and Lloyd’s Pharmacy showing the biggest increase while in Blackridge dispensed items had increased by 21% with the majority increase going to the independent pharmacy in Blackridge.

35. The Applicant then went on to speak about the service delivery by the existing pharmacies. The current pharmacy contract is made up of five components:

- Acute Medication Service (AMS)
- Chronic Medication Service (CMS)
- Electronic Minor Ailments Service (EMAS)
- Public Health Service (PHS) which comprises Sexual Health Service (Emergency Hormonal Contraception (EHC)) and Smoking Cessation Service (SC)
- Gluten Free Foods Service

The Applicant went on to refer to the Achieving Excellence in Pharmaceutical Care which emphasises the important role that Community Pharmacy has in providing accessible services for people both in-hours and out-of-hours, especially to ensure that services such as Minor Ailment Service (MAS), CMS, and PHS are being delivered to their full potential.

36. The Applicant stated that both Gordon’s Chemist and Lloyds have shown a decrease in MAS, CMS and smoking cessation which showed a clear lack of engagement with patients.

37. The Applicant stated that two GPs had retired from Armadale Medical Practice which added to the pressure put on the practice along with their restricted patient list. He added that this should be an opportunity for local pharmacies to engage with patients to offer help to the medical practice and promote the aforementioned services thus reducing the need for patients to see a GP.

38. The Applicant referred to the Integrated Joint Board Strategic Plan which highlights the shift from Secondary Care to Primary Care patient care, for example HepC and to promote self management of conditions. This puts added pressure on pharmacies.

39. The Applicant summarised the current service provision as:

- Pharmacies opening hours are not aligned to the GP surgeries
- The average number per patients per pharmacy is 7,598 locally versus 4,604 per pharmacy in Lothian
- Script volume is growing above Lothian (11.2%) in the locality of Armadale (27%) and Blackridge (21%) with increased challenges coming with the addition of 2,000 new houses
- Pharmacies in Armadale have capacity issues with waiting lists and providing patient care within the locality with regards to blister packs
• One of the pharmacies not taking on deliveries and is to charge new patients £60 per year for deliveries
• There is a clear lack of engagement with regard to patients on CMS as well as working with local surgeries to seek serial prescriptions to improve patient care and by working with surgeries with no items dispensed on serial prescriptions last year
• EMAS is not being engaged at a level due to reduced registrations and promotion and education of the service with a low volume of items prescribed with only 1545 patients registered and 313 items per month prescribed
• Smoking Cessation has reduced level activity in the last 12 months and reduced in the other pharmacies as the challenges of script volume are affecting the ability to deliver a key public health service
• There is a lack of engagement with patients with regard to EHC and this is affecting the ability of patients to access the service from the locality

40. The Applicant concluded by summarising the points for a new pharmacy by stating:

• There is no pharmacy provision within the expansion area of Armadale
• The population of Armadale is increasing with the addition of over 2,000 new houses which will add to the existing population of Armadale
• These new houses will increase the existing health access challenges in the locality as well as the pharmacies not within the neighbourhood
• By providing a new pharmacy we can meet the need of the neighbourhood and support greater access by our opening hours and seven day a week opening
• There is a challenge to patients with restricted lists in Armadale Group Practice and their loss of two GPs and Blackridge Practice growing rapidly (100 new patients per quarter) and experiencing difficulties in capacity going forward
• The proposed pharmacy will engage in all services as well as promoting public health and well being
• The proposed pharmacy will work with the local GPs and other healthcare professionals in a collaborative way to improve patient access and reduce health inequalities. Both GP practice support a new pharmacy
• A new pharmacy will not affect the viability of the existing pharmacies as the population is growing as are health needs
• Dears Pharmacy is an independent pharmacy group operating locally in Scotland

41. The Applicant thanked the Committee for giving the opportunity to present the proposal for a new pharmacy.

**Questions from Mr Tom Arnott to the Applicant**

42. Mr Arnott questioned the variously quoted population size and asked where the figure of 15,000 had come from.

43. The Applicant stated that the statistics had come from ISD.

44. Mr Arnott asked what the Applicant thought the core services were to which the Applicant responded that all were.

45. Mr Arnott asked why, as there was a large supermarket nearby that opened on a Sunday, the proposed opening hours included Sunday opening.
46. The Applicant replied by saying that they had looked at the needs of the population and that the supermarket opening hours did not dictate the pharmacy opening hours.

47. Mr Arnott asked the Applicant if he agreed that the existing pharmacies are nearer the majority of Armadale residents.

48. The Applicant disagreed by saying that the new development area was not.

49. Mr Arnott asked how many responses there had been to the CAR.

50. The Applicant responded that there had been 60 responses.

51. Mr Arnott went on to ask the Applicant if he felt that the low response reflected the fact that there was not a need for a new pharmacy.

52. The Applicant responded by saying that the CAR was a tool for the PPC. He had met with the Community Council and MSP who also represents the community and they had been supportive of the proposed pharmacy.

53. Mr Arnott asked who normally writes CMS prescriptions for patients to which the Applicant answered that it was GPs who write them but that it is the pharmacies that needed to check and go through the medications. Mr Arnott then stated that as the GP writes the CMS scripts, you cannot blame the pharmacist for low CMS numbers.

54. Mr Arnott asked the Applicant to explain what happens after 12 months with EMAS.

55. The Applicant responded that if the patient has not engaged it would lapse.

56. Mr Arnott asked how pharmacies can engage patients in the EHC scheme.

57. The Applicant responded that pharmacies should be informing patients of the availability of the service.

**Questions from Mr Rodney Haugh to the Applicant**

58. Mr Haugh asked the Applicant for clarification on the defined neighbourhood as it is different on the map he had presented in his application.

59. The Applicant confirmed that the neighbourhood is North - A89, South - A706, West - Intersection A706, railway, A89, East – A801. The Applicant also confirmed that if using the A89 as the north boundary there would be 3 pharmacies within this neighbourhood.

60. Mr Haugh asked the Applicant if there was a plan or layout of the proposed pharmacy available to which the Applicant replied that there was not one available.

61. Mr Haugh asked what would be the expected date of completion for the proposed pharmacy. The Applicant confirmed that this would be within 6 months if the application was granted.

62. Mr Haugh went on to ask what contingencies would be in place if the build was not completed within the 6 month time frame.

