



**Minutes of the meeting of the Pharmacy Practices Committee (PPC) held on Thursday 24th August 2023 at 0930 hrs via MS Teams**

The composition of the PPC at this hearing was:

**Chair:** Elizabeth Gordon

**Present:** **Lay Members Appointed by NHS Lothian**

Brian McGregor  
John Niven  
Mike Ash

**Pharmacist Nominated by the Area Pharmaceutical Professional Committee** (included in Pharmaceutical List)

Kaye Greig  
Vinny Bilon

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

Garven Hazel

**Observer:** Chris Freeland, NHS Lothian  
Katerina Marinitsi, NHS Lothian

**Secretariat:** Nicole Smith, NHS National Service Scotland

1.	<b>APPLICATION BY Manorport Ltd</b>
1.1	There was an application submitted and supporting documents from Manorport Ltd received on 28 <sup>th</sup> December 2022 and 10 <sup>th</sup> January 2023 respectively, for inclusion in the pharmaceutical list of a new pharmacy at 133 Glasgow Road, Bathgate, EH48 2QN.
1.2	<b>Submission of Interested Parties</b>
1.3	The following documents were received: i. Letter dated 24 <sup>th</sup> January 2023 from Mrs Joanne Watson of Boots UK Ltd.

	<ul style="list-style-type: none"> <li>ii. Letter dated 23<sup>rd</sup> January 2023 from Mr Richard Dunn of Gordons Chemists.</li> <li>iii. Letter dated 22<sup>nd</sup> February 2023 from Mr Matthew Cox of Lloyds Pharmacy Ltd.</li> </ul>
<b>1.4</b>	<b>Correspondence from the wider consultation process undertaken</b>
	i) Consultation Analysis Report (CAR)
<b>2</b>	<b>Procedure</b>
<b>2.1</b>	At 0930 hours on 24 <sup>th</sup> August 2023, the Pharmacy Practices Committee (“the Committee”) convened to hear the application by Manorport Ltd (“the Applicant”). The hearing was convened under Paragraph 2 of Schedule 3 of The National Health Service (Pharmaceutical Services) (Scotland) Regulations 2009, as amended, (S.S.I. 2009 No.183) (“the Regulations”). In terms of paragraph 2(2) of Schedule 4 of the Regulations, the Committee, exercising the function on behalf of the Board, shall “determine any application in such manner as it thinks fit”. In terms of Regulation 5(10) of the Regulations, the question for the Committee was whether “the provision of pharmaceutical services at the premises named in the application is necessary or desirable in order to secure adequate provision of pharmaceutical services in the neighbourhood in which the premises are located by persons whose names are included in the Pharmaceutical List”.
<b>2.2</b>	The Chair welcomed all to the meeting and introductions were made. When asked by the Chair, members confirmed that the hearing papers had been received and considered. When committee members were asked by the Chair in turn to declare any interest in the application, none were declared.
<b>2.3</b>	Members of the Committee had undertaken independent site visits to 133 Glasgow Road, Bathgate, EH48 2QN and the surrounding area. During which the location of the premises, pharmacies, general medical practices and other amenities in the area such as, but not limited to schools, sports facilities, community centres, supermarkets, post office, banks and churches had been noted.
<b>2.4</b>	The Chair advised that Nicole Smith was independent from the Health Board and was solely responsible for taking the minute of the meeting.
<b>2.5</b>	The Chair outlined the procedure for the hearing. All Members confirmed an understanding of these procedures.
<b>2.6</b>	Having ascertained that all Members understood the procedures, that there were no conflicts of interest or questions from Committee Members the Chair confirmed that the Oral Hearing would be conducted in accordance with the guidance notes contained within the papers circulated. The Applicant was invited to enter the hearing.
	<b>The open session convened at 0930 hrs</b>
<b>3</b>	<b>Attendance of Parties</b>

3.1	The Chair welcomed all and introductions were made. The Applicant, Manorport Ltd represented by Ms Olayinka Ogunnoiki who was supported by Mr Rodney Hall. From the Interested Parties eligible to attend the hearing, Boots UK Ltd represented by Mr Balvinder Sagoo and Ms Nicola Maciver and Gordon's Chemists represented by Mr Nikhil Goburdhun.
3.2	The Chair advised all present that the meeting was convened to determine the application submitted by Manorport Ltd in respect of a proposed new pharmacy at 133 Glasgow Road, Bathgate, EH48 2QN. The Chair confirmed to all parties present that the decision of the Committee would be based entirely on the evidence submitted in writing as part of the application and consultation process, and the verbal evidence presented at the hearing itself, and according to the statutory test as set out in Regulations 5(10) of the 2009 regulations, as amended, which the Chair read out in part:
3.3	"5(10) an application shall be ... granted by the Board, ... only if it is satisfied that the provision of pharmaceutical services at the premises named in the application is necessary or desirable in order to secure adequate provision of pharmaceutical services in the neighbourhood in which the premises are located..."
3.4	The three components of the statutory test were emphasised. It was explained that the Committee, in making its decision, would consider these in reverse order, i.e. determine the neighbourhood first and then decide if the existing pharmaceutical services within and into that neighbourhood were adequate. Only if the Committee decided that existing services were inadequate would the Committee go on to consider whether the services to be provided by the applicant were necessary or desirable in order to secure adequate services. That approach was accepted by all present.
3.5	The Chair asked all parties for confirmation that these procedures had been understood. Having ascertained that all parties understood the procedures the Chair confirmed that the Oral Hearing would be conducted in accordance with the Procedure at Hearings document contained within the papers circulated.
3.6	The Chair confirmed that members of the Committee had independently conducted site visits in order to understand better the issues arising from this application. Assurance was given that no member of the Committee had any interest in the application.
3.7	The Chair asked for confirmation that all parties fully understood the procedures to be operated during the hearing as explained, had no questions or queries about those procedures and were content to proceed. All confirmed agreement.
4.	<b>Submission</b>
4.1	The Chair invited Ms Olayinka Ogunnoiki, Manoport Ltd. to speak first in support of the application.
4.2	Good morning Chair and members of the PPC.

<b>4.3</b>	Manoport Ltd. has been trading in Bathgate since the first of March 2010 and has, and still serves, every area of Bathgate and extends services beyond to Blackburn and Armadale.
<b>4.4</b>	The focus is on supporting health and wellbeing of patients in the community by establishing close working relationships with local GPs etc.
<b>4.5</b>	The Pharmacy is modern and fitted to a high standard.
<b>4.6</b>	Their commitment is to increase access to community pharmacy as the first port of call to support self-management in stable, long-term conditions both in and out of hours.
<b>4.7</b>	The fundamental issue for the Committee to consider is whether the current NHS Pharmaceutical Services in the neighbourhood are adequate and, if not, whether the proposed services are necessary or desirable. We perceive both the statutory tests to have been met.
<b>4.8</b>	The proposed neighbourhood of Windyknowe is as follows: <ul style="list-style-type: none"> <li>• East boundary from where Glasgow Road meets Hardhill Road;</li> <li>• West boundary where Hardhill meets Sibbald's Brae;</li> <li>• North boundary along Glasgow Road;</li> <li>• South boundary along Hardhill Road and along the north perimeter of Boghead cemetery;</li> </ul>
<b>4.9</b>	Windyknowe is a residential area located in Bathgate, West Lothian, and is not as densely commercial as the town centre of Bathgate.
<b>4.10</b>	The neighbourhood is served by a wide range of amenities including a primary school and shops.
<b>4.11</b>	Windyknowe has a population of about 1,500 people and is set to grow even further.
<b>4.12</b>	In regard to the health and demographics of the neighbourhood, there has been substantial growth in recent years. West Lothian Council stated that Bathgate is set to have the largest aging population which could lead to pressure on local public services. The population in West Lothian over aged 65 is set to rise by a third by 2028. They have forecast the fastest growing population of pension aged people in Scotland with an increase of 44%, twice the Scottish average, in the next 25 years. The population of those 75 years old and over is projected to increase by 39%.
<b>4.13</b>	In addition to the aging population, the school aged population continues to require investment in education infrastructure. The population is growing and there are further plans to expand. Taylor Wimpey is set to build 119 new homes in Sibbald's Wynd located 0.3 miles from the proposed premises and it will be comprised of flats and houses, leading to a population growth of over 400 people. The new homes will also provide new customers for local businesses and should lead to a strain on existing resources for the public such as schools, healthcare facilities and public transportation systems. At present, the existing services are not adequate. At an

