



PRIMARY CARE CONTRACTOR ORGANISATION

PHARMACY PRACTICES COMMITTEE

Application by CD Chem Ltd for inclusion in the pharmaceutical list in respect of the address, Unit A, 2 Sycamore Walk, Blackburn, West Lothian, EH47 7LH.

The Pharmacy Practices Committee met in the Meeting Room at Ashgrove Group Practice, Blackburn Partnership Centre, Ashgrove, Blackburn, EH47 7LL at 11.30 am on Friday 17 May 2019 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 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 that accordingly the application should be granted.

Pharmacy Practices Committee

Fiona O'Donnell (Chair)
Hazel Garven (Non-contractor Pharmacist)
Mike Embrey (Contractor Pharmacist)
John Niven (Lay member)
Keith Kirkwood (Lay member)

Liz Livingstone (Administrator to the Pharmacy Practices Committee)
Louise Hockaday (Assisting Liz Livingstone)

1. The Committee convened to consider an application for inclusion in the pharmaceutical list, dated 3 October 2018, by CD Chem Ltd in respect of the address, Unit a, 2 Sycamore Walk, Blackburn, West Lothian, EH47 7LH. A copy of the application had been circulated in advance to the Committee and the parties.
2. Schedule 3 of the National Health Service (Pharmaceutical Services)(Scotland) Regulations 2009, as amended requires the health board to invite certain specified persons and bodies to make representations to the board in respect of the application.
3. Written representations had been received from Joanne Watson of Boots UK Ltd, Matthew Cox of Lloyds Pharmacy, Olayinka Ogunnoiki of Dunamis Pharmacy, Lothian Area Pharmaceutical Committee, Lothian General Practitioners Sub-Committee of the Area Medical Committee and Alison Kerr of Blackburn Community Council. Copies of the written representations had been circulated in advance to the Committee and the parties.

4. Unsolicited letters of support were received from Fiona Hyslop MSP, dated 28 August 2018, and from Hannah Bardell MP for Livingston, West Lothian on 1 February 2019. These persons have no statutory right to make representations on this matter and the Board did not consult them. The letters were made available for information only.
5. The Committee had before them maps of the area surrounding the proposed premises detailing the location of the nearest pharmacies and GP surgery, deprivation categories and population density. They had details of the numbers of prescriptions dispensed during the months August 2018 – January 2019 by the pharmacies nearest to the proposed premises and the number of prescriptions they dispensed that were issued from the GP surgery closest to the premises from January 2018 to December 2018. The Committee were also provided with “Pharmacy Profiles” of the nearest pharmacies detailing opening hours, premises facilities and services offered. The CAR and the Pharmaceutical Services Care Plan had been circulated in advance.
6. Under paragraph 5(10) of the Regulations the Committee was required to decide 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.”
7. It had been confirmed prior to the meeting that the Committee members present did not have an interest to declare.
8. The Committee agreed to invite the applicant, CD Chem Ltd, and those who had made written representations to attend before them. They were:-

Chris Johnstone, representing CD Chem Ltd and assisted by Damian Nugent
Balvinder Sagoo, representing Boots UK Ltd and assisted by Emma Kean
Niral Nathwani, representing Lloyds Pharmacy
Alison Kerr, representing Blackburn Community Council.
9. The Chairman explained the procedure that would be followed, that the proceedings would be recorded and the recording would be destroyed after the minute had been agreed. 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 those who had made written representations and the Committee to ask questions. Those who had made written representations then made their oral representations and the Applicant and the Committee then asked questions of them. 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. 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 surgery and the neighbourhood as defined by the applicant.

12. 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.

Neighbourhood

13. In their written application, CD Chem Ltd had defined the neighbourhood as Blackburn and Seafield. (**North** – M8, **East** – Where M8 meets the A779, down to the B7015 and from there to where it meets the River Almond, **South** – River Almond incorporating Seafield, along to where it meets the A705 (West Main Street) and from here along to where the A705 meets the A801, **West** – A801 from where it meets the A705 to the roundabout underneath the M8). CD Chem Ltd stated that Blackburn and Seafield have a great deal of commonality and there are a number of properties in the short distance between, so housing is pretty continuous.
14. Mr Sagoo stated that he had no objections to the neighbourhood as defined by the applicant as it is exactly the same boundary that was submitted at the 2010 hearing. He advised that Blackburn sits within the Whitburn and Blackburn Ward (which also includes Seafield).
15. Mr Nathwani stated that he had no objections to the neighbourhood as defined by the applicant.

The applicant's case

16. The Applicant (Chris Johnstone) thanked members of the Committee for the opportunity to put forward his application for inclusion in the pharmaceutical list and stated that he and Damian Nugent were both pharmacists.
17. In his presentation, the Applicant confirmed that areas of this neighbourhood are considered to be in the bottom 20% of the Scottish Index of Multiple Deprivation. He advised that one of the data zones has seen a drop into the bottom 1% of data zones since 2011. He confirmed that 22% of the population within the neighbourhood take antidepressants as opposed to 18% for West Lothian. He also confirmed that 16% of primary school children are obese, and this is significantly higher than West Lothian's average of 9%.
18. The Applicant reported that there is one existing pharmacy in the neighbourhood. A further two pharmacies are approximately 2.5 miles away and it would take 50 minutes to walk to them. Therefore almost a two hour trip to get a prescription dispensed. Public transport (buses) run every 30 minutes however this is less frequent during off peak hours.
19. The Applicant advised that responses within the CAR highlighted that local people were having their prescriptions dispensed out with the local Boots pharmacy as they were unhappy with the service provided. Chris Johnstone highlighted 5 examples from the CAR.
20. The Applicant asked the Committee to consider whether the service provided by the local Boots pharmacy was adequate. He asked them to consider the 4 pharmacy core services and how they achieve specific outcomes for patients. He advised that the factors involved in providing each of these services were (1) privacy (2) waiting times (3) staffing (4) stock

availability. He pointed out that the responses in the CAR highlighted quality of service issues with all 4.

21. He advised that providing available space plays an important role in delivering the core services. He provided 2 examples of responses from the CAR. He advised that the lack of space impacted on confidential conversations and as the existing counter space was limited to dealing with one customer at a time, it impacted on queues that could form. He provided 6 examples of responses from the CAR.
22. He also reported that privacy is fundamental to carrying out consultations and sharing information with patients, and provided 3 responses from the CAR where he highlighted no privacy even in the consultation room.
23. The Applicant considers that privacy is crucial in providing an acceptable service. He asked how the minor ailment service can be provided without it. He stated that it would therefore be unlikely that a Public Health or Pharmacy First service can be provided to a good quality and provided a response relating to this issue from the CAR.
24. The Applicant reported that Boots are limited to ordering most of their stock from their parent wholesale company and it results in them having specific gaps in the stock held, which means that patients have to go elsewhere to obtain their medicines. The applicant provided 4 responses from the CAR and advised that it could lead to a risk to patient health.
25. The Applicant stated that the CAR also highlighted responses to the issue of return visits and waiting times which showed quality of service issues from Boots. The Applicant provided 2 examples of responses from the CAR. Additionally he questioned the issue of quality of service from the staff. The lack of staff numbers were highlighted to the Committee with 4 responses from the CAR. A further 3 responses were provided from the CAR regarding incidences of errors.
26. The Applicant reported that Boots were unable to offer dosette boxes or weekly compliance aids, despite patients asking for this service. 3 responses from the CAR were provided to the Committee.
27. The Applicant confirmed that the CAR demonstrated the inadequacy of the service being provided to the community and reported that the same failings were reported in 2016 at the time of their previous application.
28. The Applicant stated that Boots had failed to take any action to rectify their inadequacies and the community had lost all confidence in the service provided to them.
29. To address all of the inadequacies mentioned, the Applicant stated that within the proposed pharmacy there will be approx 1,100 sq feet of floor space, plenty of seating within the waiting area, two robust consultation rooms with 1500mm turning circles for wheelchair and pram access. There will be a split counter to allow more than one member of staff to serve at a time. The Applicant provided 8 responses from the CAR of expectations of how a new pharmacy would meet their needs.
30. The Applicant advised that CD Chem Ltd intend to open in the evening and at the weekend, when the GP surgery is closed. Both Damian Nugent and Chris Johnstone would work in the

pharmacy, doubling cover during the busy parts of the day. This would also allow for home visits to assess the vulnerable in the community. The Applicant advised that as the regeneration plan for Blackburn highlights high levels of demand for Mental Health services, the proposed pharmacy can offer medication reviews, give compliance advice and mental health first aid to the most vulnerable. 5 responses from the CAR were highlighted to note the comments from the community about longer opening hours and weekend provision.