63. The Applicant responded by saying that they would be able to provide a service using temporary accommodation.
64. Mr Haugh then asked how many applications the Applicant had pending.

65. The Applicant stated that there were four applications pending.

**Questions from Mr Balvinder Sagoo to the Applicant**

66. Mr Sagoo asked the Applicant if there would be an independent prescriber in the proposed pharmacy to which the Applicant confirmed that there would be.

67. Mr Sagoo asked what the Applicant would do differently from the existing pharmacies about CMS.

68. The Applicant stated that they would work closely with the local GPs and would have the ability to provide the service 5 sessions per month.

69. Mr Sagoo asked why representatives of the Community Council did not attend the PPC to which the Applicant replied that it was difficult as they were at work and could not get away.

**Questions from the Committee to the Applicant**

70. Mrs Tait asked if there was a delay in the proposed house building as there was no visible billboard or signage advertising the new build.

71. The Applicant replied that the final contracts and planning permission should be granted any day.

72. Mrs Tait asked the Applicant what the time frame would be for the opening of the retail site.

73. The Applicant confirmed that this would be within 6 months and that the developer will do his best to meet the timetable and if not there would be a portable temporary pharmacy put in place.

74. Mrs Tait went on to ask for clarification about the time frame; whether this would be for the whole retail parade or just the proposed pharmacy. The Applicant responded by saying that the other units could be ready sooner.

75. Mr Connolly asked the Applicant to clarify the figure of 2,000 new houses and the timescales involved.

76. The Applicant replied that there were 365 houses built with 500 more waiting on planning permission and the further 1,000 were in the pipeline for the future. The timescale was up to the builder and that 1,150 were awaiting planning permission. The Applicant added that there were other planning permissions pending in ‘historic’ Armadale but the majority of the expansion was in south Armadale.

77. Mr Connolly asked if the Applicant knew what the GP service would be for the new expanded area bearing in mind he had made reference in his presentation to a new Health Centre being built in the new expansion area.

78. The Applicant stated that he did not know as there had been no firm information given by NHS Lothian about this. He added that NHS Lothian had provided the developer with details of what would be required for a new Health Centre.

79. Mr Connolly asked the Applicant if, when he had met with the MSP and Practice Managers, he had received any formal support from them.
80. The Applicant responded that he did not have anything in writing but when he had the meeting with the MSP and the Practice Managers they had been very supportive. The Applicant went on to confirm that he had met 1 year ago with the MSP.

81. Mr Connolly asked the Applicant to recap on the figures he had quoted on EMAS.

82. The Applicant replied that Gordon’s Pharmacy had reduced by 1138 registered patients and Lloyds Pharmacy had reduced by 447, both less than 12 months ago.

83. Mr Connolly asked the Applicant if he agreed that nationally there had been a drop off in EMAS after the Government issued clarification on patient registration.

84. The Applicant agreed that the drop off could be interpreted as this but not perhaps to the levels seen and pharmacies need to let people know about this service and promote it more.

85. Mr Connolly asked the Applicant about how he had defined the neighbourhood and why it was not the whole of Armadale.

86. The Applicant explained that the neighbourhood was difficult to interpret and the main roads had been used in order to draw the map.

87. Mr Niven asked the Applicant about the timescale for the development in the south Armadale area and if he had taken into consideration that with such a large development it would be a number of years before the population increased significantly.

88. The Applicant confirmed that he had taken this into consideration.

89. Mr Niven asked the Applicant if he would consider delaying opening the proposed pharmacy if the developer was unable to complete the build within the 6 month timeframe.

90. The Applicant replied that he would need to judge that nearer the time but that he would look at the best way forward and what type of temporary provision would be appropriate. It would be likely that a large portakabin unit would be utilised and that it was important to let the public know that a service was available.

91. Ms Blyth asked the Applicant if there would be an issue about the security of a portakabin.

92. The Applicant confirmed that the developer would work closely with him to assure the security of the temporary building.

93. Mr Milligan asked the Applicant who the developer was and if it was them who were developing the house builds too or if not did the developer have a signed contract with the main developer.

94. The Applicant stated that the developer was Allied Capital for the retail side of the development and that they worked in tandem with the main developer to ensure time scales were met. The Applicant added that the 2,000 new houses had been identified in the Local Development Plan and there was detailed planning permission for 1,000 houses.
The Interested Parties Case – Mr Tom Arnott of Lloyd’s Pharmacy

95. Mr Arnott thanked the Committee for allowing him to speak on behalf of Lloyd’s Pharmacy.

96. Mr Arnott stated that the Applicant’s reason for making the application seemed to be that the pharmaceutical services provided by current contractors is inadequate only because there has been some house building in Armadale.

97. Mr Arnott went on to say that the Committee would see from the advice and guidance for those attending the PPC that they must consider what the existing pharmaceutical services in the neighbourhood or in any adjoining neighbourhoods are. He added that the neighbourhood is Armadale in its entirety and there are two pharmacies in the neighbourhood. The Applicant’s contention that the A89 is a boundary does not make any sense and is purely designed to exclude Gordon’s Chemist.

98. Mr Arnott stated that Lloyd’s Pharmacy in Armadale has no capacity issues and is able to provide adequate pharmaceutical services to the residents of the Applicant’s proposed neighbourhood and if necessary Lloyd’s would invest in their premises and their people to ensure that they were always in a position to provide adequate pharmaceutical services. He added that Lloyd’s Pharmacy in Bathgate Health Centre had recently been refurbished.

99. Mr Arnott stated that the Committee must take into account whether the granting of the application would adversely impact on the security and sustainable provision of existing NHS primary medical and pharmaceutical services in the area concerned.

100. Mr Arnott noted that the Applicant had mentioned that Gordon’s Chemist relocated and that Lloyd’s Pharmacy in Armadale suffered as a result. He went on to say that Lloyd’s Pharmacy in Armadale is not exceptionally busy and in the nine months to December 2017 they had dispensed 3% less prescriptions than in the same period in the previous year despite 360 new homes having been built. This is further proof that the current pharmaceutical services in Armadale are adequate and the building of further housing will not detract from this.

101. Mr Arnott went on to say that Gordon’s Chemist currently have two pharmacists on duty everyday and that he imagined that this situation would have to be reviewed if they were to suffer a loss of business in the area.