	HSCP meeting on Monday 21 <sup>st</sup> August, the already approved plan for new homes was frowned on by the surgery as they realised the pressure on health services with this new development.
<b>4.14</b>	If this application is successful, the pharmacy will provide an independent prescriber for Pharmacy First Plus services and will be an invaluable aid to local GPs. All core services will be offered at a high standard. Contribution to the core services from current provisions is much lower than the vast majority of pharmacies in Scotland. Currently all of the pharmacies in Bathgate are working at full capacity and none are adequately providing the core services of the pharmacy contract. There will be a wide range of additional private services including travel clinics, children's vaccinations etc. The pharmacy will be open Monday to Friday from 9:00 to 18:00 and Saturday from 9:00 to 13:00. There will be free prescription collection and delivery service available. The pharmacy will also explore innovative technology and install a 24-hour prescription collection point in the pharmacy. This will ensure patients who are working all day and cannot collect their prescriptions can do so outside of the normal opening hours. The pharmacy will also further develop an app to access services and prescriptions online.
<b>4.15</b>	The pharmacy will have 3 consultation rooms.
<b>4.16</b>	With the current shortage of Primary Care Providers, there is a high demand for services and a new pharmacy will play a vital role in bridging this gap.
<b>4.17</b>	At this point, Ms Ogunnoiki asked to show development plans of the premises on the screen. The Chair adjourned the hearing for a few minutes to ask the CLO for legal advice, given the plans had not been shared in advance. Stephen Waclawski from the CLO joined the Teams call with Eleanor Paton observing. Stephen advised that it is for the Chair to decide whether the plans should be shown considering the benefits it provides to Committee members and balancing that with any advantages it provides to the applicant. The Chair decided to permit the applicant to show the plans of the premises on the screen as it would help the Committee gain a better understanding of what is proposed and noting there will be time for questions after the fact for clarity where necessary.
<b>4.18</b>	The premises will have two levels. The top level is front facing and the lower level is underneath. There are three consultation rooms that can fit into the front of the premises on the top level which is accessible from the street. There are no stairs necessary to access this. The dispensary and local area where shelves are as well as the robot will also be on this floor. Downstairs, a hub for dosette boxes to be prepared will be included as well as tea rooms and facilities, storage space, toilets and area that can be used to expand services.
<b>4.19</b>	The CAR had 697 responses which is one of the highest number of responses for a consultation of this type.
<b>4.20</b>	For Question 1, 92.3% said yes.
<b>4.21</b>	For Question 2, 93.8% said yes. When asked to explain, there were 410 comments of which 99% agreed that there were gaps in provisions in the neighbourhood. At this point, Ms Ogunnoiki read out a significant number of the comments in the CAR,

	a significant number of which were about Lloyds and some about Boots including comments about waiting times being horrendous, having to go elsewhere for services, that the available pharmacies cannot cope with the demands and that there is inadequate provision.
<b>4.22</b>	For Question 3, 98.3% gave a positive response. Eleven people commented that they would expect quicker service times, seven people commented on the positive impact for local community, there were 11 comments about accessible services and 11 about easing the pressure on other GP/pharmacy services.
<b>4.23</b>	For Question 4, 96.7% give a positive response. Out of the 268 comments, 97% were positive.
<b>4.24</b>	For Question 5, 76.1% said no. Out of 133 comments almost 61% replied that nothing was missing.
<b>4.25</b>	For Question 6, 95.2% said yes and out of 226 comments, 95% agreed with the question.
<b>4.26</b>	For Question 7, 97.2% said positive and out of 230 comments about 97% thought it would have a positive impact.
<b>4.27</b>	For Question 8, 95.1% gave positive responses and out of the 240 comments about 90% supported the proposed location.
<b>4.28</b>	For Question 9, 94.8% gave a positive response and out of 201 comments, 76% supported the timing.
<b>4.29</b>	Most of the negative comments are relating to both Lloyds and Boots as described in the CAR that they are not fit for purpose.
<b>4.30</b>	In regard to the existing Bathgate services, the contribution to service provision is much lower than the vast majority of pharmacies in Scotland and this has a detrimental impact on the population. The majority of core services provided are much lower than levels seen across Scotland. Currently the pharmacies are operating at full capacity and none are adequately providing core services from the contract. The CAR analysis report figures are indicative of an undersupply of services. This is further seen in general statistics for Scotland. Prescription volumes were higher than the Scottish average these volumes are having detrimental impact on patients including long wait times, inability to get stock and inadequate provision in the area.
<b>4.31</b>	Current pharmaceutical services in the area average 122 Pharmacy First items per month in each existing pharmacy compared to the Scottish average of 175. This is more than 30% below the Scottish average. The payment for Pharmacy First on average was 35% lower than the Scottish average for 2022 at £1,489 vs. £2,305. The result of having less activity for Pharmacy First, which is one of the core services and expands across items prescribed, consultations, referrals, UTIs, skin infections, shingles and other treatments. The proposed new pharmacy will have an independent prescriber to offer Pharmacy First Plus to patients.

<b>4.32</b>	In regard to instalments, the number in the neighbourhood was an average of 1,141 per month which is 55% below the Scottish average of 2,541. This shows the availability of instalments and MDS boxes in this neighbourhood is substantially less than the whole of Scotland. In the Dunamis Pharmacy we have reached full capacity for dosette boxes. Although this is not a core service, it is a vital service that people rely on. We would propose a robot capable of dispensing dosette boxes for patients. This will be invaluable to the aging population.
<b>4.33</b>	In regard to smoking cessation payments, current pharmacies are over 56% below the Scottish average. With regards to medicines care and review items, the number of items dispensed on average by month is five items which is 98% below the Scottish average of 304 items. Emergency hormonal contraception is the only core service dispensed at an acceptable rate in Bathgate. Currently all pharmacies in Bathgate are operating at full capacity, especially at Dunamis, and none are adequately providing the core services in the contract. Daily, Dunamis pharmacy experiences issues with the volume of prescriptions we are dealing with and there is no room to expand at Dunamis. Another pharmacy to service the population of the wider community will be welcome.
<b>5.</b>	<b>The Chair invited questions from the Interested Parties</b>
<b>5.1</b>	<b>Mr Balvindor Sagoo (Boots Ltd) to Ms Ogunnoiki</b>
<b>5.2</b>	Mr Sagoo asked Ms Ogunnoiki where she got the data regarding the population of the neighbourhood from as it stated it was 1,500. She replied that the last data was received in 2011 and that was a lower amount. When she approached the Community Councillor, they broke down the surrounding catchment areas with a total of 3,600 in population but for Windyknowe, when Glasgow Road and Hardhill was included, it came to 1,500.
<b>5.3</b>	Mr Sagoo asked what the population was in 2011. Ms Ogunnoiki noted that it was in the 700s but did not include Glasgow Road or Hardhill.
<b>5.4</b>	Mr Sagoo asked where the Community Councillor extracted the data from. Ms Ogunnoiki responded by he had access to the latest population census from 2021.
<b>5.5</b>	Mr Sagoo asked where the respondents of the CAR live and whether it is within or outwith the neighbourhood. Ms Ogunnoiki responded that the CAR was advertised within Windyknowe, Bathgate and Boghall with posters that had QR codes. The CAR was also advertised in Bathgate and Boghall as many people from those neighbourhoods are travelling to use the Dunamis pharmacy.
<b>5.6</b>	Mr Sagoo mentioned a CAR poster at the health centre and asked by what other means residents had to access the CAR. Ms Ogunnoiki confirmed that the posters with QR codes were the majority of the promotion.
<b>5.7</b>	Mr Sagoo asked if social media was used for promotion at all. Ms Ogunnoiki confirmed that it was available on the Facebook page for Dunamis pharmacy. Mr Sagoo said that probably a lot of the respondents do not live in Windyknowe and

	Ms Ogunnoiki replied that a lot did but she couldn't say for sure and didn't know the percentage.
<b>5.8</b>	Mr Sagoo asked Ms Ogunnoiki if she was in negotiations to purchase the Lloyds Pharmacy at the Health Centre. Ms Ogunnoiki confirmed that she was and that she had paid her deposit but had to pull out as the company refused to negotiate. She confirmed that if she had been successful with purchasing Lloyds, she still would have moved forward with this application and that she would have been able to support the viability of three pharmacies in Bathgate.
<b>5.9</b>	Mr Sagoo asked Ms Ogunnoiki if she had recently been providing staff to the Lloyds pharmacy at the health centre? Ms Ogunnoiki confirmed she had been during the process of negotiation as she had paid her deposit and wanted the business to continue serving the population so employed two members of staff who were in training at Boghall to move over once the deal was completed.
<b>5.10</b>	Mr Sagoo asked if the staff provided to Lloyds pharmacy made the decision to close the pharmacy further. Ms Ogunnoiki confirmed that was not the case, that the pharmacy was closed on Saturdays already and as a result of the new staff they opened on Saturdays which only stopped again a few weeks ago. The pharmacy would have been worse off without the additional staff she provided.
<b>5.11</b>	Mr Sagoo asked Ms Ogunnoiki who the pharmacist would be if her application was successful? Ms Ogunnoiki would not disclose that information but confirmed it is an independent prescriber for Pharmacy First Plus services and that she is in training to be an independent prescriber as well.
<b>5.12</b>	Mr Sagoo asked about the plans Ms Ogunnoiki provided of the floor pictures of the pharmacy as it was thought these were two different floors but looked very similar. Ms Ogunnoiki confirmed that the visual actually showed two different layout options for the first floor rather than the upstairs and downstairs.
<b>5.13</b>	Mr Sagoo asked Ms Ogunnoiki if she had any contractors lined up to build the pharmacy at the premises. She confirmed that she did, that the owner of the site is Warrington's Property Development who also own the row of shops where the property is sitting and they are going to build it.
<b>5.14</b>	Mr Sagoo referred to the quoted numbers from Ms Ogunnoiki's presentation in which Bathgate was lower than the Scottish average for Pharmacy First services and asked if that included the Dunamis and Armadale pharmacies as well. She confirmed that they only included the two Lloyds and Boots and that individual numbers for those pharmacies are available to the public.
<b>5.15</b>	Mr Sagoo asked Ms Ogunnoiki if she thought the 2 Lloyds were potentially bringing down the whole number and that Boots was delivering similar to the national average. She confirmed she did not remember.
<b>5.16</b>	<b>Mr Nikhil Goburdhun (Gordon's Chemist) to Ms Ogunnoiki</b>