31. The Applicant referred to public health data highlighting that Boots in Blackburn dispenses on average 8500 items per month from Ashgrove Medical Practice. A further 3000 items are dispensed by other contractors or other Boots stores in Whitburn and the Gyle. The applicant expects to bring 3000 items back to the proposed pharmacy by increasing the quality of service to the community. The Applicant stated that it should be viable for both practices based on approx 11500 items per month.
32. The Applicant pointed out that if the Boots pharmacy were to dispense half their current items, it would secure an adequate provision of service for the residents, relieve the pressure on the existing Boots store, allowing them to improve their service which would benefit the residents.
33. The Applicant mentioned that both he and Damian Nugent planned to leave their current position to take on this new challenge. The proposed premises would be fitted out by a specialist pharmacy contractor (RDC) and would be ready to operate within 4 months of the application being granted.
34. The Applicant mentioned that if Boots had rectified all of these problems, then we would not have been at this meeting today, however the CAR's comments from consultation are irrefutable and as people feel so strongly about this, he respectfully asks the Committee to grant their application.

Questions from Mr Balvindar Sagoo to the Applicant

35. Mr Sagoo asked the Applicant if he was an organised individual as Mr Sagoo had received information relating to the application in an untimely manner and he wanted to know if the Applicant could provide a pharmaceutical service in an adequate and timely manner.
36. The Applicant confirmed that he was an organised individual and that the delay was due to NHS Lothian administration issues.
37. Mr Sagoo stated that on receiving a copy of the Applicant's floor plan, he noticed that the premises would not be considerably bigger than the Boots store, the only difference is a further consultation room.
38. The Applicant advised that the proposed consultation rooms are bigger than the one in the Boots store, and both rooms will be used frequently. The Applicant also advised that these are essential in relation to the privacy of consultations with patients. He also pointed out that they would be positioned in the new pharmacy away from any queues and the location would mean easy access for wheelchair users and prams.
39. Mr Sagoo asked if the Applicant's 10% increase in space is adequate enough to meet the Applicant's version of the Boots store inadequacies.

40. The Applicant advised that it was more about the design layout of the pharmacy, and he is confident that this approach to the patient's requirements is different.
41. Mr Sagoo asked about where the provision of staff facilities was on the plans.
42. The Applicant confirmed that although the plans were not yet finalised, the facilities would be situated at the back of the dispensing area. He advised that this would be quite adequate for the staff.
43. Mr Sagoo advised that this would lead to lack of space for patients in the future floor plan and asked the Applicant if the new pharmacy would be smaller than the current one.
44. The Applicant stated No.
45. Mr Sagoo asked how many Community Council Meetings he had attended.
46. The Applicant advised that over the past 3 years he had attended meetings. He confirmed that this would be about 10 meetings, some invited and some volunteered.
47. Mr Sagoo asked how many staff he would have in the pharmacy.
48. The Applicant confirmed that he would have 2 pharmacists, 1 full time dispenser, 1 part time dispenser, 1 full time assistant, one part time assistant and 1 part time delivery driver.
49. Mr Sagoo asked how many days there would be 2 pharmacists.
50. The Applicant responded that the pharmacists would operate a rota system. One would start at 8.30am and work until half 3, and work each Saturday until 6pm. The other would start at 12noon and work through until 8pm, and work on the Sunday shift.
51. Mr Sagoo asked how many items the Applicant thought was needed to make the pharmacy viable.
52. The Applicant stated that they are confident that they will bring back 3000 items per month from outwith the area would be viable.
53. Mr Sagoo responded by asking if 750 items per week would be viable.
54. The Applicant confirmed that he had taken advice from his mentors regarding this. He recognises the saturated aspect of the area and is aware of dis-satisfied patients going out with the area. He would be happy with 4500 items per month, but is very aware that the total number of 11500 scripts issued by the local medical practice per month would be viable for two pharmacies.
55. Mr Sagoo asked again if 750 items would be viable. Mr Sagoo also asked if it was the pharmacy mentor/expert or the bank who was confirming the viability of 750 items.
56. The Applicant said Yes.

Questions from Mr Niral Nathwani to the Applicant

57. Mr Nathwani asked the Applicant if the CAR dated 31 August 2018 is still valid.
58. The Applicant confirmed yes. He commented that the same findings were found as the previous joint consultation (Jan 2017) up until the CAR results of August 2018. The Applicant stated that there was not a drastic change in the way things have been.
59. Mr Nathwani asked the Applicant if Boots were to move into a bigger premises would that address adequacy.
60. The Applicant replied that he did not know why Boots had not addressed this problem previously. He questioned that saturation requires more space for privacy and waiting time issues. He stated that there had been no continuous re-investment ie staff and mentality.
61. Mr Nathwani asked the Applicant if Boots were to move in more staff would it be adequate.
62. The Applicant confirmed that it was hypothetical. Boots have not kept promises before and have attended the community council before but still not improvements addressed.
63. Mr Nathwani asked if the Applicant was aware that the Mill Centre was being developed.
64. The Applicant responded yes, but there is nothing concrete yet. There is no planning in place and suggested that if Boots move into a portacabin, this could be a factor. However nothing is guaranteed.
65. Mr Nathwani asked the Applicant what Scotmid will do regarding the redevelopment.
66. The Applicant advised that Scotmid has access rights to the area and the supermarket. Therefore there will be disabled access.
67. Mr Nathwani asked why the Board had not asked Boots to extend its opening hours if there was such an issue.
68. The Applicant confirmed that he did not know however the services are critical and there is a need for an out of hours service. The Applicant also mentioned that he wanted to help with mental health issues in Blackburn as there is a crisis in the area. He has had discussions with the practice manager at the medical practice and he is keen to offer mental health first aid.

Ms Kerr declined to ask questions to the Applicant

Questions from the Committee to the Applicant

69. The Chair mentioned that the Applicant had been quite critical of the existing service so what additional services would CD Chem provide.
70. The Applicant confirmed that he wanted to take away the privacy issues to allow his staff and the community to have genuine conversations about health issues. He wants to open up

conversations about hypertension and heart failure, based on the health issues within the community. He has a particular interest in mental health first aid and he advised that he has considerable experience of 9 years from his current role within community pharmacy management. However all of these conversations need to take place in an environment of space and privacy, without queues.