102. Mr Arnott quoted from the Southdale Development home page: “the local area has one of the youngest populations in Scotland”. He added that demographics show that the residents of Armadale have better access to services including pharmaceutical services than many other parts of Scotland.

103. Mr Arnott noted that the existing pharmacies in the area offer all core services and added that convenience is not a reason for granting a pharmacy contract. He went on to say that the Applicant had not proved any inadequacies in the current service provision. Mr Arnott added that he questioned whether a pharmacy at Southdale is more easily accessible to the majority of residents of Armadale.

104. Mr Arnott pointed out that the Applicant had stated that the proposed pharmacy would open until 6.30pm to reflect GP practice opening hours. He added that perhaps the Applicant was unaware that the last GP appointment is 5.30pm and that Gordon’s Chemist is open until 6pm and Lloyd’s Pharmacy in Bathgate is currently open until 8pm and also opens on a Sunday to provide a service not only to the Bathgate population but to other local communities such as Armadale.
105. Mr Arnott stated that the Applicant had carried out a consultation exercise which produced the CAR. Mr Arnott noted that from a population of approximately 12,000 only 60 responses were received, this equates to 0.5% of the resident population. Mr Arnott added that this was the smallest response rate he had encountered. Mr Arnott went on to say that of the 60 respondents only 43 stated that there were any gaps or deficiencies in the existing provision of pharmaceutical services to the neighbourhood (question 2) which is only 0.35% of the resident population.

106. Mr Arnott stated that if it is part of the new Regulations that the Applicant must establish the level of public support of the residents in the neighbourhood to which the application relates then the Applicant has failed miserably to gain the support of the residents simply because there is little public support for the application as existing service provision is adequate. He added that this was despite placing an advert in the West Lothian Courier, contacting Winchburgh Community Council, Armadale Community Council, Patient Partnership Forum, MSPs, Local Councillors and posting on the NHS Lothian website. Despite all this only 60 responses from the residents of the neighbourhood were received and not all of these were in support of the application.

107. Mr Arnott went on to say that the Applicant has shown no inadequacies in current pharmaceutical provision and there are already two pharmacies within the neighbourhood and in nearby Bathgate – an extended hours pharmacy.

108. Mr Arnott pointed out that the Applicant has also made applications in Rosyth, Aberlady, Dunfermline, Port Glasgow and Edinburgh.

109. Mr Arnott stated that the Area Pharmaceutical Committee do not support the application and quoted from their response to the application; “the Applicant has failed to supply any evidence to support his claim that there are access issues”, ….“the Committee noted that the application mentioned access issues currently experienced but there appeared to be no evidence included to support current difficulties relating to access issues for the local pharmacies mentioned”

110. Mr Arnott went on to say that there is little or no public support for this application and the residents have no difficulties in accessing pharmaceutical services. He added that the application is all about convenience and not adequacy or need. Convenience is not a reason for granting a pharmacy contract.

111. Mr Arnott stated that the Committee must consider what the existing pharmaceutical services are in the neighbourhood or in any adjoining neighbourhood. He went on to emphasise that the Committee must take account whether the granting of the application would adversely impact on the security and sustainable provision of existing NHS primary medical and pharmaceutical services in the area concerned.

112. Mr Arnott stated that having examined the NHS Lothian Pharmaceutical Care Services Plan he could see no reference to there being a need for a pharmacy in the Applicant’s proposed neighbourhood and indeed there have been no complaints to the Health Board regarding existing service provision.

113. Mr Arnott concluded by asking the Committee to refuse the 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.

**Questions from the Applicant to Mr Arnott**

114. The Applicant asked if there were any issues with waiting times in the Lloyd’s Pharmacy.
115. Mr Arnott responded that there were no issues he was aware of.

116. The Applicant asked Mr Arnott to confirm that Lloyd’s Pharmacy were charging patients for delivery of items and if so why was this.

117. Mr Arnott confirmed that there was a charge of £52 per annum but only for new patients. Existing patients who received this service would not be charged. He went on to explain that the cost of providing this service can be excessive to the pharmacy and in order to maintain the service a nominal fee will be charged.

118. The Applicant asked Mr Arnott about the recent refit the pharmacy at Bathgate Primary Care Centre to which Mr Arnott replied that this was not a response to the application for the proposed pharmacy, all Lloyd’s pharmacies were undergoing a programme of refurbishment where needed.

119. The Applicant asked Mr Arnott to confirm if Lloyd’s Pharmacy in Armadale had lost business as a result of Gordon’s Chemists major relocation in 2010.

120. Mr Arnott confirmed that there had been a decrease in business initially.

Questions from Mr Haugh to Mr Arnott

121. Mr Haugh asked why there would be a drop in MAS patients.

122. Mr Arnott replied that the numbers can fluctuate especially when there had been a high number initially.

Questions from Mr Sagoo to Mr Arnott

123. Mr Sagoo asked if there had been any complaints about the pharmaceutical services made to Lloyd’s.

124. Mr Arnott replied that he was not aware of any complaints being made.

Questions from the Committee to Mr Arnott

125. Mrs Tait asked Mr Arnott to confirm what the disabled access was in place at Lloyd’s Pharmacy in Armadale.

126. Mr Arnott replied that there is a ramp available when needed and that the staff will assist the patient.

127. Mrs Tait asked Mr Arnott about the extended hours facility in the area.

128. Mr Arnott replied that the pharmacy in Bathgate was open until 8pm and the residents of Armadale had easy access to this as it was only two miles away, He added that the last appointment with the GPs at Bathgate Primary Care Centre was 5.30pm and Gordon’s Chemist in Armadale was open until 6pm.

129. Mr Connolly asked Mr Arnott to confirm the opening hours of Lloyd’s Pharmacy in Armadale.

130. Mr Arnott confirmed that the hours of opening were 9am – 5.30pm Monday to Friday and 9am to 5pm on Saturdays.

131. Mr Connolly asked if there was a waiting list for trays and about the charges for delivery.
132. Mr Arnott confirmed that there was no waiting list for trays and that only new patients were being charged £52 per annum for deliveries.

133. Mr Connolly asked Mr Arnott what he defined the neighbourhood as.

134. Mr Arnott responded by saying that he defined the neighbourhood as Armadale in its entirety.

135. Mr Connolly asked Mr Arnott if he was aware of any complaints about the pharmacy services.

136. Mr Arnott replied that he was not aware of any complaints.

The Interested Parties Case – Mr Rodney Haugh of Gordon’s Chemist

137. Mr Haugh introduced himself to the Committee and introduced his assistant Maria Donnelly who is a pharmacist in Gordon’s Chemist, Armadale.