<b>5.17</b>	Mr Goburdhun referred to Ms Ogunnoiki's mention of new homes being built in Sibbald's Wynd and asked if there was a timescale for this development. She confirmed the planning permission included a proposal to start within a year.
<b>5.18</b>	Mr Goburdhun asked about MCR items which Ms Ogunnoiki mentioned about five were being issued per month and asked if she felt that is lower than average because GP practices are issuing a small number of MCR prescriptions? Ms Ogunnoiki noted that pharmacies should be proactively pushing for MCR prescriptions and engaging with patients to get that sorted.
<b>6.</b>	<b>The Chair invited questions from the Committee</b>
<b>6.1</b>	<b>Mr Mike Ash (Lay Member appointed by NHS Lothian) to Ms Ogunnoiki</b>
<b>6.2</b>	Mr Ash referred to Ms Ogunnoiki's promise of being able to offer Pharmacy First Plus services, and asked if that meant that when the one Independent Provider is off or on lunch that those services wouldn't be available. Ms Ogunnoiki confirmed that it would not be practical to have the Independent Prescriber as the only pharmacist on the premises and that there will be two pharmacists who can take over when they are unavailable but they won't both be prescribers. Patients could also make appointments so they know the Independent Prescriber is available.
<b>6.3</b>	Mr Ash asked about the robot services and if they are accessible from outside of the building as well as inside. Miss Ogunnoiki confirmed they would be.
<b>6.4</b>	Mr Ash asked if there was any evidence of other pharmacists that offer the robot services that indicate how popular they might be. Miss Ogunnoiki confirmed that she has colleagues in Darnley who use this service and find it useful for customers especially those who need access to prescriptions out of hours. They have over 2,000 collections from their robot a week.
<b>6.5</b>	<b>Mr Brian McGregor (Lay Member appointed by NHS Lothian) to Ms Ogunnoiki</b>
<b>6.6</b>	Mr McGregor noted that the premises proposed is not built yet and asked if six months from a possible approved application was a realistic timescale for this? Miss Ogunnoiki confirmed it would be as the builders and owners are the same as the row of shops and that planning permission has already been granted.
<b>6.7</b>	Mr McGregor made note of the aging population and the figures on prescription figures. Quick calculations show the list has hardly moved at all in the last two years. He asked if there was any explanation for that if the claim is that the population is increasing in Bathgate. Miss Ogunnoiki confirmed that she has conversed with surgeries about this and that a lot of patients have been removed or sent away if they are not living in Bathgate to encourage them to move back in to their own neighbourhood services. Also, each practice have increased over 2,000 patients from 7,000 to 9,000 and GPs refuse to accommodate new patients outwith Bathgate.
<b>6.8</b>	<b>Mr John Niven (Lay Member appointed by NHS Lothian) to Ms Ogunnoiki</b>

6.9	Mr Niven asked Ms Ogunnoiki to reiterate that the six month time period to open the premises is totally achievable. Miss Ogunnoiki confirmed that the building warrant has been granted and that she has photo evidence with the planning permission written on it recently.
6.10	Mr Niven asked Miss Ogunnoiki how she arrived at her definition of the neighbourhood. She confirmed it was through consultation with both the local Councillor, the property developer and the local people of Windyknowe.
6.11	Mr Niven noted the 695 CAR responses for a neighbourhood population of 1500 which would have amounted to 45% of people responding which seemed very high, but also the fact that Ms Ogunnoiki said there were responses from outside the area. He asked then why Ms Ogunnoiki defined the neighbourhood the way that she did. Ms Ogunnoiki confirmed that placing a poster with a QR code in her shop or the health centre means there was no way to stop patients from responding if they weren't from Windyknowe if they wanted to get involved and participate, it was not something she had control over.
6.12	Mr Niven noted that the Neighbourhood seemed very restricted and noted his surprise that Ms Ogunnoiki didn't consider areas from the North of Glasgow Road and boundaries with main roads as the catchment. Ms Ogunnoiki noted that yes the Councillor said that.
6.13	Mr Niven noted negative CAR responses particularly associated with Lloyds. With Lloyds pharmacies being taken over, he asked Ms Ogunnoiki what effect that will have on the level of service and how it will affect the application for this premises. Ms Ogunnoiki noted she has been serving the community for over 13 years and that she has seen a big expansion of Bathgate which is not stopping. She noted that was one of her desires to buy the Health Centre pharmacy in addition to this application and that she started this application in 2018.
6.14	Mr Niven noted that during site visits, Lloyds in particular said they had pulled out of supplying dosette boxes. Ms Ogunnoiki had indicated she is at full capacity for dosette box services. He asked if her number of dosette boxes has increased since Lloyds ceased supplying them. Ms Ogunnoiki noted that Lloyds stopped supplying them years ago prior to the problem. She noted her pharmacy prioritises existing patients and has taken patients from Armadale where necessary. The effect has not just been recent, the dosette box capacity was hit a long time ago.
6.15	<b>Ms Hazel Garven (Non-Contractor Pharmacist) to Ms Ogunnoiki</b>
6.16	In relation to dosette boxes, Ms Garven asked if Ms Ogunnoiki had any sense of knowing the local community and if these are being requested by patients or their doctors or on discharge? Ms Ogunnoiki confirmed the requests mostly came from doctors or on discharge from hospital.
6.17	<b>Ms Kaye Greig (Contractor Pharmacist) to Ms Ogunnoiki</b>
6.18	Ms Greig asked for Ms Ogunnoiki to confirm the size of the premises. Ms Ogunnoiki noted she was not aware of the exact size but that it is a sizeable piece of land.

6.19	Ms Greig noted the application was 4 years in the making and asked if given the purchasing of Lloyds in the area, if Ms Ogunnoiki could reiterate how much she thinks the change in pharmacy environment and level of service provisions that will be available will be affected. Ms Ogunnoiki confirmed that there are not only issues with what were previously Lloyds, but also Boots, and that her pharmacy in Boghall is also feeling the impact due to the increase in volume. She said that even with the independents taking over, it will bring better service but it's not enough.
6.20	Ms Greig noted that negative comments in the CAR almost unanimously mention Lloyds and asked if Ms Ogunnoiki felt that is relevant given the change in the current environment. Ms Ogunnoiki confirmed she does, yes.
6.21	Ms Greig asked about the neighbourhood map and where the new Taylor Wimpey development will be within the boundaries. Ms Ogunnoiki confirmed it will be on the western side of the neighbourhood, which is 0.3 away from the premises, and then on the neighbourhood boundary so just within it.
6.22	Ms Greig noted that Ms Ogunnoiki said there were no Pharmacy First Plus services or MDS capacity in the area currently but that on site visits it was clear the Bathgate Pharmacy is offering MDS and has an Independent Prescriber. It was confirmed this prescriber is splitting his time between Bathgate and Blackburn pharmacies. Ms Ogunnoiki confirmed she wasn't aware of this.
6.23	In relation to 20-minute neighbourhoods, Ms Greig asked Ms Ogunnoiki to confirm if the three current pharmacies in Bathgate meet this requirement. Ms Ogunnoiki said that she was not satisfied it did and that from Sibbald's Brae to Boots is more than a 20 minute travel time. Ms Greig confirmed she had it as less than 20 minutes to the new premises.
6.24	<b>Mr Vinny Bilon (Contractor Pharmacist) to Ms Ogunnoiki</b>
6.25	Mr Bilon asked about the neighbourhood and the new development as it is unclear how it fits in the neighbourhood and suggested the new development is actually south of the neighbourhood. Ms Ogunnoiki looked on the map where the development is and stated it is on the western boundary that there are still 190 units to build to add over 400 to the population.
6.26	Mr Bilon asked if the applicant's pharmacy in Boghall currently provides any services into the defined neighbourhood. Ms Ogunnoiki confirmed that it does, as well as into Armadale and Blackburn and beyond.
6.27	Mr Bilon noted the number of comments in the CAR around the service. He asked, given the change in contractors, if the CAR is still relevant as it currently stands. Ms Ogunnoiki noted the CAR also mentions Boots and that even though services in recently purchased Lloyds pharmacies will improve, they will still not be adequate and were not adequate prior to the problem with Lloyds either.
6.28	<b>Ms Elizabeth Gordon (Chair) to Ms Ogunnoiki</b>
6.29	The Chair asked about the eastern boundary of the proposed neighbourhood, noting it is a straight line but cuts through two houses and part of a football ground