71. The Chair asked if the Applicant would accept that there had been some changes made by Boots eg seating.
72. The Applicant acknowledged that although the seating has changed, he does not know what this change has done to impact the waiting times, or the privacy of patients, or address the queues or the error rates.
73. The Chair asked the Applicant to clarify their understanding of the closing time of Boots on a Saturday. The Applicant confirmed that he had used this information from a response in the CAR, however noted that the time may not be accurate.
74. The Chair asked the Applicant to confirm if there is only one counter in the Boots store. The Applicant advised that it is his understanding that there is one counter and it's the one that tends to get used. He has had it corroborated many times that one counter is only used, and is not sure if this is due to staffing levels not being adequate, but in his opinion it does not help with the queues.
75. The Chair advised that on a recent visit to the Boots pharmacy the main serving area had a partition which allowed two separate queues to be formed. In addition, there was a second till point. The Chair asked if the Applicant would accept that this is an accurate description. The Applicant said yes. But he has not had any comments from residents to say things have significantly changed.
76. Mr Niven commented that he had read that there had been a previous application and wanted to know if CD Chem has been involved. The Applicant confirmed that they were, however there were some issues with the lease on the previous property and they had to dissolve the application.
77. Mr Niven asked what made CD Chem decide that the new premises were suitable for this new application. The Applicant advised that he wished he had seen the premises long ago as the area is the focal point in the community. Great access into the area, complete parking, disabled access and a big enough unit.
78. Mr Niven asked that looking at the prescription figures for Ashgrove Medical Centre he wanted to know why 6% of items were dispensed at the furthest away pharmacy. The Applicant stated that Bield Housing Association use another pharmacy because it was not getting the quality of service that it required and therefore moved out with the area. Unfortunately this is an issue for the people of Blackburn who are of the most vulnerable within West Lothian, with mobility and long term issues.
79. Mr Niven asked if the Applicant had under taken any other research other than the CAR. The Applicant advised that they have been involved in this process for over 3 years and to corroborate their understanding of the local situation they have been heavily involved with Ashgrove Medical Practice Manager, Pamela and the Community Pharmacist, Lindsay based

also out of Ashgrove. The Applicant knows that other Pharmacies out with the area offer a comprehensive delivery service and that Blackburn is deserving of this same adequate service. The Applicant expressed that he wants the community of Blackburn to have a satisfactory level of service from the local pharmacy however has engaged with local businesses and the local community council to corroborate the current issues and support CD Chem.

80. Mr Kirkwood asked the Applicant to confirm what difference in space his pharmacy will have that Boots does not.
81. The Applicant confirmed that the width is the difference, ie it is a wider style unit. It is a very similar style to what the Applicant is familiar with, in fact almost identical to the one he currently works in. He stated that the one he is in currently dispenses a higher volume than Boots does, but the design is a proven one and can accommodate more prescriptions and patients.
82. Mr Kirkwood asked if the area at the back of the dispensary will be visible to the public.
83. The Applicant confirmed that it would be a separate, private space.
84. Mr Embrey asked what the population is in the neighbourhood. The Applicant confirmed 7109.
85. Mr Embrey mentioned the Applicants comments about his business plan and how many staff he planned to have, and the number of items required to hit viability. Mr Embrey asked how many weeks/months/years he required to break even.
86. The Applicant advised that he thought they would be stable within 12 months. As it is a new venture, within the first 12 months, they would have an understanding of the number of prescriptions that they would expect, therefore make the business work. They have taken a lot of guidance from their mentors and know it may take one to two years.
87. Mr Embrey asked what happens if it does not work within 18 months.
88. The Applicant advised that they very much wanted it to work, and believed that it would. He advised that by providing good quality of service to the neighbourhood, this would strengthen their business. They have also been offered part time staff who they know professionally, who will help them out with their staff options.
89. Mr Embrey confirmed that the Applicant had not really answered his question regarding contingency.
90. The Applicant advised that he would review their salaries, review staffing and take advice from the bank regarding other facilities.
91. Mr Embrey mentioned that the Applicants opening hours were beyond model hours.
92. The Applicant advised that they would take advice, if times got tough. He wanted to build a quality based business based on their IEP qualifications, especially a mental health service.
93. Mr Embrey asked if the Applicant was surprised by the result of his FOI request on volume of complaints at Boots.

94. The Applicant said that he knew this current year is pending, but the voice he is hearing from the community is that they are voting with their feet.
95. Mr Embrey asked what are the peak and quiet times within the Mill Centre.
96. The Applicant expects this to be mid morning and mid afternoon.
97. Mr Embrey advised that he had visited today at between 10am and 10.30am and what he saw did not reflect the CAR and huge waiting times.
98. The Applicant confirmed that Alison Kerr from the Blackburn Community Council could provide more insight into that. The Applicant can only go on what he has seen within the past 2 years.
99. The Chair asked about the blister pack service, and what is the issue that was being raised regarding this.
100. The Applicant advised that he had concerns that members of the public were having to travel to Whitburn or Livingston to get changes to their medication or if they needed help with their appliances because the level of service provided by the Boots was inadequate. He explained that the big waiting times led to the pharmacy being saturated, that led to there being no privacy, that led to there being no time for a patient to be appraised.
101. Ms Garven asked in relation to the current population of just over 7000, was the Applicant aware of any future developments. The Applicant advised that within the current neighbourhood he was not aware of any changes.
102. Ms Garven asked if during the application process the Applicant had a formal discussion with the GP's from the practice.
103. The Applicant replied not really, just had formal discussions with the practice manager.

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

104. Mr Sagoo thanked the Chair and the members of the Committee for giving him the opportunity to speak on behalf of Boots Pharmacy in Blackburn. Mr Sagoo explained that David Fancourt, the local pharmacist in Blackburn was unable to make the meeting as he is on annual leave. Mr Sagoo advised that Mr Fancourt was disappointed to miss the hearing as he deeply cares for the community.
105. Mr Sagoo read out the Legal Test and confirmed that he would state the reasons why the application should be refused.
106. Mr Sagoo confirmed that he had no objections to the defined neighbourhood. He advised that the West Lothian Council website and ward profile states that the population of Blackburn is 5250 and the population of Seafield is 1360, therefore the total population is 6610.
107. Mr Sagoo advised that the proposed premises do not provide any improved access by way of location as patients would access both pharmacies in the same way.

108. Mr Sagoo confirmed that the Mill Centre is to be redeveloped, and Boots have received confirmation from their landlord that Boots will have suitable premises throughout the redevelopment and have a permanent unit within the developed site. Mr Sagoo confirmed that Boots have been in talks with regards to alternative premises and are proud that they provided the pharmacy services to the residents of Blackburn for 27 years and are committed to do so for years to come.
109. Mr Sagoo confirmed that a previous application was refused by the PPC on 25 February 2011. Mr Sagoo advised that from reading the new application and CAR, he believed that there was no significant change of circumstances that would warrant this application to be granted.
110. Mr Sagoo advised that Boots has provided dispensing and pharmaceutical services in Blackburn since 1992. The number of items dispensed has remained static in the past ten years. (2002 per week in 2009/10 and 2071 in 2017/18). Mr Sagoo confirmed that the pharmacy entrance is without steps, has a power assisted door and an induction loop. It also has a consultation room, large enough for a wheelchair user and is private. Mr Sagoo confirmed that Mr Fancourt has been in place since January 2018. Mr Sagoo also confirmed that the store has a full time accuracy checking technician and a second pharmacist who works every Tuesday and Thursday. The pharmacy also provides all essential core and national services.
111. Mr Sagoo advised that in the past 12 months the store has increased the Minor Ailment service by more than 10%. Mr Sagoo also confirmed that Mr Fancourt has written more than 100 prescriptions under the Pharmacy First service. He also advised that Mr Fancourt has a great relationship with the GPs and Practice Team.
112. Mr Sagoo confirmed that Boots also offer a range of services eg smoking cessation. He also confirmed that Boots there has never been a service that Boots has never been unwilling or unable to provide.
113. Mr Sagoo confirmed that his pharmacy team have a good relationship with the GP surgery. He also mentioned that Mr Fancourt has attended community council meetings and he has built up an open door policy with the community council. Mr Sagoo commented that there has been a big improvement in the store since Mr Fancourt took up the position and the Chair of the council has commented that this is the case. Mr Sagoo mentioned 4 examples of positive customer feedback and 4 positive comments from the CAR. Mr Sagoo stated that with Boots' own customer feedback mechanism and the CAR report, he stated that many customers are delighted with the service they receive from the pharmacy.
114. Mr Sagoo commented that the General Pharmaceutical Council completed an inspection in 2015 and classified the pharmacy as Good.
115. Mr Sagoo confirmed the opening hours and stated that the pharmacy is open half an hour before the first GP consultation and half an hour after the last GP consultation. They are open all day on Saturday. Mr Sagoo also commented that Lloyds Pharmacy in Bathgate is open until 8pm weekdays and from 12noon until 4pm on a Sunday. Mr Sagoo confirmed that to his knowledge Boots Blackburn has never been asked to provide additional hours of service.
116. Mr Sagoo advised that FOI information indicates that 71% of items from the Medical practice are dispensed by Boots in Blackburn with Boots Whitburn and Deans Pharmacy also

dispensing items (8% each). Mr Sagoo does not agree that pharmacies out with the neighbourhood are too far away and challenging for the residents to access.