138. Mr Haugh stated that the fundamental issue for the Committee to consider is whether the current provision of NHS pharmaceutical services in the neighbourhood is adequate and if not, whether the proposed services are necessary or desirable to secure adequate service provision. Mr Haugh added that he did not perceive that any of these statutory tests had been met despite the wealth of evidence to the contrary. The Applicant had stated in his application that the proposed pharmacy is at least desirable surely conceding that it is not necessary.

139. Mr Haugh spoke to the Committee about the neighbourhood and said that a neighbourhood for Armadale was defined by the National Appeal Panel (NAP) on 16 November 2010 in regard to Gordon’s Chemists major relocation application. He referred to the NAP reasoning behind definition of the neighbourhood. As there had not been any significant change to the boundary of the neighbourhood since that decision, he would define the neighbourhood as the town of Armadale in its entirety, bounded on the East by the A801 and on the North, South and West following the line of development to which the town of Armadale extended along these axes.

140. Mr Haugh went on to say that within this neighbourhood there are two pharmacies serving the town of Armadale. There are also three pharmacies in close proximity to the neighbourhood which are providing pharmaceutical services to the population, Blackridge Pharmacy and both Boots Pharmacies in Whitburn.

141. The NAP, in 2010, had stated that the neighbourhood contained all of the services required for living, including general medical services, schools, shops, pharmacies, supermarkets and churches which were sufficiently wide ranging to allow the neighbourhood to be considered such in its own right. Mr Haugh added that the NAP had also stated in its decision that the neighbourhood was also seen to be one of an appropriate geographical size given its context as a small town focused around a highly centralised town centre, within which virtually all available services and facilities were located.

142. Mr Haugh stated that the population of the neighbourhood according to the 2011 census was 11,836. According to the 2015 mid year estimates, the population of Armadale was 12,133, a 2.5% increase in four years.

143. Mr Haugh addressed the Applicant’s proposed neighbourhood by stating that there were major inaccuracies in the proposed neighbourhood. He added that the Applicant had described their neighbourhood boundaries as: North – A89, East – A801, South A706, West – intersection from
A706 through railway line up to A89 and that this same neighbourhood definition was also used by the Applicant as part of their CAR.

144. Mr Haugh went on to say that in the map of the neighbourhood that the Applicant submitted with the application, an area had been shaded with a northern boundary approximately 550m north of the A89 and running parallel with this. Mr Haugh added that when notification was first received of the application, a black and white copy of the map was sent out which did not show the shaded area. Only when a colour copy was received was this seen. Mr Haugh went on to say that the Applicant has described the neighbourhood in his presentation as again having a northern boundary of the A89 which is confusing.

145. Mr Haugh stated that the statistics provided by the Applicant with regard to the population of the neighbourhood are incorrect. The Applicant quoted a population of 15,000 from 2013. Using the 2011 census, Mr Haugh informed the Committee that he had analysed the 103 Output Areas that make up Armadale and has calculated that the population of the proposed neighbourhood is 7,761.

146. Mr Haugh stated that there were five main reasons why he believed that the proposed neighbourhood to be unsuitable:

- The area to the north of the A89, which includes North Street and Burns Avenue, is part of the Armadale neighbourhood. People who live in this area use all of the services in the Armadale area on a daily basis. Those who live in Burns Avenue would consider those who live in High Academy Street to the south of the A89 to be their neighbours.
- The A89 is not a natural boundary of the neighbourhood and people freely move from north to south across this road. Armadale Group Practice is located to the north of the A89, outside the Applicant’s neighbourhood. Patients easily move from the Health Centre where they have had an appointment with their GP to Lloyd’s Pharmacy, crossing the A89 to obtain their prescription. Along the A89 there are a total of 13 crossing points.
- The area to the south of the Applicant’s neighbourhood, which includes the area between Southdale Way and the A706, is open farmland. The Applicant has extended the neighbourhood boundaries to be central to it. The proposed new pharmacy is therefore situated on the southern boundary and not in the middle of the neighbourhood. People living to the south of the proposed neighbourhood may choose to visit a pharmacy in Whitburn.
- There are a number of key amenities that are situated to the north of the A89 – Armadale Swimming Pool, Armadale Community Centre and Library, Watson Park, Eastertoun Nursery School and Armadale Methodist Church. These are all located outside of the proposed neighbourhood.
- There is no evidence that the town of Armadale is anything but one neighbourhood.

147. Mr Haugh stated that the Applicant referred to the deprivation of Armadale in the application. Mr Haugh added that analysis of the Scottish Index of Multiple Deprivation usually focuses on the 15% most deprived Data Zones in Scotland and in fact the Data Zone in which the proposed pharmacy lies is one of the most affluent areas in Scotland, ranking in the 20% least deprived Data Zones in the country. Mr Haugh went on to say that these statistics are backed up by the number of large 3/4/5 bedroom homes which are situated around the proposed pharmacy, namely Southdale Avenue, Southdale Meadows, Ferrier Way and Davies Way.

148. Mr Haugh stated that the Applicant had noted that there have been 365 new homes built since 2010. In Gordon’s Chemist’s application in 2010, it mentioned in good faith that there were plans for 2,000 new homes to be built before 2014. This raises the question of the feasibility of these extra homes and if they will ever be built. Mr Haugh went on to say that the landowner, EWP Investments has admitted that a large number of these homes may never come to fruition. In their representation to the proposed West Lothian local development plan, EWP stated that “it is widely acknowledged
that the 400 units allocated at Lower Bathville are unviable for the foreseeable future due to the cost of extensive contamination and poor ground conditions”......“it is emerging that 270 units at Colinshiel are also unviable because of ground conditions. As a result it is becoming clear that there are 680 units that will not be built in Armadale in the period of the Strategic Development Plan”

149. Mr Haugh went on to say that there are plans to include a new retail neighbourhood but at present there has been no work done on this site.