	and asked why the boundary was put there. Ms Ogunnoiki confirmed it was due to the location of the cemetery as if you cut across the cemetery it goes into another neighbourhood altogether.
<b>6.30</b>	The Chair asked about the western boundary, which cuts through the middle of a cluster of houses and wondered why the boundary was there rather than including the houses to the west. Ms Ogunnoiki confirmed that in hindsight it likely should include those houses as following discussions with the Councillor he was describing the different catchment areas. She also confirmed the area did look different in 2018/2019 when the application as originally put in.
<b>6.31</b>	The Chair queried the Southern Boundary and asked why it did not include Hardhill Terrace. Ms Ogunnoiki noted that the housing development there is slightly different than those across the boundary and the developer gave her the advice to split it as such as he lives in the area and knows it. Looking at the map in hindsight she agrees more should have been included but she did take the advice she was given.
<b>6.32</b>	The Chair noted that during her presentation, Ms Ogunnoiki had mentioned amenities in the Windyknowe neighbourhood including shops but that the businesses adjacent to the proposed premises are a mortgage broker, letting agent and hairdresser and that although there was a convenience store at Falside Crescent, this is outside the neighbourhood. The Chair asked if there are any other shops in the neighbourhood. Ms Ogunnoiki said that this was what she had meant by shops.
<b>6.33</b>	The Chair noted she performed her site visit on a weekday in August and noted there was very low footfall in the neighbourhood and asked if the pharmacy is expected to have enough visitors to be viable. Ms Ogunnoiki confirmed it would, that the pharmacy is beyond footfall and has easy access for those coming from the school and driving and that it will bring a lot of people to the area as it is a health service on a very busy road.
<b>6.34</b>	The Chair noted that the plot appears narrow and asked if there would be parking specific to the pharmacy. Ms Ogunnoiki confirmed there would be, at least four spaces and that customers would also be able to use the adjacent parking spaces.
<b>6.35</b>	The Chair revisited the 20-minute neighbourhood concept and asked why Windyknowe needs another pharmacy closer to the neighbourhood when Google Maps says it is an 18 minute walk from the westernmost streets in the neighbourhood to a pharmacy in the town centre. Ms Ogunnoiki confirmed that when she investigated the walking distance was 21 minutes from Sibbald's Brae to Boots and that, even so, that would be for a healthy individual walking but that she was also thinking of customers who are disabled. The Chair also mentioned there appears to be a frequent bus service and asked for Ms Ogunnoiki's thoughts on that. Ms Ogunnoiki agreed there are a few buses but that with an aging population and disabled people, not everyone can access them.
<b>6.36</b>	The Chair confirmed that when she visited the Lloyds branch in the health centre and Armadale, when asked about the negative comments in the CAR, staff noted they were in a hiring freeze, that there was a problem with their supply chain and huge delays in receiving medication rather than huge delays processing the

	prescriptions and also they had experienced problems with system failure. She asked how Ms Ogunnoiki would respond to those explanations for the failures? Ms Ogunnoiki noted that the CAR took place and ended in September 2022 and that these problems started before and are still ongoing now even though they are now getting resolved. These issues have been taking place for some time and have gotten worse since the CAR closed.
6.37	The Chair referred to Bathgate Pharmacy, where at the site visit staff had said that there had already been a dramatic change in performance and asked Ms Ogunnoiki if she felt the situation has improved at all in the last 2 months or if it is still getting worse. Ms Ogunnoiki confirmed that there has been some improvement due to the takeover at the Lloyds premises at Bathgate but that one Independent Prescriber can't cover Bathgate and Blackburn and that the size of the pharmacy at the health centre will not change. There was a bit less pressure at her pharmacy at Boghall, but still pressure.
6.38	The Chair asked Ms Ogunnoiki how many CAR responses she believed were due to inadequacy of pharmacy provision versus inadequate services being provided by pharmacies there already. Ms Ogunnoiki noted that the problems have been long standing and that the inadequacy is definitely of services in Bathgate.
6.39	<b>The Chair had no further question for the Applicant but offered the Committee the opportunity to ask additional questions given the information provided.</b>
6.40	Mr Niven noted after visiting the West Lothian Council website that the Building Warrant Application has not been granted. Upon inspection it was confirmed that Ms Ogunnoiki has confirmation of planning permission being granted but not a Building Warrant. She apologised but noted she was assured the work could be done in six months.
7.	<b>Interested Party</b>
7.1	The Chair invited Mr Balvinder Sagoo from Boots Ltd to speak.
7.2	Mr Sagoo asked if everyone had received his speaker's notes emailed to NHS Lothian by Boots but participants confirmed they had not received them. Mr Sagoo also stated the notes contained diagrams. Although Mr Sagoo stated that he might be able to screen share his notes, his preference, when asked by the Chair, was for the document to be emailed to everyone.
7.3	The Chair adjourned the hearing for 5 minutes to call NHS Lothian. On reconvening the hearing, the Chair explained that NHS Lothian Board had received the speaker's notes but that there seemed to have been a misunderstanding as they had been under the impression from Boots that they could only be shared with the committee, not all participants and NHS Lothian didn't think it was appropriate to share this only with the Committee, not the applicant.
7.4	The Chair adjourned the hearing again to call the CLO for advice and reconvened the hearing with Stephen Waclawski of the CLO brought into the Teams Call (with

	Eleanor Paton of the CLO observing). The Chair explained to Mr Waclawski that Mr Sagoo had asked that his speaker's notes including diagrams be shared with participants and the Chair confirmed the reason NHS Lothian had given for not sharing them previously.
<b>7.5</b>	Mr Waclawski advised the hearing that it was a question for the Chair to weigh up whether it was fair, if there is any prejudice to parties and would the Committee find it useful. The speaker's notes were more straightforward as they should just be a verbatim account of what Mr Sagoo would say anyway. The diagrams were slightly different and if they introduced new materials, was this fair? Mr Waclawski offered the comparison that might have arisen if the hearing had been in person where a speaker asked to use a flipchart which might be helpful.
<b>7.6</b>	The Chair gave participants the opportunity to ask questions of Mr Waclawski then thanked him for his advice and continued with the hearing.
<b>7.7</b>	The Chair stated that the issue of the speaker's notes seemed quite straightforward as they are a script of what Mr Sagoo is going to say anyway and this would help participants ask questions. The Chair commented that the diagrams were obviously introducing something new to the hearing, however, obviously the applicant had asked to be allowed to introduce something new to the hearing earlier to show plans for the premises that hadn't been shared in advance. The Chair explained she had decided to allow the applicant to share the plans because she thought it would help with the participants' understanding. The Chair confirmed that due to a sense of fairness, the diagrams that Mr Sagoo wanted to share should be treated in the same way as the applicant's plans and the Chair confirmed she would allow them to be emailed to all participants by NHS Lothian.
<b>7.8</b>	Mr Sagoo explained he was struggling to understand why the Board had treated the speaker's notes differently this time to previous hearings. The Chair confirmed she had no insight into the decision taken at the Board the previous day.
<b>7.9</b>	The Chair then commented on the fact that it would take a few minutes for NHS Lothian to email the document to everyone so suggested adjourning the hearing for 40 minutes for a slightly early and longer lunch break to allow everyone the opportunity to read the document.
<b>7.10</b>	Mr Sagoo then queried the timings for the day as Nicola Maciver, who was there to support him, was due to conduct a job interview at 1pm as the Teams meeting for today had been due to finish at 1pm. The Chair confirmed that the timings can sometimes overrun and apologised but confirmed the hearing would reconvene at 1pm.
<b>7.11</b>	Ms Ogunnoiki then mentioned that she had a flight booked for 2pm. The Chair commented that it is always clear that the hearing will take as long as it takes on the day and that it is always suggested that parties are available in case the hearing has to be reconvened during the course of the afternoon. The Chair confirmed that given it was re-starting at 1pm, the hearing was unlikely to be finished by 2pm. The Chair asked Ms Ogunnoiki if she was going to be able to continue to participate beyond 2pm if the hearing were to go on beyond that. Ms

	Ogunnoiki confirmed that she would continue, that she didn't have any other option but to continue.
<b>7.12</b>	The Chair confirmed that NHS Lothian would email the document to everyone and that the hearing would adjourn for lunch and reconvene at 1pm.
<b>7.13</b>	The Chair reconvened the meeting at 1pm and checked that all participants had received Mr Sagoo's speaker's notes by email from NHS Lothian and all participants confirmed they had received the document.
<b>7.14</b>	The Chair invited Mr Sagoo to speak.
<b>7.15</b>	Good afternoon, Chair and members of the committee. Thank you for giving me the opportunity to speak today on behalf of our Boots Pharmacy in Bathgate where our store leader is Nicola Maciver who is supporting me today.
<b>7.16</b>	Before I progress further and due to the timing of the application with the sale of Lloyds pharmacies across the country. I would ask the committee if I was able to read out two letters supplied by the current owner of Bathgate Pharmacy and future owner of Lloyds Bathgate Health Centre Pharmacy.
<b>7.17</b>	As the regulations do now allow the current and future owners of these two pharmacies in Bathgate to attend today as interested parties, I feel it is dutiful of the committee to hear their brief statements provided to me as to their intentions to serve the community of Bathgate including the neighbourhood as defined by the applicant.
<b>7.18</b>	Mr Sagoo then read out the two letters which had been circulated to all participants in advance and form part of the materials for the hearing. The first letter being from Chris Johnstone, owner of Bathgate Pharmacy at 25 King Street Bathgate in which he stated that he believed the neighbourhood to be Bathgate and referenced the transformation of service in the pharmacy since taking over from Lloyds. The second letter read to the hearing was from Christian Barry of Teleta, the prospective purchaser of Lloyds at the Bathgate Primary Care Centre and mentioned planned vast improvements.
<b>7.19</b>	Mr Sagoo then continued with his presentation to the hearing.
<b>7.20</b>	We disagree with the neighbourhood proposed by applicant.
<b>7.21</b>	The neighbourhood is small with a very limited residential population - it could be suggested that the neighbourhood has been defined with the purpose of excluding the existing pharmacies.
<b>7.22</b>	Also, it would not appear to be a neighbourhood for all purposes with all the usual features and facilities you would expect to find in a neighbourhood - there is very little at the proposed site that would lead us to expect to find pharmaceutical services at the location (surgery, local shops etc.).
<b>7.23</b>	Therefore, we suggest that the neighbourhood of the application should be defined as the whole of Bathgate.