117. Mr Sagoo read to the Committee the regulations requiring the PPC to have regard to the likely long term sustainability of the pharmaceutical services provided by an applicant and the effect on existing pharmacy provision. Mr Sagoo stated that as Boots are the only pharmacy in Blackburn with 90% of pharmacy items coming from the GP practice and the numbers have not increased since 2010, the effect on their pharmacy would be significant. Mr Sagoo stated that if their viability was affected they would need to re-evaluate their position.
118. Mr Sagoo mentioned that he had many concerns about the CAR and advised that less than 10% of the population bothered to send a response, therefore it was hardly considered indicative of what the majority felt. Mr Sagoo also mentioned that he had also raised concerns with the Board about additional questions that had been included in the joint consultation. Mr Sagoo felt that the additional questions appeared to seek to advance the applicants position and as they were the first questions asked, could affect the way in which the respondents answer the subsequent questions. Mr Sagoo commented that the inclusions of the 3 additional questions are likely to result in the consultation being biased, even unconsciously towards the proposed application.
119. Mr Sagoo also mentioned further concerns regarding the CAR. He stated that the reporting of the CAR by the author may lead the reader. Mr Sagoo felt the CAR was not clear, for example he wondered how many respondents are residents of the community.
120. Mr Sagoo also commented on not receiving the CAR in a timely manner.
121. Mr Sagoo commented on the Pharmaceutical Care Service Plan, that there is nothing to indicate that existing services are not providing an adequate service / or that a further pharmacy is required to secure adequate services.
122. Mr Sagoo summarised that Boots pharmacy already provides an adequate service, endorsed by the community council, the General Pharmaceutical Council and the patients. He stated that it is impossible for two pharmacies to be viable. Mr Sagoo commented that the Applicant has not demonstrated inadequacy in the current pharmaceutical provision and he would ask the PPC to refuse the application because it is not necessary or desirable.

Questions from the Applicant to Mr Sagoo

123. The Applicant asked Mr Sagoo what his role is within Boots UK and where does he normally work.
124. Mr Sagoo said he was the regional pharmacy manager based out of Falkirk, covers several health Boards
125. The Applicant asked if he was aware of the guidelines around the distribution of the consultation analysis report.
126. Mr Sagoo stated that he was.

127. The Applicant asked for clarity of which Pharmaceutical Care Services Plan Mr Sagoo referred to.
128. Mr Sagoo advised that he thought it was 2015, and then corrected himself and stated it was 2014.
129. The Applicant asked Mr Sagoo is he was aware that there was a more recent version dated 2018.
130. Mr Sagoo said he was not aware of that.
131. The Applicant asked Mr Sagoo if he accepted he had no input in the distribution of the CAR.
132. Mr Sagoo said Yes.
133. The Applicant asked Mr Sagoo if when patients use strong words, eg horrendous, diabolical, does he regard this as bias or does it concern him.
134. Mr Sagoo advised that it would depend on what circumstance the person would use those words, and on what basis.
135. The Applicant asked what Mr Sagoo thought if one of those words were "my colostomy items are never there and no private space to ask".
136. Mr Sagoo stated that this was one comment from one patient, he do not know the context of this statement.
137. The Applicant asked Mr Sagoo if he felt that the comment in the CAR "please ensure the consultation rooms are private, I refuse to use these services in the current set up and its extremely undignified, unpleasant and people can clearly over hear what being discussed" was biased.
138. Mr Sagoo commented that it was not the comments that were biased but the presentation. He was talking about the words that were used in the headings within the CAR that can create bias.
139. The Applicant stated that he did not have anything to do with the distribution of the CAR. The Chair acknowledged that the Applicant did not. Mr Sagoo commented that his he still feels the same point that the CAR can create a bias to the reader.
140. The Applicant asked if Mr Sagoo accepted that the questions asked within the CAR covers the areas required in application legislation.
141. Mr Sagoo stated Yes.
142. The Applicant asked whether Mr Sagoo agreed with the comments in the CAR regarding the Minor Ailments Service.

143. Mr Sagoo was unclear what the question meant. The Applicant stated that he wondered if the service was inadequate as some people had commented within the CAR that they were making appointments at the local GP practice rather than use the Minor Ailment Service.
144. Mr Sagoo confirmed that he did not think the service was inadequate; in fact the service has grown 10% since Mr Fancourt arrived – an extra 90 people have registered. And the pharmacist has also written 100 scripts for the Pharmacy First service, so he does not think the service is inadequate.
145. The Applicant asked why people use a GP rather than a local pharmacy for minor ailments.
146. Mr Sagoo advised that if a person was at the GP for something else, he would think that if a patient asked for example Paracetamol, he would think that the GP would write out a prescription for them.
147. The Applicant asked Mr Sagoo what he thought about the responses in the CAR to people who wanted a second pharmacist in the area so that they could access a minor ailment service.
148. Mr Sagoo confirmed that he thought they provided a great minor ailment service within the community.
149. The Applicant asked what led to the increase in the minor ailment service engagement in the neighbourhood.
150. Mr Sagoo stated that it was a National service requirement and every pharmacy would want to help the community that they work in.
151. The Applicant asked Mr Sagoo why the number of applications had dropped from 1139 in 2016 to 986 in 2017.
152. Mr Sagoo commented that there was Scottish Government guidance regarding access to the service that saw a big decrease, but now seeing an increase.
153. The Applicant asked what has changed legislation wise since taking the decrease. He was not aware of a change in legislation
154. Mr Sagoo said there was some guidance that came out of Community Pharmacy Scotland.
155. The Applicant asked why Dunamis Pharmacy has seen a 22% increase in prescription numbers from Ashgrove Medical Practice.
156. Mr Sagoo advised that as they were only getting about 5% of the total number of prescription from Dunamis, 22% is not a big increase. He advised that he did not know the answer as to why this has happened, but he would guess that people have moved to the area.
157. The Applicant asked why Omicare was getting such large numbers of prescriptions when it was the furthest away pharmacy from Blackburn.
158. Mr Sagoo explained that this was due to the pharmacy taking a business from Boots that they used to prescribe to.

159. The Applicant asked why in the CAR one response was to describe the consultation room as an office.
160. Mr Sagoo advised that the room may not always be a consultation room, however if there is a patient requirement, they would always have precedence over anything.
161. The Applicant asked what has Mr Fancourt done to reduce the privacy issues.
162. Mr Sagoo confirmed that it is fairly evident that they have done a whole host of things to improve privacy. Removed the gondola, the use of two counters, and therefore better triage of patients and definitely created a better environment. Mr Sagoo also advised that there have not been any complaints this year.
163. Mr Sagoo became very unhappy with the Applicant saying that the Applicant had made a hand movement and that the Applicant was not listening to him. The Chair intervened and asked Mr Sagoo not to be so adversarial and told Mr Sagoo that it is for the committee to listen to the questions and answers and make a judgement on everything that is said. The Chair asked the Applicant and the Interested Party to continue.
164. Mr Sagoo confirmed that so far he had had no complaints from patients in the store this year and Mr Fancourt and the relief pharmacist will do everything to ensure that privacy is adhered to.