150. Mr Haugh informed the Committee that EWP Investments wrote to the Applicant on 2 March 2017 stating “we have contractors in place for the construction of the units and are targeting completion by late 2017”. Mr Haugh added that the Applicant had been unable to provide evidence that this retail neighbourhood will be built to allow them to open a new pharmacy within 6 months of a new pharmacy contract being granted and that there cannot be a new contract granted each time there are 360 new homes built. Mr Haugh went on to say that the application presents a letter from EWP Investments which states that there has been an agreement for terms for Dears Pharmacy to take Unit 1 subject to receipt of a pharmacy licence. This is not a lease, nor is there a legally binding agreement for lease in place for the property.

151. Mr Haugh spoke about the health and demographics of the NAP defined neighbourhood saying that the health of the neighbourhood of Armadale is generally good and in line with Scottish averages according to the 2011 census. This indicates that there is not an above average demand for pharmaceutical services in the neighbourhood. Mr Haugh went on to say that the census also shows that only 27.9% of the population have one or more health conditions, this also compares favourably with the Scottish average of 29.9%.

152. Mr Haugh stated that the neighbourhood of Armadale has a higher than average younger population than that of the rest of Scotland. The percentage of people within the neighbourhood who are under 16 is 21% while the Scottish average is 17%. The same can be said for the older population; in Armadale 14.5% of the population are over 65 while the Scotland average is 16.8%.

153. Mr Haugh stated that 76.3% of the 763 who registered with the Blackridge Health Centre in the past two years are under the age of 45 while there were only 5 new patients registered over the age of 75. This is during the period Armadale Group Practice have been operating a restricted list. As the majority of people registered during this period would be from the area adjacent to the Applicant’s proposed pharmacy, this would suggest that the demographics of these new homes are younger, more affluent families. Most of the people who live in these new homes would be at work outside of the area when the proposed pharmacy is open.

154. Mr Haugh stated the Applicant had quoted in the application that 19.5% of the population are employment deprived. Mr Haugh went on to say that he was not sure where these figures had come from as the most recent SIMD statistics (2016) show that Armadale has a 12% rate of employment deprivation. This is similar to the averages for both West Lothian (10%) and Scotland as a whole (11%). 13% of the residents within the neighbourhood are income deprived, again similar to the averages for West Lothian (12%) and Scotland (12%).

155. Mr Haugh went on to say that the most recent SIMD statistics show that there is only 1 DataZone within the neighbourhood which is within the 15% most deprived - Mayfield. This has reduced from 2 DataZones in previous years. This DataZone is 820m from Gordon’s Chemists whilst it is over 1.4km from the proposed pharmacy.

156. Mr Haugh then spoke about existing pharmaceutical services and made the following points:
• The residents of Armadale are well catered for in terms of pharmaceutical services by the 2 pharmacies. Armadale Group Practice lost 2 full time GPs in 2016 but the practice has since recruited 2 part time GPs.
• Armadale Group Practice are operating a restricted patient list which is unlikely to change until new GPs are recruited. This means that the people living in the 360 new homes in the south of the neighbourhood are registering at the Blackridge Health Centre. Blackridge Pharmacy has reported an increase in the number of prescriptions that they are receiving from this part of the Armadale neighbourhood. Patients attending appointments at Blackridge have access to 3 pharmacies which are closer than the proposed pharmacy.
• Existing pharmacies in Armadale, Blackridge and Whitburn already offer the full range of available Health Board commissioned services and also non-commissioned services to the population of Armadale.
• Core services are fully offered and delivered by all pharmacies within the neighbourhood.
• The Applicant does not propose to add any extra services to those that are already offered in the neighbourhood. Currently nursing home advice and injection equipment provision are not currently provided by pharmacies in the neighbourhood but would be if there was an opportunity to do so.
• Needle Exchange services are not currently offered in either pharmacy in Armadale. Discussions have been taking place with CPDS with regard to offering this service although the service is dependent on funding from NHS Lothian which has not been made available. This lack of funding would apply to any pharmacy in Armadale.
• There are 2 pharmacists working in Gordon’s Chemists Monday to Friday with 1 pharmacist working on a Saturday.
• Gordon’s Chemists have had nominal growth in prescription figures in Armadale with an increase last year of only 1% on the previous year; in 2016 the growth was only 1.2% on the 2015 figure. This indicates that despite the 360 new homes there has been little demand for pharmaceutical services.
• The number of patients living in Armadale who have registered with a GP increased by only 5.7% since 2011, an increase of 728 people. This figure included all those registered in Blackridge over the last two years. The NAP hearing in 2010 concluded that “by granting the application this could result in a degree of short term over provision of pharmaceutical services within the neighbourhood”. There is still a period of over provision of service and the 2 pharmacies in Armadale are not operating at full capacity and are both capable of sustaining further growth.

157. Mr Haugh stated that a large proportion of the neighbourhood would use a car to access the town centre. Over 77% of people in the neighbourhood travel to work by car, the Scottish average is 62.4%.

158. Mr Haugh went on to say that after analysing the 103 Census Output Areas which make up the neighbourhood, he would estimate that 75% of the population in Armadale live closer to the two current pharmacies while only 25% of the population live closer to the proposed pharmacy.

159. Mr Haugh informed the Committee that in 2012, Gordon’s Chemists won a Disability Access award from Disability West Lothian.

160. The 360 new homes the Applicant refers to were built in conjunction with the new railway station in Armadale. These new houses are in close proximity to the Applicants proposed pharmacy and are primarily large 3/4/5 bedroom detached and semi-detached homes. These homes are generally for commuters who would also have the option to access pharmaceutical services elsewhere.
161. Mr Haugh spoke about the parking in and around the centre of Armadale. He stated that this was better than in most towns in Scotland. There are 140 free of charge spaces in the car park behind Gordon’s Chemists with additional parking available in North Street, East and West Main Street and in South Street. These parking facilities are rarely full.

162. Mr Haugh stated that all the pharmacies in the neighbourhood offer a collection and delivery service for patients. He added that it was important to note that neither NHS Lothian nor any of the Interested Parties have received a complaints regarding access to pharmaceutical services in Armadale. There have been no complaints made regarding access of pharmaceutical care outwith the core hours that are offered by the pharmacies in Armadale.

163. Mr Haugh stated that there are regular bus services available across the neighbourhood. He added that there had been new bus routes introduced in Armadale which increases the flexibility of movement of people within the neighbourhood. There is a new bus from Asda, nearby the proposed pharmacy into Armadale town centre up to every 13 minutes between 9am and 6pm.