<b>7.24</b>	Bathgate town consists of a Morrisons on the High Street, an Aldi and other well utilised amenities such as a Starbucks Coffee shop. Bathgate is considered a contained centre.
<b>7.25</b>	Given that the pharmacy in Boghall clearly serves Bathgate also, the neighbourhood could be said to be Bathgate including Boghall. The 2011 Census Data gives information for the Bathgate locality. The locality defined for the census includes Boghall within the Bathgate locality.
<b>7.26</b>	If the panel determines that the neighbourhood is Bathgate but does not include Boghall, then this pharmacy should be considered when taking into account pharmaceutical services that are provided to the neighbourhood from pharmacies out with.
<b>7.27</b>	When considering services provided to the neighbourhood the panel should also consider any services provided to residents of Bathgate by the pharmacies located in Blackburn, Armadale and the wider area.
<b>7.28</b>	Population of Bathgate locality is approx. 21,000 according to the 2011 census data. This includes Boghall but not Standhill to the southwest of Bathgate.
<b>7.29</b>	<p>2011 census data - <a href="http://www.scotlandscensus.gov.uk">Search   Scotland's Census - Area Overview - Results for 2011 (scotlandscensus.gov.uk)</a></p> <ul style="list-style-type: none"> <li>• 73% of households have access to a private vehicle, which is higher than the national average.</li> <li>• 83.9% rate their health as good/very good, higher than the national average and 4.8% bad/v.bad which is lower than the national average.</li> <li>• 28.8% of houses are rented from the local authority or other social renting agencies which is higher than the national average.</li> </ul>
<b>7.30</b>	The SIMD map shows the neighbourhood defined by the applicant to be one of the lesser deprived neighbourhoods.
<b>7.31</b>	The neighbourhood defined by the applicant is covered by five super output areas. These areas (shown in purple on the map below) extend slightly beyond the neighbourhood defined by the applicant.
<b>7.32</b>	<p>2011 census data for this area indicates:</p> <ul style="list-style-type: none"> <li>• A population of less than 600 people</li> <li>• Living in 258 households of which only 57 do not have access to a private vehicle</li> <li>• 181 households are owner occupied (owned outright or with a mortgage)</li> <li>• 500 residents rate their health as good/very good and 28 rated their health as bad/very bad.</li> </ul>
<b>7.33</b>	A population of this size would not be sufficient to support the viability of a pharmacy. Therefore, for the pharmacy to remain viable, we believe it would need to provide services to patients from the wider area.



<b>7.34</b>	There are three surgeries based at Bathgate Medical Centre. The data for these surgeries gives an indication of which pharmacies patients of the medical centre use to dispense their prescriptions.
<b>7.35</b>	What is clear is that the pharmacy in Boghall is the second largest dispenser of items generated by the three surgeries in Bathgate, with 88% of the items dispensed by Dunamis Pharmacy in Boghall originating from the Bathgate Medical Centre.
<b>7.36</b>	The data shows that Blackburn Health Ltd also dispenses for patients whose prescriptions are written by these practices.
<b>7.37</b>	The applicant accepts in Part 4B section iv of the application form 'that pharmaceutical provision to this neighbourhood is being 'provided by other pharmacies outside the neighbourhood' including pharmacies in Armadale, Boghall and Blackburn.
<b>7.38</b>	The Lloyds pharmacy located within the practice dispenses the largest number of items written by the practices, which is understandable given the location.
<b>7.39</b>	What is apparent from the data is that the Boots Pharmacy and Lloyds Pharmacy in Bathgate have the capacity to do more prescriptions. These pharmacies will have been affected by the numbers dispensed by Boghall and Blackburn pharmacies.
<b>7.40</b>	A further pharmacy in the area, particular if the Bathgate Pharmacy is modelled on Boghall, will have an effect on the viability of the existing pharmacies in the Bathgate area.
<b>7.41</b>	Lloyds Pharmacy in the town centre is under the ownership of Bathgate Pharmacy. The Lloyds at the health centre is currently in the process of being sold. Therefore, pharmaceutical services have continued with no interruptions.
<b>7.42</b>	This existing pharmacies in Bathgate currently offer services seven days a week <ul style="list-style-type: none"> <li>• Boots – 9am – 5.30pm Monday to Saturday</li> <li>• Bathgate Pharmacy - 9am – 8pm Monday to Friday, 9am – 5pm Saturday and 12 – 4pm Sunday.</li> <li>• Lloyds - 8am – 6pm Monday to Friday, 9am – 1pm Saturday,</li> <li>• The applicant proposes to open 9am – 6pm Monday to Friday and 9am to 1pm Saturday. The proposed application does not offer anything by way of access to services at times not currently available.</li> </ul>
<b>7.43</b>	The existing pharmacies also offer a range of core, national and locally negotiated services.
<b>7.44</b>	The applicant has stated in the application form that there is presently no pharmacy in the neighbourhood they have defined and that pharmacy provision to this neighbourhood is being provided by other pharmacies outside this neighbourhood.

<b>7.45</b>	The Boots Pharmacy is located in Bathgate Town Centre on pedestrianised George Street. Even though George Street is pedestrianised, there is a large car park only a few metres away for patients who travel by car.
<b>7.46</b>	Access from the car park on Engine Lane is direct via a pedestrian path that runs alongside the Boots pharmacy.
<b>7.47</b>	Our pharmacy is currently open six days a week and offers all core, national and locally negotiated services.
<b>7.48</b>	We have recently increased the staffing of the pharmacy with two new members of staff and have an ACTP store manager in place. We also have 2 dispensers, a trainee dispenser, and a trainee pharmacy technician.
<b>7.49</b>	Due to the increased demand that was put on our Pharmacy due to the challenges faced by both Lloyds pharmacies we introduced the dispensing of prescriptions out with our premises through the Dispensing Support Pharmacy located off site. This meant we had the capacity to dispense more prescriptions on site and meet the expectations of our new patients.
<b>7.50</b>	In January 2023, our pharmacy had an unannounced pharmacy inspection from the GPhC, independent regulator. The inspector gave our pharmacy a satisfactory report and thanked the team for work they had been doing to provide an ongoing service to the Bathgate community.
<b>7.51</b>	We have also had a minor property intervention to increase the amount of prescription storage space we have in the pharmacy.
<b>7.52</b>	We support 15 patients on a variety of supervised addiction medications, and we have the capacity to take on more patients requiring drugs user services if required.
<b>7.53</b>	We offer Boots Medisure domiciliary dosage system from our Whitburn hub ( 525 patients) that also delivers out to patients. Deliveries are made as and when required and we have the capacity to do more. There is no charge for this service.
<b>7.54</b>	We also offer Pharmacy First service.
<b>7.55</b>	Even with the increase in patient numbers, with the support given by the Area Manager in staffing and use of the offsite dispensary, the pharmacy team have managed to look after their patients well as indicated by some of these comments. Mr Sagoo then read out a series of positive comments from Boots' pharmacy customers.
<b>7.56</b>	<p>Patients accessing services by car will find ample car parking in the town centre, near to the existing Boots , Bathgate and Lloyds pharmacies. Boots has car parking available to the rear as discussed previously also:</p> <ul style="list-style-type: none"> <li>• Bathgate pharmacy in the town centre has ample off-road car parking outside the pharmacy.</li> </ul>

	<ul style="list-style-type: none"> <li>• Lloyds at the Health centre also has parking available directly adjacent to the pharmacy.</li> <li>• Dunamis pharmacy in Boghall has on street parking adjacent.</li> </ul>
<b>7.57</b>	It is worth noting that parking at the proposed site is limited and is likely shared with other businesses.
<b>7.58</b>	The area is well served by public transport.
<b>7.59</b>	<p>For example:</p> <ul style="list-style-type: none"> <li>• The X25 service runs from Armadale, along Hardhill Road (the southern boundary of the applicant's neighbourhood, on to Bathgate and then Boghall and finally Edinburgh. This service typically runs half-hourly every day.</li> <li>• The 21 service that runs along Glasgow Road, is a also typically a half hourly service.</li> </ul>
<b>7.60</b>	<p>Patients who choose to walk to the nearest pharmacies will find a choice of three pharmacies within a mile of the proposed site.</p> <ul style="list-style-type: none"> <li>• Lloyds at the health centre is a walk of less than a mile taking approximately 15-20 minutes.</li> <li>• Boots in the town centre is a direct walk also of less than a mile taking approximately 15 minutes.</li> <li>• Bathgate pharmacy on King Street is a walk of just under a mile and takes approximately 18 minutes to walk.</li> </ul>
<b>7.61</b>	Delivery services are available from the existing pharmacies should patients require such a service.
<b>7.62</b>	Dunamis Pharmacy promote their free delivery service to patients in the Bathgate area prominently on their website.
<b>7.63</b>	Blackburn Pharmacy also promote their free delivery service on their website and Facebook page.
<b>7.64</b>	We would question the relevance of the CAR now that the Lloyds have been sold or are under the process of being sold and level of service has improved and will continue to do so.
<b>7.65</b>	The application states that there were 697 responses to the consultation – NB the population of the neighbourhood according to the 2011 census was only 600. This indicates the CAR was filled in by those who do not live in the Neighbourhood as defined by the applicant.
<b>7.66</b>	High number of respondents – possibly canvassed patients of Bathgate surgery that are delivery patients of Boghall Pharmacy? Indeed there is still a poster in the Bathgate surgery inviting patients to fill in the CAR.