Questions from Niral Nathwani to Mr Sagoo

165. Mr Nathwani asked how many patients had to return for the remainder of their prescription.
166. Mr Sagoo confirmed about 10 patients per week.
167. Mr Nathwani asked if Boots use only one supplier – Alliance.
168. Mr Sagoo confirmed that this was not the case, as Boots can get access to every supplier. Mr Sagoo mentioned that there are currently 140 medicines with access issues, but Boots can use all suppliers.
169. Mr Nathwani stated that he expects Boots to have a large customer care team at Head Office and wondered how many complaints Boots Blackburn has had since the CAR was completed.
170. Mr Sagoo advised that there have been no complaints since the CAR has been completed and there has been 2 complaints during 2017/2018.

Questions from Ms Kerr to Mr Sagoo

171. Ms Kerr stated that she found some of the comments made by the Boots representative quite offensive to the community.

172. Mr Sagoo advised that he appreciates that Mr Fancourt is not here today, but Emma Kean and himself has visited the Blackburn store on many occasions.
173. Ms Kerr stated that she has never seen either of them in the store or in the community.
174. Ms Kerr stated that within the presentations of the interested parties, there seemed to be a question around the authenticity of the CAR, the motivation of the people participating in the consultation and the truthfulness of the comments made. Ms Kerr commented that within the Blackburn community it is fantastic to get 600 responses for this type of engagement.
175. Mr Sagoo said he recognised the work done by Alison Kerr in the community. Mr Sagoo told Ms Kerr that his queries around the CAR were linked to the first 3 questions, and the way the questions led to the answers.
176. Ms Kerr asked Mr Sagoo how the new seating area was any better than before. Ms Kerr stated that there is less retail space, no reduction in waiting times, less floor space for prams, and difficult to access the shop. There is no privacy. Yesterday her daughter requested a consultation and it was done on the shop floor. The office is full of filing cabinets, with papers strewn across the table, where prescriptions are checked. No one is ever taken into the consultation room and as a consequence there is no privacy.
177. Mr Sagoo said he would have to disagree with this. He advised that he thinks the service has improved. He listened to his customers and removed the gondola. It has meant that there are now reduced retail products but he recognises that they are community pharmacy first. It is the right decision to concentrate on being a community pharmacy. Mr Sagoo also commented that he has looked at feedback around whether every consultation needs to be taken in a room. He would say no. He knows of many community pharmacists who do not consult in a room every time.
178. Ms Kerr commented that she does not think that every consultation needs to be made in a room, but in his presentation he remarked that this happens. Mr Sagoo came back to say that he did not want this discussion to be tit for tat, and Ms Kerr confirmed that neither did she, but she felt it needed to be raised.
179. Ms Kerr also stated that following Mr Sagoo's comments regarding two counters, she did not think the second till worked as she has never seen it used.

Questions from the Committee to Mr Sagoo

180. The Chair asked whether the room has a sign on it to say consultation room.
181. Mr Sagoo said yes.
182. The Chair asked if they still use serial prescription.
183. Mr Sagoo advised that he is more than happy to provide serial prescriptions. We don't currently have any one using this service.
184. The Chair asked why.

185. Mr Sagoo stated that across Scotland there were pockets of GP's that do a lot of serial prescription and some practices where they do not do a lot. The Chair asked had there been any discussions with Ashgrove Medical practice and Mr Sagoo confirmed he did not know.
186. The Chair asked why Biolds Housing Association moved to Omnicare Pharmacy.
187. Mr Sagoo stated that this was before his and Emma's time in this area. The Chair asked if this is something that would be reviewed by Boots. Mr Sagoo said that he would ask why a patient group had left, so that lessons can be learned.
188. The Chair asked what the minimum staffing levels were.
189. Mr Sagoo advised that they have 8 colleagues covering 200 hours per week. The Chair asked what the minimum number of staff on the floor is during the day. Mr Sagoo responded that there are 5 in total.
190. The Chair asked how many service point there are in the shop
191. Mr Sagoo answered there are two. There is a till at the front and one at the back at the pharmacy counter.
192. The Chair asked how the lunch break is.
193. Mr Sagoo stated 30 minutes.
194. The Chair asked how the continuity of service was going to be achieved when the move happens.
195. Mr Sagoo advised that he would write to the Health Board to advise them of a minor relocation. They would move into a portacabin in the car park. Following the redevelopment, they would have a unit that faced the medical practice, which would have larger floor space than the existing one.
196. The Chair asked what was Mr Sagoo's understanding of why scripts were going out with Blackburn.
197. Mr Sagoo said that he thinks people will commute out of Blackburn and use other pharmacies. He also confirmed that as Boots in Blackburn has a delivery service, so will other pharmacies. He also confirmed that the medical practice will also allow other pharmacies to offer a collection and delivery service.
198. The Chair asked what Mr Sagoo considers a healthy response rate. (relating to the CAR)
199. Mr Sagoo said he would want 20/25%. He stated that he is always wary of CAR reports.
200. The Chair asked Mr Sagoo if there is any part within the CAR that he thinks is not a good report. The Chair mentioned this to him as she thought that he had given a very vigorous defence but she did not detect anything in his response to acknowledge the serious nature of the CAR.

201. Mr Sagoo said of course it hurts when things are said about your staff and pharmacy. If he comes across as not caring he must apologise. The report is damning and he knows it is not good. He takes feedback from his patients regularly and always tries to give the best service.
202. The Chair asked what the purpose of asking questions about the attendance at the community council.
203. Mr Sagoo said Mr Fancourt has been to one community council meeting, and Mr Sagoo has wanted to go to more, but he has been told it is by invitation only. The Chair asked Ms Kerr if this was the case and she responded that it was not.
204. The Chair asked how many times he is aware that a pharmacist is asked to go to a community council meeting to defend their service.
205. Mr Sagoo stated that he hears of this at every PPC he attends. The Chair questioned his answer and asked him if he thought that it was an indicator of dissatisfaction that a pharmacist was being asked to attend and that it showed a level of public reaction.
206. Mr Sagoo confirmed that he thought that is they were being asked to come along to a meeting then there were issues to be addressed.
207. The Chair stated that there was an accusation that Boots had made promises to the community and not delivered.
208. Mr Sagoo confirmed he is not sure what they have not delivered. He confirmed that in the past they have looked at other premises, ie the Scotmid store, but there was no real advantage to move. He has looked at trying to get a space within the medical centre, but that did not happen. Perhaps someone in the community heard of Boots efforts to get new premises and has considered this as a promise.
209. The Chair asked Mr Sagoo to comment on the CAR where a patient had stated that there was no insulin in the pharmacy.
210. Mr Sagoo stated that a medication like insulin is very important and of course he is concerned, but noted that this was a one off situation that he does not know the context of this issue. He knows that every situation would have been looked at the address this issue as he knows that to go without insulin is life threatening. He would not leave a patient in this situation. He also stated that he would be able to borrow from another pharmacy and deliver it to a patient's house.
211. The Chair asked if there are any caps on services provided in the Blackburn pharmacy.
212. Mr Sagoo stated no caps what so ever.
213. Hazel Garven asked is whether David Fancourt was an independent prescriber.
214. Mr Sagoo said that Mr Fancourt is not currently an independent prescriber and this is something that Mr Sagoo would very much want him to become.