164. Mr Haugh stated that NHS Lothian operates a Model Hours Scheme which means that pharmacies are open Monday to Friday 9am to 6pm, with the allowance for one half day closure from 1pm. It is also accepted that pharmacies can close for one hour each day for lunch. An Applicant can promise to open as much beyond these Model Hours but are under no obligation to fulfil the promise.

165. Mr Haugh added that if any NHS Board believes that opening hours are required in excess of those stated in the Model Hours Scheme, the correct process to address this is to consult with the Area Pharmaceutical Community Pharmacy Subcommittee and to introduce a rota with the existing contractors. This covers extended hours, Sundays and public holidays.

166. Mr Haugh stated that Armadale Group Practice operates an appointment system offering a first appointment at 8.30am and last appointment at 5.30pm. The opening hours of the current pharmacies in the neighbourhood are between 9am and 6pm Monday to Friday proving to be sufficient. Mr Haugh went on to say that there was no evidence of a requirement for Sunday opening. There had been no complaints to NHS Lothian or the other pharmacies regarding the lack of Sunday opening hours in Armadale. He added that proposing to provide extended opening hours is not evidence of inadequacy of pharmaceutical services.

167. Mr Haugh then went on to speak about the CAR which was part of the papers for the PPC. He informed the Committee that Gordon’s Chemists had asked a Principal Planning Consultant to provide a professional opinion on the CAR. The Consultant had reported that only 60 electronic questionnaires had been received during the consultation period. Of these 60 responses, 43 thought there were gaps/deficiencies in the existing provision of pharmaceutical services in the neighbourhood. The population of the neighbourhood is 12,133 and the number of registered patients at Armadale Group Practice is 12,669.

168. The Consultant had reported that in order to arrive at a statistically significant standard 95% confidence level for 10,000 people the level of response required would be 370. He added that in this case a survey size of 60 is too small and is not statistically significant or representative of either the population or patients.

169. The Consultant had reported that the survey is 310 respondents short and is therefore statistically flawed, unrepresentative and can be given little weight in decision making. Online surveys are also unrepresentative in that respondents are self-selecting i.e. they opt to fill it out rather than being asked questions and therefore there may also be an argument of bias.
170. In summary, Mr Haugh stated that the fundamental issue for the PPC to consider is whether the current provision of NHS pharmaceutical services in the neighbourhood is adequate and if not, whether the proposed services are necessary or desirable to secure adequate services.

171. Mr Haugh added that the Applicant has been unable to prove that the service provision within the neighbourhood is inadequate and that the two pharmacies in the neighbourhood are providing a comprehensive list of core, commissioned and non-commissioned services to all the residents within the neighbourhood. None of the services are at their saturation point and all pharmacies within the neighbourhood have capacity to increase their service provision if required.

172. Mr Haugh stated that it would be his opinion that there is still a period of overprovision of service that the NAP hearing in 2010 documented and that the two pharmacies in Armadale are not operating at full capacity and are capable of sustaining further growth within the neighbourhood.

173. Mr Haugh went on to say that the neighbourhood is one of the most contentious topics in a PPC hearing and that only a compelling argument should lead to a change in the neighbourhood previously defined by the PPC in 2010 as “the town of Armadale in its entirety, bounded on the East by the A801 and on the North, South and West following the line of development to which the town of Armadale extends”.

174. This is the most appropriate neighbourhood in that:

- It is a distinct neighbourhood
- The A801 is a physical boundary
- The boundaries on the North, South and West are considered appropriate in that they included, within the neighbourhood, the whole of the town and settlement of Armadale, beyond which lay open farmland.
- Residents do not need to travel outwith the area to access any additional services.
- Neighbourhoods do not follow straight lines, cutting through streets or indeed possibly through people’s homes.

175. Mr Haugh stated that the most recent SIMD statistics show that there is only 1 DataZone within the neighbourhood which is within the 15% most deprived.

176. Mr Haugh stated that the CAR, when analysed by a Principal Planning Consultant, was found to be statistically flawed, unrepresentative and biased.

177. Mr Haugh added that the Applicant has made five other applications in the last 18 months which would suggest that Dears Pharmacy are being opportunistic in their approach, possibly targeting developments and areas that have not been constructed as yet.

178. Mr Haugh ended by saying that given the information provided, he believed that he had shown the lack of any evidence to support the existence of an inadequacy of services provision in the neighbourhood. He added that had shown the proposed services are neither necessary nor desirable to secure adequate provision and that it was for these reasons that the application should not be granted.

Questions from the Applicant to Mr Haugh

179. The Applicant asked Mr Haugh what the population of Armadale was in 2010 when the NAP decision was made.

180. Mr Haugh confirmed that the population number was 11,500.
181. The Applicant asked Mr Haugh if the Consultant who had analysed the CAR for Gordon’s Chemist had been paid.

182. Mr Haugh confirmed that he had.

183. In response to a question from the Applicant, Mr Haugh confirmed that Gordon’s Chemist in Armadale had two pharmacists working Monday to Friday.

184. The Applicant asked Mr Haugh why there was a negative trend for services in the pharmacists.

185. Mr Haugh replied by saying the MAS is a service which is showing a downward trend and in NHS Lothian the formulary is becoming more and more restrictive as patients will go to their GPs to get any items. Mr Haugh added that Gordon’s Chemist in Armadale had the highest number of EMAS registrations throughout all their Scottish branches.

186. The Applicant asked Mr Haugh if he thought there was ample parking in Armadale.

187. Mr Haugh confirmed that he knew there was and there had never been any problems reported about parking in the town.

188. The Applicant asked Mr Haugh if the two pharmacists in Gordon’s Chemist were checking only and what benefits were there of having two pharmacists on duty.

189. Mr Haugh replied that the two pharmacists were providing all services that were part of the pharmacy contract as well as providing health care advice and that customers had access to a pharmacist at all times Mondays to Fridays.

**Questions from Mr Arnott to Mr Haugh**

190. In response to a question from Mr Arnott regarding the two pharmacists on duty in Gordon’s Chemist, Mr Haugh answered that there was no issues about spending time with patients and that they were aware of EMAS and had time to offer advice on this to patients.

191. Mr Arnott asked Mr Haugh if he would still retain two pharmacists per day in the pharmacy if the application was granted.

192. Mr Haugh replied that this would need to be reviewed.

193. Mr Arnott asked if Mr Haugh thought the current opening hours were adequate. Mr Hugh confirmed that they were adequate.