<b>7.67</b>	Facebook posts from the applicant's pharmacy were a bit leading in suggesting long waits and improvement in the quality of services were required.
<b>7.68</b>	Question 2 – Do you think there are gaps/deficiencies in the existing provision of pharmaceutical services to the neighbourhood?
<b>7.69</b>	51% of the respondents make reference to excessive waiting times in the pharmacy and or time it takes to process repeats. Many of the comments reference the service they receive at one or both of the Lloyds pharmacies. One of these has now been taken over and is being operated by Bathgate Pharmacy and the other one is in the process of being purchased.
<b>7.70</b>	On Friday 18 <sup>th</sup> August I visited the site of the proposed pharmacy as well as the 4 pharmacies servicing the neighbourhood. Out of the four pharmacies the only one where I was not greeted instantly and had to wait for 5 minutes to be served was Dunamis pharmacy.
<b>7.71</b>	The Committee will be aware of the need to 'secure' the adequacy of services in the area, which includes considering the effect granting the application would have on the stability and sustainability of local NHS Pharmaceutical Services. That is the existing services available to patients as well as the long-term viability and security of the new pharmacy, should the application be granted.
<b>7.72</b>	In our experience, when a pharmacy opens near to an existing pharmacy, in a locality where there is the one pharmacy, the existing pharmacy can see a significant decrease in the number of items it dispenses and demand for services.
<b>7.73</b>	We submit that should the application be approved, and the proposed pharmacy go on to open, it will at the very least destabilise the provision of NHS Pharmaceutical services in this area.
<b>7.74</b>	If this proposed pharmacy goes on to open, the potential reduction of patients accessing Boots could put services at risk and lead to a reduction in staff.
<b>7.75</b>	We would like to take the opportunity to remind the panel that a pharmacy although private, is NHS funded and the addition of a new contract would be at an expense to the NHS.
<b>7.76</b>	The neighbourhood defined by the applicant is small and whilst it does not contain a pharmacy, is served by the pharmacies in the adjacent, and wider areas of Bathgate, Boghall and Blackburn.
<b>7.77</b>	The neighbourhood defined by the applicant is not a deprived area, most residents enjoy good health, are homeowners and have access to a private vehicle or live within a short distance of a bus stop for a service to and from Bathgate town centre.
<b>7.78</b>	The CAR is no longer of relevance due to the sale of the Lloyds pharmacies and the immediate and ongoing improvement of service by the new owners.

<b>7.79</b>	The existing pharmacies provide core, national and locally negotiated services. There is no inadequacy in services, and we submit that the services provided to patients of Bathgate by the existing pharmacies is adequate.
<b>7.80</b>	These pharmacies also provide opening hours that extend beyond those of the proposed pharmacy.
<b>7.81</b>	Patients have a choice of pharmacy within a mile of the proposed site.
<b>7.82</b>	The existing pharmacies all have parking within close proximity which is free of charge in most cases. Patients who have access to a car will have little difficulty accessing any of the existing pharmacies.
<b>7.83</b>	Extensive, promoted delivery services are available to residents of Bathgate. A resident would not have any difficulty finding a pharmacy to collect and/or deliver their prescription for them.
<b>7.84</b>	In conclusion, we submit the existing pharmaceutical services provided to the neighbourhood are adequate and urge the Committee to refuse this application.
<b>8.</b>	<b>The Chair invited questions from the Applicant.</b>
<b>8.1</b>	<b>Ms Olayinka Ogunnoiki (Applicant) to Mr Balvindor Sagoo</b>
<b>8.2</b>	Ms Ogunnoiki asked for Mr Sagoo to confirm that he claims to have 525 MDS patients in his pharmacy. Mr Sagoo confirmed that yes, in the Whitburn pharmacy. In Bathgate the pharmacy locally distributes 15 dosette boxes for patients and can take more, but the Whitburn pharmacy is the hub which allows more capacity to dispense prescriptions from Bathgate Medical Centre.
<b>8.3</b>	Ms Ogunnoiki noted the information that the Dunamis pharmacy is the second highest pharmacy dispensing prescriptions from Bathgate Health Centre with Lloyds being the first, and asked for what period of time that data was from. Mr Sagoo confirmed it was a period of six months from January to June 2022.
<b>8.4</b>	Ms Ogunnoiki asked Mr Sagoo to explain why there are numerous comments in the CAR that mention the poor service patients are receiving in Boots as well as Lloyds such as long wait times. Ms Ogunnoiki read out a number of comments from the CAR. Mr Sagoo confirmed that the majority of comments in the CAR were about Lloyds including the comment that just been read out about the one hour twenty minute wait. With regard to comments about Boots, he referred to the period from June 2022 when Lloyds had a massive issue with their PMR system creating an influx of patients at Boots and a period of extended waits. Boots quickly resolved this by introducing a dispensing support pharmacy and increased staff.
<b>8.5</b>	Ms Ogunnoiki asked why she is receiving prescriptions from Boots from customers who are retrieving them and bringing them to Dunamis Pharmacy in Boghall. Mr Sagoo noted that he does not believe that to be the case.
<b>8.6</b>	Ms Ogunnoiki asked Mr Sagoo if he was aware of the PPC application put in to Wester Inch in 2016 and that the Committee at that time considered the services to

	be inadequate? Mr Sagoo confirmed he was not aware of this. Ms Ogunnoiki then asked a further question about the 2016 hearing but Mr Sagoo could not comment as he had not read it.
<b>8.7</b>	Ms Ogunnoiki asked if there was a Pharmacy First Plus service available seven days a week in Bathgate. Mr Sagoo confirmed he was not aware of the availability of Pharmacy First Plus services.
<b>8.8</b>	Ms Ogunnoiki asked if the service is not full time, how patients access the Pharmacy First Plus services when an Independent Prescriber is not available in Bathgate Pharmacy. Mr Sagoo confirmed that the Health Board requests the pharmacist is available 25 hours a week to deliver the Pharmacy First Plus service.
<b>8.9</b>	Ms Ogunnoiki asked if the fact that Dunamis pharmacy in Boghall is the 2 <sup>nd</sup> largest dispenser of prescriptions from Bathgate Health Centre is a reflection on the service levels in Bathgate. Mr Sagoo confirmed that it is not, and that Boots has an adequate service and capacity to do more.
<b>9.</b>	<b>The Chair invited questions from other Interested Parties.</b>
<b>9.1</b>	Mr Goburdhun had no questions for Mr Sagoo.
<b>10.</b>	<b>The Chair invited questions from the Committee</b>
<b>10.1</b>	<b>Mr Mike Ash (Lay Member appointed by NHS Lothian) to Mr Balvindor Sagoo</b>
<b>10.2</b>	Mr Ash noted that the monthly averages for prescriptions seem high and noted Mr Sagoo's confidence that they could still rise, and he asked where that confidence comes from. Mr Sagoo noted that since offsite dispensing started, 60% of repeat prescriptions are now done offsite with the same level of staffing onsite which allows Boots to dispense more prescriptions on site. He confirmed Boots was capable of managing more Pharmacy First activities and also any acute prescriptions and walk-in patients.
<b>10.3</b>	Mr Ash asked if this was an aspiration or something already in place? Mr Sagoo confirmed it was introduced in January 2023.
<b>10.4</b>	Mr Ash referred to the definition of the area and asked if Mr Sagoo thought people would come from outwith the defined area to go to the new premises. Mr Sagoo confirmed that his implication was that the Boghall and Blackburn pharmacies deliver to a lot of patients and that another pharmacy making deliveries will take patients from existing pharmacies making them less viable.
<b>10.5</b>	<b>Mr Brian McGregor (Lay Member appointed by NHS Lothian) to Mr Balvindor Sagoo</b>
<b>10.6</b>	Mr McGregor noted concern about the specific comments in the CAR on service from Boots about long queues and the supply of items and asked if any of that has improved since the CAR was produced. Mr Sagoo confirmed that it had, and confirmed that Boots did have a lot of frustrated patients that came from Lloyds, where they had already experienced a long wait, around the time the CAR was done