215. Mr Embrey asked Mr Sagoo if Boots still measured waiting times for prescriptions that came into the pharmacy.
216. Mr Sagoo stated that this was correct.
217. Mr Embrey asked what the waiting times were for Blackburn
218. Mr Sagoo stated that it was difficult to get a result for Blackburn as it was a local pharmacy. Had it been a retail pharmacy that is where Boots get a lot of responses. He finds waiting times quite fascinating as he would love to have a waiting time percentage of over 90%, however he does not have a waiting time percentage for Blackburn.
219. Mr Embrey asked Mr Sagoo how much bigger was the new unit that he planned to move into going to be.
220. Mr Sagoo said that as nothing had been signed off yet, he was not quite sure.
221. The Chair asked Mr Sagoo to confirm that floor space will increase. Mr Sagoo responded that the new unit will be bigger. The Chair then asked Mr Sagoo to acknowledge that the existing pharmacy floor space is inadequate.
222. Mr Sagoo responded that Boots has reduced the retail element of the pharmacy to improve the walk in experience, and has reflected this in the new plans.

The Interested Parties Case – Niral Nathwani of Lloyds Pharmacy

223. Mr Nathwani thanked the Panel for allowing him to speak today.
224. Mr Nathwani advised that the neighbourhood of Blackburn has a population of approximately 5550, and it also has a pharmacy exactly opposite the applicant's site, a distance of 10 yards.
225. Mr Nathwani stated that he did not think that Blackburn could support 2 pharmacies and he remarked that the NHS Lothian Care service Plan made no reference to there being a need for a pharmacy application in the proposed neighbourhood.
226. Mr Nathwani stated that in the proposed application the pharmacy would be open for 73.5 hours per week. He stated that this was not viable. He did not see the need for the proposed pharmacy to be open until 8pm, when Lloyds pharmacy in King Street Bathgate opens until 8pm and it is only 2.3miles for the proposed site. This would take 6 minutes to drive to by car. Additionally Lloyds is open on a Sunday from 9am to 4pm, therefore Mr Nathwani cannot see the necessity for the applicant to also open on a Sunday.
227. Mr Nathwani believes that the applicant has only used the proposed opening hours to add substance to his application.
228. Mr Nathwani stated that the regulations state that the measure is adequacy. Mr Nathwani notes that the existing hours of the other pharmacies meets the needs of the vast majority of residents in Blackburn.

229. Mr Nathwani provided information relating to access to services within Blackburn. The 7 Datazones in Blackburn has a range between 3869 and 5933 with regards to access to services. Therefore if the average is 5274 for the 7 Datazones, Mr Nathwani stated there are no issues with accessing services.
230. Mr Nathwani commented that granting a pharmacy contract to the applicant would have a serious detrimental effect on the current Boots pharmacy and would also impact on the late opening hours and Sunday opening of the Lloyds branch in Bathgate.
231. Mr Nathwani commented on the CAR. He stated from a population of 5550, there were 652 responses, which is 11.7% of residents. Only 394 responded "yes" in response to question 5, "do you think there are gaps/deficiencies in the existing provision of pharmaceutical services to the neighbourhood," which is 7% of the residents.
232. Mr Nathwani advised that there was little public support from the majority of residents, evidencing that the existing service is adequate.
233. Mr Nathwani also commented that the Area Pharmaceutical did not support the application.
234. Mr Nathwani stated that although the Blackburn Community Council had commented that an additional pharmacy would enhance the service to the residents, Mr Nathwani advised that an enhanced service is not the measure, the measure is adequacy.
235. Mr Nathwani confirmed that he had read the NHS Lothian Pharmaceutical Care service Plan and he stated that there was no reference to there being a need in the neighbourhood.
236. Mr Nathwani asked the Panel to refuse the application.

Questions from the Applicant to Mr Nathwani

237. The Applicant stated that patients use emotional words, therefore does Mr Nathwani regard this as a bias comment, as someone who manages pharmaceutical services.
238. Mr Nathwani stated that he does not think that it is biased but if it were his pharmacy the comments would concern him and he would take steps to resolve this.
239. The Applicant asked if Mr Nathwani accepted their definition of neighbourhood.
240. Mr Nathwani stated Yes.
241. The Applicant asked where Mr Nathwani had got the population of Blackburn figures from.
242. Mr Nathwani confirmed that he thought that they were an estimate, and he thinks that he had used the 2006 census figures. He also acknowledged that they are Blackburn only and did not include Seafeld.
243. The Applicant asked whether Mr Nathwani delivered prescriptions into Blackburn and Seafeld.
244. Mr Nathwani confirmed that they do.

245. The Applicant asked how many prescriptions were dispensed from the Ashgrove Medical Practice.
246. Mr Nathwani stated that he did not know.
247. The Applicant asked if Mr Nathwani would agree that people in Seafeld would have to go by the current services in Blackburn to use your services.
248. Mr Nathwani said yes they would.
249. The Applicant asked if Mr Nathwani thought that people do this deliberately to avoid using the current services.
250. Mr Nathwani stated that maybe they work in Bathgate, but he did not know the reasons.

Questions from the Mr Sagoo to Mr Nathwani

251. Mr Sagoo did not ask any questions.

Questions from Ms Kerr to Mr Nathwani

252. Ms Kerr asked why Lloyds can lodge an objection.
253. Mr Nathwani confirmed that he had been invited and this is part of the application process.

Questions from the Committee to Mr Nathwani

254. Mr Kirkwood asked Mr Nathwani what the footfall is like in the Bathgate store, during the times of the additional hours in the evening and on a Sunday. Mr Kirkwood was asking this question to relate back to Mr Nathwani not supporting an additional pharmacy in Blackburn that is proposing additional hours.
255. Mr Nathwani confirmed that the footfall is not massive, that they were just providing a service to the community.
256. The Chair asked Mr Nathwani to accept that although the medical centre times have been noted, not always will the last appointment be on time, therefore creating a situation that may need to result in the requirement to need extended hours.
257. Mr Nathwani said yes.
258. The Chair asked Mr Nathwani if he had attended any community council meetings.
259. Mr Nathwani said that he had not, but that he was aware that some Lloyds staff have.

The Interested Parties Case – Ms Alison Kerr, Blackburn Community Council

260.

Ms Kerr talked through a number of points

- She confirmed that the community would need to endure the disruption to the Mill Centre with scaffolding and building works, and would not deter anyone using an additional pharmacy
- She confirmed that within the location, there will be 36 additional properties build, ranging from 1 to 4 bedroom properties
- She confirmed that there is no planning submitted for the new Boots pharmacy.
- She found it interesting that Boots did not have the average waiting times for Blackburn.
- She confirmed that it takes 6 minutes by car to get to the Lloyds store in Bathgate at the weekend. She also pointed out that people in Blackburn do not have cars, resulting in a 5 miles each way trip.
- Additionally public transport, the bus is every two hours.
- She advised that a young female was accosted in the Boots store and that no one from Boots came to her assistance. A complaint was logged to a man called Mark Miller (Boots) but no response was received.
- She commented that the community in Blackburn is not just moaning about things, but complaining takes time, energy and tenacity. She advised that Blackburn is a community that things get done to, and as a member of the community council for over 25 years, they know that results are precious.
- She confirmed that the community has concerns about Boots moving into a portacabin in the car park. She wanted clarity on which car park. How would people access the portacabin and is it going to be safe.
- She asked if anyone from Boots had spoken to the community to advise them what was going to be proposed. She told the panel that no one has approached the community council or any statutory recognised body that has the authority to discuss this issue on behalf of the community. Ms Kerr has only recently heard of Boot's proposal 2nd hand.
- She commented on Mr Sagoo's comments about being involved in the community since 2013, and she advised that this was not the case. Ms Kerr stated that there was a great big communication breakdown.
- She asked the panel to recognise the comments in the CAR. She advised the panel that she has experience of housing committee work with West Lothian council, and her colleagues would be ecstatic to receive a 10% response.
- She also asked the panel to recognise the Blackburn Future Group Plan and the support from the local politicians who are well aware of the needs of the community. She advised that they are both very keen to support this application. They also know the needs of the community.
- Please listen to the voice of the committee.
- She stated that the Blackburn Community Council has tried to engage with Boots over the past 10/11 years and they have been invited to the community council meetings, but they have had a number of managers over the years creating inconsistencies as same discussions are had over and over again.
- She mentioned that Mr Nathwani had brought up the previous application, and Ms Kerr wanted to note that the Blackburn Community Council had supported the application then as the same issues and concerns are still being expressed now.
- She commented that the issues within the community, especially the mental health and alcohol issues need the support of an additional pharmacy.