194. Mr Arnott asked Mr Haugh about the CAR and the low response number.

195. Mr Haugh replied that if there was a desperate need for additional pharmacy provision in the neighbourhood, there would have been more responses to the questionnaire.

**Questions from the Committee to Mr Haugh**

196. Mrs Tait asked Mr Haugh where Gordon’s Chemist was located before the major relocation in 2010. Mr Haugh replied that they had been located in North Street.
197. Mr Connolly asked Mr Haugh to clarify the statement from EWP which he referred to in his presentation. Mr Haugh explained that the EWP had stated that the 400 proposed new homes in Lower Bathville were unviable due to the contamination and poor ground conditions. This had been stated in 2017. Mr Haugh went on to add that in 2010, there had been plans to build new homes which were to be completed in 2014. These homes have still not been built.

198. Mr Connolly asked Mr Haugh about the GP practices in the area. Mr Haugh replied that the surgery in Armadale was operating a restricted list and that new patients who live in Armadale were registering at the surgery in Blackridge at a rate of about 12 per week.

199. Mr Niven asked Mr Haugh if there had been any work started on the site of the proposed new housing. Mr Haugh confirmed that there was no work started despite planning permission being granted over 3 years ago. He was unaware of any work done on the site in order to maintain the planning application.

The Interested Parties Case – Mr Balvinder Sagoo of Boots UK Ltd

200. Mr Sagoo started his presentation by saying that applications are decided based on the Regulations; an application is granted only if it is necessary or desirable to secure the adequate provision of pharmaceutical services in the neighbourhood in which the premises are located by persons whose name are included in the pharmaceutical list.

201. Mr Sagoo went on to say that whilst people may like to see a pharmacy closer to their home, it is the matter of necessity and desirability and not simply convenience that must be considered.

202. Mr Sagoo stated that it was his understanding that the Committee would, after determining the neighbourhood, determine whether the services provided to the neighbourhood are adequate. He went on to say that if the Committee were satisfied that the existing services were adequate, then the application should be refused. If the Committee are not satisfied then they must consider whether or not the application meets any identified inadequacy that may exist.

203. Mr Sagoo added that the opinion of Boots UK Ltd was that the existing pharmacy provision adequately meets the need of the local population and persons within the neighbourhood.

204. Mr Sagoo stated that he noted the description of the neighbourhood given at the time of the consultation and in the application does not reflect the boundaries of the neighbourhood indicated on the map provided by the applicant.

205. Mr Sagoo stated that he believed the neighbourhood to be the town of Armadale to the extent of any development, the boundaries being:

- Northern boundary – the northern edge of the town up to the river
- Eastern boundary – the A801
- Western boundary – open land to the west beyond Avondale Drive
- Southern boundary – the railway line and the developed area around Southdale Way

206. Mr Sagoo went on to say that the A89 runs through Armadale but it is not a barrier to access and that furthermore there are commercial properties on both sides of the road. Mr Sagoo added that he believed those residing on either side would consider themselves to be neighbours of one another.

207. Mr Sagoo added that he noted the comment on page 5 of the CAR that one of the respondents had made – “what about houses to the north of the A89, they are part of the same neighbourhood
and there are amenities in this area such as doctor’s surgery, community centre, swimming pool and pharmacy that everyone uses”

208. Mr Sagoo stated that the site of the proposed pharmacy is within the Southdale development. He added that the Southdale website states that “the vision for Southdale, which is being delivered by landowner and developer EWP Investments (EWP) is of a thriving Community fully integrated with Armadale”.

209. Mr Sagoo went on to say that he understood that planning was applied for the next phase of the development in the middle of last year but he could not find anything on either the Southdale development site or the Lothian planning portal to suggest planning has been granted. He added that in a letter from EWP on 2 March 2017 a completion date of late 2017 was given.

210. Mr Sagoo stated that there are two pharmacies within the neighbourhood he defined as well as additional pharmacies in nearby towns and villages also providing services to the residents of Armadale.

211. Mr Sagoo added that the existing pharmacies in Armadale provide patients with a choice of pharmaceutical services. He went on to say that it wash his understanding that these pharmacies deliver the core services such as CMS, MAS, EHC and Smoking Cessation.

212. Mr Sagoo said that at Boots Pharmacy in Main Street, Whitburn deliveries are made into Armadale and Blister packs are also dispensed to patients. He added that both Whitburn pharmacies receive prescriptions from Armadale.

213. Mr Sagoo stated that the Applicant is not proposing to offer services that, if not already provided, could not be provided by one of the existing pharmacies. He added that if a need was identified for additional services or hours of service then he was sure that the existing contractors would be happy to provide these if commissioned or directed to do so.

214. Mr Sagoo stated that the existing pharmacies are reasonably accessible from all parts of the neighbourhood whether travelling by car, bus, community transport or on foot. He added that there is no evidence to suggest that patients experience significant difficulties when wishing to access pharmaceutical services.

215. Mr Sagoo informed the Committee that only 60 people, a sample size of 0.5%, responded to the consultation and not all of these were supportive of the proposal. He added that the comments within the CAR that support the application, may suggest a level of convenience but there is little or no evidence within this to suggest that an inadequacy exists.

216. In summary, Mr Sagoo stated that there is no evidence to suggest that existing pharmacies are not currently providing an adequate service to the population of Armadale or that these pharmacies will not be able to meet any need that may arise in the foreseeable future.

217. Mr Sagoo ended by stating that he therefore submitted that the application should be refused.

Questions from the Applicant to Mr Sagoo

218. The Applicant asked Mr Sagoo if Whitburn and Armadale were reliant on collection and delivery.

219. Mr Sagoo conformed that Armadale was.

Questions from Mr Arnott to Mr Sagoo
220. Mr Arnott asked if Mr Sagoo agreed that if you lived 2.5 miles from and extended hours pharmacy (open until 8pm and Sunday opening) this was provision of an adequate service.