	so patients were entering Boots in already in a stressed state. He referred to Boots' turnaround times for repeat prescriptions which still stand at two days to come from the surgery and then they are ready in two days.
<b>10.7</b>	<b>Mr John Niven (Lay Member appointed by NHS Lothian) to Mr Balvindor Sagoo</b>
<b>10.8</b>	Mr Niven mentioned that on the site visit, Boots was closed from 1pm to 2pm and asked if that was normal practice that will continue. Mr Sagoo confirmed that it would be to allow for the team to have a lunch break.
<b>10.9</b>	Mr Niven noted that Mr Sagoo mentioned increase in staff and asked if that was for senior pharmacists or support level. Mr Sagoo noted that part of the feedback from customers was that the till at the front of the store often wasn't opened so focus has been put into the retail element of the store as well.
<b>10.10</b>	Mr Niven asked if there was a charge for delivery. Mr Sagoo confirmed there was not.
<b>10.11</b>	<b>Ms Hazel Garven (Non-Contractor Pharmacist) to Mr Balvindor Sagoo</b>
<b>10.12</b>	Ms Garven asked if there were any other incidences the store had to close due to staff shortages aside from lunch times? Mr Sagoo confirmed that if a pharmacist turns up late that can impact services but nothing due to staff shortages specifically.
<b>10.13</b>	Ms Garven asked about issues with recruitment in pharmacist staffing. Mr Sagoo confirmed that they are currently recruiting for a pharmacist in the Bathgate pharmacy and are running off Boots relief pharmacists and locums as well.
<b>10.14</b>	<b>Ms Kaye Greig (Contractor Pharmacist) to Mr Balvindor Sagoo</b>
<b>10.15</b>	Ms Greig asked how another pharmacy in the area could affect recruitment and if there were going to be any perceived challenges? Mr Sagoo confirmed it would cause a challenge as there have been difficulties across healthcare faced predominantly since Covid and Boots are continuously recruiting across the sector for pharmacists and support staff.
<b>10.16</b>	<b>Mr Vinny Bilon (Contractor Pharmacist) to Mr Balvindor Sagoo</b>
<b>10.17</b>	Mr Bilon has asked if there was noticeable improvement to access to locum pharmacists since Lloyds changed hands. Mr Sagoo confirmed that yes, locum pharmacists have been more freely available.
<b>10.18</b>	Mr Bilon asked if Boots delivered into the proposed neighbourhood of Windyknowe. Mr Sagoo confirmed he wasn't sure about deliveries to patients in Windyknowe currently but that Boots would certainly offer the service should the need arise.
<b>10.19</b>	Mr Bilon asked if the changing hands of Lloyds would have a beneficial impact on the people of Bathgate. Mr Sagoo confirmed it would and that service had been consistently good for many months and that he had visited Bathgate Pharmacy on

	his site visit and had been able to chat to a pharmacist for twenty minutes with no queues.
<b>10.20</b>	<b>Ms Elizabeth Gordon (Chair) to Mr Balvindor Sagoo</b>
<b>10.21</b>	The Chair asked about temporary pharmacy closures. Figures from NHS Lothian show that in 2022 Boots had 20 temporary closures but only one in 2023 and asked what those 2022 closures could be attributed to. Mr Sagoo confirmed that it was potentially due to school holidays and staff absences and locum availability leading particularly to some half day closures, and that this summer had gone much more smoothly so far.
<b>10.22</b>	The Chair asked if there has been a change at Boots in terms of pressure since the criticism in the CAR and issues attributed to the Lloyds closures. Mr Sagoo confirmed he thought that to be the case, and that once dispensing support was put in a lot of pressure was removed. Now that the Bathgate Pharmacy is open there will be a huge improvement and the pressure has definitely eased in the last few months and there will be a huge improvement when the pharmacy at the Bathgate Medical Centre changes ownership.
<b>11.</b>	<b>The Chair invited Mr Nikhil Goburdhun from Gordons Chemist to speak.</b>
<b>11.1</b>	Gordons Chemist fully support the information Boots provided in their presentation and reiterate support for Teleta Healthcare as the current purchasers of Lloyds Pharmacy in the Bathgate Health Centre and believe they will address any failures. Gordons believe granting another contract in the same area will impact the completion of this pharmacy purchase and pharmaceutical services will be adversely affected if a new contract were to be granted.
<b>12.</b>	<b>The Chair invited questions from the Applicant.</b>
<b>12.1</b>	<b>Ms Olayinka Ogunnoiki (Applicant) to Mr Nikhil Goburdhun</b>
<b>12.2</b>	Ms Ogunnoiki asked what the current volumes of prescriptions are at Gordons Chemist in Armadale per month. Mr Goburdhun confirmed it to be 15,000 per month. Ms Ogunnoiki then asked what percentage came from Bathgate. Mr Goburdhun said approximately five percent. Ms Ogunnoiki calculated that five percent was 750 items per month. She then asked Mr Goburdhun if he thought the increase shown in the figures of over 1,000 are from Bathgate and he confirmed he thought it was due to the failings of Lloyds previously.
<b>13.</b>	<b>The Chair invited questions from other interested parties but there were none.</b>
<b>14.</b>	<b>The Chair invited questions from Committee members.</b>
<b>14.1</b>	<b>Ms Kaye Greig (Contractor Pharmacist) to Mr Nikhil Goburdhun</b>
<b>14.2</b>	Ms Greig asked if Gordons Chemist is at capacity or has further capacity for growth. Mr Goburdhun confirmed that Gordons Chemist would be able to take on more and that they use a separate site to produce dosette boxes which helps maintain a good standard in Armadale.



<b>15.</b>	<b>The Chair asked for the Interested Party Mr Nikhil Goburdhun for Gordons Chemist to sum up.</b>
<b>15.1</b>	In summary, Gordons do not feel that this pharmacy contract should be granted.
<b>15.2</b>	<b>The Chair asked for the Interested Party Mr Balvindor Sagoo from Boots UK Ltd to sum up.</b>
<b>15.3</b>	In summary, I disagree with the neighbourhood proposed by the applicant, the existing pharmacies provide the core national and locally negotiated services and the applicant has not been able to exhibit any inadequacy in these services and we submit that the services provided to patients in Bathgate by existing pharmacies is adequate so we suggest the Committee refuse the application.
<b>16.</b>	<b>The Chair asked for the Applicant Ms Olayinka Ogunnoiki to sum up.</b>
<b>16.1</b>	In summary, the services to Windyknowe and in Bathgate as a whole are inadequate.
<b>16.2</b>	The contractor activities for core services are very much below the Scottish average. A large volume of prescriptions makes it difficult to engage patients appropriately. Some services are put on the back burner and when those core services are below 40% of the Scottish average it proves the inadequacy. Patients in Bathgate are having to go out of town to get services in Armadale and Blackburn. The population of Bathgate has grown further and will continue to grow.
<b>16.3</b>	Of the 650 CAR respondents, comments were made about gaps and deficiencies including excessive wait times etc. The facilities seemed far away. There is an increase in demand from an increased population, inadequate competition and criticism of current providers. The appellant might suggest these are issues that come on the back of the situation from all Lloyds pharmacies but Boots is not excluded.
<b>16.4</b>	My purchase of Lloyds in Bathgate centre has failed as the very final hurdle. This purchase was in addition to the new contract application and is not a substitute for it. Everyone who tried to buy the Lloyds pharmacy were aware that this application was in process while they put in towards the bids. I strongly believe that even with the new owners of both Lloyds in Bathgate, this will not be able to alleviate the pressure on existing services and that it is still necessary for a new pharmacy to secure adequate provision of services to the population. It is definite that all three pharmacies will serve the areas immensely.
<b>16.5</b>	I disagree that Windyknowe will lead to a decline of surrounding pharmacies. I'm embarking on an independent prescribing course as there is demand not just for pharmaceutical services but also prescribers as many GPs have been inundated since Covid 19. This will be one of the core offerings of the new pharmacy.
<b>16.6</b>	I would like to refer to the PPC Hearing that took place in March 2016 by Tick Pharmacy to put a pharmacy outside Wester Inch. The site visit included queues