Questions from the Applicant to Ms Kerr

261. The Applicant asked Ms Kerr to confirm when the complaint was handed to Boots regarding the woman being accosted.
262. Ms Kerr said that this happened at the end of 2017 into 2018. She explained what had happened and confirmed that it was brought to the attention of Boots.

Questions from Mr Sagoo to Ms Kerr

263. Mr Sagoo advised that he was not aware of this complaint and will discuss with the team, therefore ensuring that they learn from this and make sure they do things differently going forward.
264. Mr Sagoo thanked Ms Kerr for her presentation and remarked that he had spoken to Mr Fancourt about attending the community council meeting but was under the impression that they were invite only. But he recognises that this is not true. He wants to open up the lines of communications. He asked how MS Kerr got on with Mr Fancourt.
265. Ms Kerr advised that he is a very nice man, but she knows that he will be moved very soon and the same old issues will happen again. She also expressed that Mr Sagoo needed to recognise that it is no use engaging with her to discuss the portacabin, as Boots should have engaged with the community long before this point in time.
266. Mr Sagoo confirmed that nevertheless, he will ensure that the communication is opened up between the community. He then asked if Ms Kerr had seen an improvement since Mr Fancourt arrived.
267. Ms Kerr replied yes. She explained that it was diabolical before Mr Fancourt came in. She said that there are still issues, for example there is still one girl in the front shop on the till, and the rest of the staff are running around the back like headless chickens. Ms Kerr stated that the service has got better, but the community is just waiting for Mr Fancourt to be moved.

Questions from the Committee to Ms Mitchell

268. Mike Embrey asked how Ms Kerr goes about collecting the opinion of the community.
269. Ms Kerr confirmed that it can be a bit of everything. She explained that at the Mill Centre closure meeting, 170 people from the community attended. She advised that some people chap on her door to speak to her, and she is informed by word of mouth. She has a lot of respect in the community, and has a lot of relationships that have developed over the years eg Doctors from the Ashgrove Medical Centre, who attend the Council meetings.
270. The Chair stated that the decision will not be based on convenience, and other applications will not be taken into consideration when the PPC is making their decision.

Summing Up

Mr Sagoo summed up.

271. Mr Sagoo confirmed that they have a great pharmacist in Mr Fancourt and he provides a pivotal service in the community. Mr Sagoo mentioned that Mr Fancourt and his team provide an adequate pharmaceutical service which has been endorsed by the community council, the General Pharmaceutical Council and of course the patients. It is impossible for two pharmacies to remain viable. Mr Sagoo stated that the Applicant had not demonstrated inadequacy in the current provision and Mr Sagoo asks the Committee to refuse the application as it is not necessary or desirable.

Mr Nathwani summed up.

272. He has not heard anything else to convince him that the existing pharmaceutical provision is not adequate therefore he asks the Committee to refuse the application.

Ms Kerr summed up.

273. The Chair asked Ms Kerr to confirm that she was happy with the definition of the neighbourhood. Ms Kerr stated that she was.

274. Ms Kerr also asked that the Committee considers the residents of Seafield as they use the facilities in Blackburn and stressed again that the community needs a better service than they are currently getting.

Decision

1. 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.
2. 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:

Letter from Joanne Watson, Boots UK Ltd

Letter from Matthew Cox of Lloyds Pharmacy

Letter from Alison Kerr, Blackburn Community Council

Letter from Olayinka Ogunnoiki, Dunamis Pharmacy

Letter from Lothian Area Pharmaceutical Committee

Letter from Lothian General Practitioners Sub-Committee of the Area Medical Committee

3. The Committee also considered:-

- i. The Consultation Analysis Report (CAR). The CAR, dated 31 August 2018, had been jointly agreed between NHS Lothian and CD Chem Ltd. Total responses numbered 652, of which 512 were submitted by individuals, none identified themselves as representing a group or organisation and 137 did not identify their status. There were 12 questions, 3 of which had been permitted to add to the CAR and agreed in advance between the Board and the Applicant. The Committee noted that Boots UK Ltd had made reference to the order of the questions and how this may affect the way in which the respondent answers the questions. The Committee reviewed the statistical analysis of responses and the cited comments from respondents in reaching their decision. The Committee's consideration of the questions is set out in paragraphs 5 to 23 below;
- ii. The location of the nearest existing pharmaceutical services;
- iii. The maps of the area surrounding the proposed premises detailing the location of the nearest pharmacies and GP surgeries, deprivation categories and population density;
- iv. Information regarding the number of prescriptions dispensed by the pharmacies nearest to the proposed premises;
- v. Information regarding the number of prescriptions dispensed that were issued from the GP surgery closest to the premises;
- vi. Pharmacy profiles of the nearest pharmacies detailing opening hours, premises facilities and services offered.

CAR

The Consultation Analysis Report had been jointly agreed by NHS Lothian and CD Chem Ltd.

The advert was published in the West Lothian Courier, Blackburn Community Council, Patient Partnership Forum, Local Councillors and MSPs were informed, the advert was posted on NHS Lothian's website and twitter account. Respondents could either respond electronically or could request a hard copy. The consultation ran for a total of 90 working days, the final day for responses being 29 August 2018.

The total number of responses received was 652. 512 were submitted from individual members of the public, 0 were submitted from a group/organisation and 137 respondents skipped the question.

There were 12 questions, a factual analysis of which is summarised below. The Committee's deliberations in relation to the CAR are in paragraphs 5 to 23 below.

Question 1

The Committee noted that 200 (32.2%) of respondents noted that they had to make several journeys to receive a full prescription from the existing pharmacies servicing the area, 134 (21.6%) answering that they do this every second time, 80 every third time and 207 (33.3%) very rarely.

Question 2

440 respondents (68.5%) believed that they did not receive their prescription in a timely manner using the existing pharmacy services provided to the neighbourhood.

Question 3

560 respondents (87.1%) did not feel that there were adequate private spaces to discuss confidential matters within the existing pharmacies servicing the neighbourhood.

Question 4

336 of respondents (57%) agreed that the neighbourhood described by the applicant was accurate. 68 respondents (11.5%) did not agree and 190 did not know (32.2%). 62 respondents skipped this question.

Question 5

394 respondents (67.7%) felt that there were gaps/deficiencies in the existing provision of pharmaceutical services to the neighbourhood.

Question 6

518 respondents (89.6%) felt that a community pharmacy would have a positive impact in the neighbourhood.

Question 7

This question asked respondents for their views on the pharmaceutical services being proposed by the applicant:

- Positive comments (89.1%)
- Negative comments (4.1%)
- Did not know (6.8%)
- 95 respondents skipped the question

Question 8

There was an 11% comment rate on the question about anything being missing from the list of services to be provided.

Question 9

There was a majority response (499 positive responses/90.4%) to the question about a community pharmacy in the neighbourhood working with other NHS health services such as GP practices.

Question 10

494 respondents (89.8%) answered positive in relation to the question about whether the proposed pharmacy would have a positive or negative impact on existing NHS services.