221. Mr Sagoo agreed that this was provision of an adequate service to the population.

**Summing Up**

222. The Applicant and the Interested Parties were given the opportunity to sum up.

223. Mr Sagoo of Boots UK Ltd summed up by making the following points:
   - There seemed to be confusion about the north boundary of the Applicant’s defined neighbourhood
   - There was concern about the house building timescales
   - The current services are adequate

224. Mr Haugh of Gordon’s Chemists summed up by making the following points:
   - The Applicant was unable to prove inadequacy
   - Both pharmacies in Armadale provide core pharmaceutical services
   - Both pharmacies in Armadale have the capacity to increase services if required
   - Pharmaceutical services in the neighbourhood are still in the position of overprovision
   - There has been an increase of only 730 residents in the neighbourhood since 2010
   - The Applicant’s defined neighbourhood is contentious and confusing. The A89 is not a natural boundary
   - The CAR is statistically flawed and biased

225. Mr Arnott of Lloyd’s Pharmacy summed up by making the following points:
   - There is no real evidence of inadequacy
   - There is no local support for the proposed pharmacy
   - Existing pharmaceutical services are adequate and extended hours are already offered
   - Lloyds Pharmacy was impacted when Gordon’s Chemist moved in 2010
   - No complaints have been received about the exiting pharmacy provision in the neighbourhood
   - The application should not be granted as it was neither necessary nor desirable

226. The Applicant summed up by making the following points:
   - If the application is granted, Dears Pharmacy would ensure that the pharmacy was fully DDA compliant
   - Health Care professionals would have the use of a room within the pharmacy
   - The Community Council are supportive of the application
   - There are currently challenges for existing pharmacy premises
   - The Armadale Group Practice are currently operating a restricted patient list

227. At the conclusion of the summing up, the Chair asked the Applicant and the Interested Parties if they considered that they had had a fair and full hearing. Both the Applicant and the Interested Parties agreed that they had had a fair and full hearing and there was nothing further that they wished to add.
228. The Chair advised that the Committee would now consider the application and representation and make a determination. A written decision with reasons would be prepared and a copy sent to them as soon as possible. A letter would be included with the decision advising of the appeal process. The Chair then thanked the parties for attending.

The Applicant (Mr Mahyar Nickkho-Amiry and Mr Barrie Dear), Interested Parties (Mr Tom Arnott, Mr Rodney Haugh, Ms Maria Donnelly, Mr Balvinder Sagoo and Ms Emma Kean) and Board Administrator (Mrs Susan Summers) then left the meeting.

Decision

229. The Committee was required to and did take account of all relevant factors concerning the issues of neighbourhood, adequacy of existing pharmaceutical services in the neighbourhood and whether the provision of pharmaceutical services at the premises named in the application was necessary or desirable to secure adequate provision of pharmaceutical services in the neighbourhood in which the premises are located.

230. In addition to the oral submissions put before them, the Committee also took account of all written representations and supporting documents submitted by the Applicant and Interested Parties and those who were entitled to make representations. The written representations received and considered by the Committee were:

i. Email from Dr Peter Shishodia of the Lothian General Practitioners Sub-Committee of the Area Medical Committee
ii. Letter from Matthew Cox of Lloyds Pharmacy
iii. Letter from Mr D. John Clark of Gordon’s Chemists
iv. Letter from Ms Joanne Watson of Boots UK Ltd

231. The Committee also considered:

v. The Consultation Analysis Report (CAR)
vi. The location of the nearest existing pharmaceutical services
vii. The maps of the area surrounding the proposed premises detailing the location of the nearest pharmacies and GP surgeries, deprivation categories and population density
viii. Information regarding the number of prescriptions dispensed by the pharmacies nearest to the proposed premises
ix. Information regarding the number of prescriptions dispensed that were issued from the GP surgeries closest to the premises
x. Pharmacy profiles of the nearest pharmacies detailing opening hours, premises facilities and services offered

Neighbourhood

232. Having considered the evidence presented to it, the Committee’s observations from the maps before it and the site visit undertaken prior to the meeting, the Committee had to decide the question of neighbourhood in which the premises, to which the application related, were located.

233. The Committee did not accept the neighbourhood proposed by the applicant but instead accepted the following as more appropriate:

The town of Armadale in its entirety, bounded on the East by the A801 and on the North, South and West following the line of development to which the town of Armadale extends.
Adequacy of Existing Provision of Pharmaceutical Services and Necessity or Desirability

234. Having reached that decision the Committee was then required to consider the adequacy of existing pharmaceutical services in that neighbourhood, and whether the granting of the application was necessary or desirable in order to ensure adequate provision of pharmaceutical services in the neighbourhood.

235. The Committee felt that there were no gaps in the existing provision of services within the neighbourhood as the two pharmacies in Armadale were providing the full range of pharmaceutical services. In addition there are a further 5 pharmacies in the extended area surrounding Armadale providing a wide range of services to the population. The Committee also noted that the Lloyds Pharmacy in Bathgate offered extended hours and this pharmacy was within a reasonable distance for the Armadale population.

236. The Committee felt that the existing pharmacies in Armadale had capacity to take on additional patients and could quite easily absorb any increase. The Committee also noted that there were two pharmacists on duty in Gordon’s Chemist during weekdays which provided a higher level of service than is usual.

237. The Committee considered the CAR and noted that only 63 responses to the survey (out of a population of over 12,000) were received. The comments of the respondents were considered and the Committee felt that the CAR did not demonstrate adequate proof of a need for an additional pharmacy in the neighbourhood.

238. The Committee further noted that there was no reference in the Pharmaceutical Care Service Plan of a need for additional pharmaceutical services in Armadale.

239. The Committee discussed the social factors of the area and having considered the information provided, decided that there were no significant demographic changes.

240. The Committee noted that there were adequate public transport services and that the car ownership figure was above average for the Armadale area. The Committee agreed that the parking available in Armadale was more than adequate.

241. The Committee considered the new house building taking place in the area and noted that over 300 new houses have been built so far but the timescale for the additional new houses is unclear. The existing pharmacies would therefore be able to cope with the increase in demand.

242. The Committee noted that the Applicant had made reference to a new Health Centre in Armadale but there was no evidence to suggest that this was going to happen soon.

In accordance with the statutory procedure the Pharmacist members of the Committee (Mr John Connolly and Ms Julie Blyth) left the meeting and were excluded from the voting process

243. The Committee agreed unanimously from the information made available that the existing pharmaceutical services in the neighbourhood were adequate.

244. Accordingly, the Committee agreed that the provision of pharmaceutical services at the premises was neither necessary nor 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.
245. In these circumstances, it was the Committee’s unanimous decision that the application should not be granted.

Signed………………………………………………..       Date: 12 March 2018………..

Derek Milligan, Chair
Pharmacy Practices Committee