Question 11

This question related to the location of the proposed community pharmacy. There were 432 positive responses (80.3%)

Question 12

Finally there was a positive response 9506 responses/86%) to the proposed opening hours.

Neighbourhood

4. **Having considered the evidence presented to it, their observations from the maps and the site visit undertaken prior to the meeting, the Committee had to decide the question of the neighbourhood in which the premises, to which the application related, were located.**
5. Question 4 in the CAR asked if the neighbourhood described in the public notice is accurate. The definition had been given as North – M8, East – Where M8 meets the A779, down to B7015 and from there to where it meets the River Almond, South – River Almond, incorporating Seafield, along to where it meets the A705 (West Main Street) and from here along to where the A705 meets A801, West – A801 from where it meets the A705 to the roundabout underneath the M8. In response 336 had agreed with the definition, 68 did not agree and 190 didn't know.
6. The Committee agreed that the accuracy of the description of the neighbourhood is correct as the boundaries all provide context to the application. The neighbourhood is served by main commuter roads and public transport links, with the main M8 motorway situated to the north of Blackburn being a constructed boundary and the river Almond being a natural boundary.
7. The Committee agreed that the inhabited areas within the neighbourhood included the village of Blackburn and Seafield. The committee concluded that the residents of Seafield would visit Blackburn to access the local shops, library, credit union, as well as the Blackburn Partnership Centre that shared with the Ashgrove Medical Centre. Additionally, the Committee noted that between Blackburn and Seafield there was very little undeveloped space and concluded that both villages had very similar demographics.
8. The Committee also noted that all participants in the hearing had agreed with the definition of the neighbourhood.
9. The Committee agreed that the definition of neighbourhood is correct.

Adequacy of Existing Provision of Pharmaceutical Services and Necessity or Desirability

10. **Having reached that decision the Committee 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 that neighbourhood.**
11. The Committee agreed that there was a good response rate to the CAR from the community, with real concerns expressed regarding the quality of service provided by Boots UK Ltd. This was also highlighted to the Committee by the Chair of the Blackburn Community Council. The Committee found Ms Kerr to be a particularly credible witness given her many areas of community activity. She did acknowledge that there has been an improvement since the new pharmacist has arrived but added that there were still significant problems which she personally experienced and others reported to her.

12. The Committee also noted Ms Kerr's comments that issues with the Boots pharmacy has been around for many years, and they had been slow to respond to these.
13. The Committee considered the concerns raised about the time which had passed since the CAR was undertaken and noted that some issues had been addressed, and on the site visit had seen that the seating area within the Boots pharmacy has been improved.
14. The Committee were informed that the applicant's additional questions in the CAR were agreed with the Board.
15. The Committee acknowledged that Boots UK Ltd were concerned by the wording used within the 3 additional questions in the CAR, and that the headings used to describe responses were negative. The Committee were not influenced by either of these matters in their judgement of the application. It was not possible to assess if the additional questions appearing at the beginning of the CAR had influenced responses and so the Committee could not consider this in evaluating the CAR.
16. The Committee noted that they were not encouraged by the response of Boots to the quality of service issues raised by Ms Kerr, however noted that some of the issues raised in the CAR are experienced across the industry as a whole.
17. The Committee agreed that they did not have evidence of the context of complaints against Boots. The committee asked Mr Sagoo to provide information on waiting times within the pharmacy, however this could not be provided.
18. During the site visit the Committee took the opportunity to investigate some of the concerns raised in the CAR. While complaints were made about the consultation area in the Boots store, they were of the view that this could provide privacy and adequate space for consultations, but acknowledged that customers did not feel this to be the case or approve of the shared use as office space.
19. During the site visit the Committee noted that two tills were in operation and there were two queueing lines available. Ms Kerr from the Community Council stated that she had not seen this level of access when she has used the pharmacy.
20. The Committee questioned Mr Sagoo, the Boots representative, about the alleged mistakes reported by respondents to the CAR. In response Mr Sagoo described the processes followed when there is an error and found this to be a robust process. However, it was noted during the site visit that pharmacists, staff who check scripts and dispensers were working in a small space for the number of staff.
21. The Committee considered the comments in the CAR about the provision of blister pack dispensers, which Boots has filled at two central locations. It was felt that there would be benefit in having this service provided on site which was being offered by the applicant.
22. The Committee questioned Mr Sagoo about the complaints around items not being available on the day and customers stating they had to return, at times more than once to have the script filled. Mr Sagoo mentioned the difficulties in sourcing some items. The Committee was satisfied with the explanation in relation to national shortages at times. They noted the statement in response to the applicant that Boots are not restricted to one supplier. Mr Sagoo also mentioned

- the impact of Brexit but this was not a credible explanation given the timing of the CAR. The Committee was therefore unable to satisfy itself that the level of service was as good as it could be.
23. The Committee noted that both the CAR and the Community Council Chair's perspective gave a picture of an inadequate service.
 24. The Committee agreed that the provision of extended hours were not thought to be an added attraction to granting the application and that there was adequate provision of extended opening hours at other premises.
 25. The Committee noted that there was a public transport service to accommodate either a late night or Sunday requirement, however noted that Lloyds were unable to supply the Committee figures to confirm their late night and Sunday trading.
 26. The Committee noted that Boots was a busy pharmacy based on the number of scripts, and that it would be viable for two pharmacies to trade alongside each other. The Committee agreed that no pharmacy would get 100% of scripts but with the addition of further services this could bring other scripts in to the proposed pharmacy.
 27. The Committee noted that scripts from the local sheltered housing association were being dispensed at the Boghall pharmacy. Ms Kerr informed the Committee that they used Boghall pharmacy as they were unhappy with the service provided by Boots. The Committee considered whether CD Chem could reclaim the business; however the Committee concluded that they would likely continue with Boghall pharmacy if they were satisfied with the service.
 28. The Committee in considering the viability of the new premises believed it was reasonable to expect that some scripts would return to the locale as customers who were travelling to collect scripts would have expectations of a better service. The Committee noted that while there were no major housing developments planned for the neighbourhood, the Community Council representative stated that there are plans to build around 35 new homes in the area close to the premises.
 29. The Committee considered the questions asked in relation to the size of the new pharmacy by Boots, who were of the view that if their premises were not large enough then the new premises would not make a significant impact as they were only fractionally bigger. However the Committee noted that the new premises would in fact deliver more than a 100% increase in floor space to deliver services between the two premises.
 30. The Committee noted that they found the Boots representative at the meeting to be complacent, and only apologised or acknowledged that the service described in the CAR was not good enough when prompted by the Chair to do this. The Committee discussed that Boots presented a view that as they were the existing pharmacy and the only one in the area that their service had to be adequate.
 31. The Committee further noted that staff numbers appeared to be increased on the day of the committee visit, as the staff numbers were smaller during a visit made by a committee member earlier in the week.

32. The Committee did not consider that the questioning of the applicant's organisational skills was relevant as this was not within his control.
33. The Committee discussed that Boots and the Mill Centre has not yet applied for planning permission and the future of the Boots provision is still unclear. The Committee noted that this move is a future wish list for them and the Committee would address the current adequacy of service levels.
34. In accordance with the statutory procedure the Pharmacist members of the Committee (Mr Mike Embrey and Ms Hazel Garven) left the meeting and were excluded from the voting process.
35. The Committee agreed that they had enough information from the site visit, supporting documentation and the hearing to reach a conclusion.
36. The two voting lay members came to the decision, based on all of the evidence available to them, that the existing pharmaceutical services in the neighbourhood were not adequate
37. Accordingly, the Committee agreed that the provision of pharmaceutical services at the premises 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.

In these circumstances, it was the Committee's unanimous decision that the application should be granted.

Signed


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Fiona O'Donnell, Chair
Pharmacy Practices Committee

Date

5 June 2009