	observed at Lloyds at the health centre and the summation included reference to services in the neighbourhood being inadequate.
<b>16.7</b>	I would like the panel to consider two cases:- Lord Macphail in Rowlands v National Appeal Panel regarding Bonnyrigg 2006; and Lois Pharmacy Limited v National Appeal Panel 2004 relating to the requirement to consider probable future developments which may have an effect on existing services and may make it desirable to grant an application.
<b>16.8</b>	The neighbourhood of Windyknowe and the whole of Bathgate has exploded in population. The provision of pharmaceutical services is under great pressure and future developments have been proposed in Bathgate and Boghall, including at the former abattoir. This application is both necessary and desirable to support the aging population of Bathgate, which is the highest in Scotland.
<b>16.9</b>	The CAR speaks for itself. There is a lack of accessibility for the aging population of Windyknowe. We aim at Dunamis pharmacy and Windyknowe to be easily accessible for individuals in need regardless of physical abilities, age or socio-economic status.
<b>16.10</b>	Having a pharmacy located in a convenient neighbourhood accessible to all ages, especially the elderly is of the utmost importance allowing for better patient education, medication management, preventative care, emergency services and easily accessible healthcare advice.
<b>16.11</b>	It also allows for public healthcare initiatives, drug information and effective administration of vaccines and clinical care.
<b>17.</b>	<b>Retiral of Parties</b>
<b>17.1</b>	The Chair invited the parties present that had participated in the hearing to individually and separately confirm that a fair hearing had been received and that there was nothing further to be added. Ms Ogunnoiki confirmed she had had a fair hearing. It was at this time, when asked if he had had a fair hearing, that Mr Sagoo raised that the applicant referred to a 2016 PPC Hearing that was not referred to in her opening statement, although she had asked him about it in her questions to him and was therefore new information provided in the summary. The Chair confirmed she would liaise with the CLO and Mr Sagoo confirmed he was happy that this took place out with the meeting and otherwise that he had received a fair hearing. Mr Goburdhun confirmed he had had a fair hearing. Having been advised that all parties were satisfied, the Chair advised that the Committee would consider the application and representations prior to making a determination, and that a written decision with reasons would be prepared, and a copy issued to all parties as soon as possible. The letter would also contain details of how to make an appeal against the Committee's decision and the time limits involved.
<b>17.2</b>	The Chair advised the Applicant and Interested Parties that it was in their interest to remain available until the Committee had completed its private deliberations. This was in case the open session had to be reconvened should the Committee require further factual or legal advice, in which case, the parties would be invited to

	come back to hear the advice and to question and comment on that advice. All parties present acknowledged an understanding of that possible situation.																																																							
<b>17.3</b>	The hearing adjourned at <b>14:06</b> hours to allow the Committee to deliberate on the written and verbal submissions.																																																							
<b>18.</b>	<b>Summary of Consultation Analysis Report (CAR)</b>																																																							
<b>18.1</b>	<b>Introduction</b>																																																							
<b>18.2</b>	NHS Lothian undertook a joint consultation exercise with Manoport Ltd regarding the application for a new pharmacy within 133 Glasgow Road, Bathgate, EH48 2QN.																																																							
<b>18.3</b>	The purpose of the consultation was to seek views of local people who may be affected by this or use the pharmacy at its proposed new location. The consultation also aimed to gauge local opinion on whether people felt access to pharmacy services in the area was adequate.																																																							
<b>18.4</b>	<b>Method of Engagement to Undertake Consultation</b>																																																							
<b>18.5</b>	The consultation was conducted by placing an advertisement in the West Lothian Courier as well as being posted on NHS Lothian's website. Respondents could respond electronically or request a hard copy.																																																							
<b>18.6</b>	The Consultation Period lasted for 90 working days through 30 <sup>th</sup> September 2022.																																																							
<b>18.7</b>	<b>Summary of Questions and Analysis of Responses</b>																																																							
<b>18.8</b>	Questions covered: the neighbourhood; location of the proposed pharmacy; opening times; services to be provided; perceived gaps/deficiencies in existing services; wider impact; impact on other NHS services and optional questions on respondents' addresses and circumstances.																																																							
<b>Question</b>	<table border="1"> <thead> <tr> <th rowspan="2"></th> <th colspan="3">Response Percent %</th> <th colspan="3">Response Count</th> </tr> <tr> <th>Yes</th> <th>No</th> <th>Don't know</th> <th>Yes</th> <th>No</th> <th>Don't know</th> </tr> </thead> <tbody> <tr> <td><b>1. Do you think the neighbourhood described is accurate</b></td> <td>92.3</td> <td>2.0</td> <td>5.7</td> <td>635</td> <td>14</td> <td>39</td> </tr> <tr> <td><b>2. Do you think there are gaps/deficiencies in the existing provision of pharmaceutical services to the neighbourhood</b></td> <td>93.8</td> <td>2.0</td> <td>4.2</td> <td>650</td> <td>14</td> <td>29</td> </tr> <tr> <td></td> <td>Pos</td> <td>Neg</td> <td>Don't know</td> <td>Pos</td> <td>Neg</td> <td>Don't know</td> </tr> <tr> <td><b>3. What impact do you think a community pharmacy would have in the neighbourhood</b></td> <td>98.3</td> <td>0.9</td> <td>0.9</td> <td>682</td> <td>6</td> <td>6</td> </tr> <tr> <td><b>4. What are your views on the pharmaceutical services being proposed by the applicant</b></td> <td>96.7</td> <td>1.3</td> <td>2.0</td> <td>669</td> <td>9</td> <td>14</td> </tr> <tr> <td></td> <td>Yes</td> <td>No</td> <td>Don't know</td> <td>Yes</td> <td>No</td> <td>Don't know</td> </tr> </tbody> </table>		Response Percent %			Response Count			Yes	No	Don't know	Yes	No	Don't know	<b>1. Do you think the neighbourhood described is accurate</b>	92.3	2.0	5.7	635	14	39	<b>2. Do you think there are gaps/deficiencies in the existing provision of pharmaceutical services to the neighbourhood</b>	93.8	2.0	4.2	650	14	29		Pos	Neg	Don't know	Pos	Neg	Don't know	<b>3. What impact do you think a community pharmacy would have in the neighbourhood</b>	98.3	0.9	0.9	682	6	6	<b>4. What are your views on the pharmaceutical services being proposed by the applicant</b>	96.7	1.3	2.0	669	9	14		Yes	No	Don't know	Yes	No	Don't know
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5. Do you think there is anything missing from the list of services to be provided	4.5	71.6	23.9	31	493	165
6. Do you think a community pharmacy in the neighbourhood will work with other NHS health services such as GP practices	95.2	1.2	3.6	657	8	25
	Pos	Neg	Don't know	Pos	Neg	Don't know
7. Do you believe the proposed pharmacy would have a positive or negative impact on existing NHS services	97.2	1.2	1.6	670	8	11
8. What do you think of the location of the proposed community pharmacy	95.1	1.2	3.8	655	8	26
9. What do you think about the proposed opening hours	94.8	1.9	3.3	653	13	23

18.9	In total 697 responses were received. All submissions were made and received within the required timescale, thus all were included in the Consultation Analysis Report.
18.10	Of the 697 responses, 680 were submitted by individuals and eight were submitted from a group or organisation. Nine respondents did not clarify.
18.11	<b>Consultation Outcome and Conclusion</b>
18.12	The use of Jisc, a website that hosts online surveys, allowed views to be recorded and displayed within the full Consultation Analysis Report in a clear and logical manner for interpretation.
19.	<b>Decision</b>
19.1	The Committee in considering the evidence submitted during the period of consultation, presented during the hearing and recalling observations from site visits, first had to decide the question of the neighbourhood in which the premises, to which the application related, were located.
19.2	<b>Neighbourhood</b>
19.3	The Committee considered carefully the definition of the Windyknowe neighbourhood proposed by the applicant and the observations from the interested parties. They also took into account their observations from site visits by lay members to the area. The Committee did not accept the applicant's definition of the Neighbourhood for a number of reasons.
19.4	The neighbourhood proposed by the applicant did not have natural boundaries on all sides and did not seem to make sense, with some boundary lines cutting through houses, across a football ground and through clusters of houses.
19.5	The Committee also considered the size of the neighbourhood noting the very low number of households and evidence presented to the hearing regarding population size. The Committee saw no evidence that the proposed Taylor Wimpey development mentioned by the Applicant in her presentation fell within

	the boundaries of the neighbourhood as defined by the Applicant. The Committee decided that the neighbourhood was too restrictive, with too small a population to sustain a viable pharmacy.
<b>19.6</b>	The Committee also considered that the neighbourhood lacked amenities with residents requiring to leave the area to access most amenities.
<b>19.7</b>	The Committee accordingly determined that the neighbourhood for the purposes of this application should be defined as the town of Bathgate including Boghall, falling within the following boundaries: West: the A801; South: the A7066, then the western edge of Whitehill Industrial Estate then the M8 to the eastbound exit at Junction 3A; East: NNW from Junction 3A of the M8 to Wester Drumcross; North: Cross country from Wester Drumcross to Ballencreiff Mains, WSW to Nethermuir on the A800, continuing SW to the A801.
<b>19.8</b>	<b>Adequacy of existing provision of pharmaceutical services and necessity or desirability</b>
<b>19.9</b>	Having reached a conclusion as to neighbourhood, the Committee was then required to consider the adequacy of pharmaceutical services to that neighbourhood and, if the Committee deemed them inadequate, whether the granting of the application was necessary or desirable in order to secure adequate provision of pharmaceutical services in the neighbourhood.
<b>19.10</b>	In undertaking its consideration of adequacy of existing provision, the Committee considered the responses to the questions in the Consultation Analysis Review (the CAR) and evaluated those responses alongside evidence heard at the hearing, experience gleaned from site visits by Committee members and their knowledge of general issues concerning community pharmacy provision in Lothian, including in NHS Lothian's Pharmaceutical Care Services Plan.
<b>19.11</b>	In response to the CAR overall, the Committee noted the total number of respondents to the survey to be exceptionally high, but noted from evidence in the hearing that the respondents were likely to have come from both within Windyknowe and from the wider Bathgate and Boghall areas, particularly given the very small population in Windyknowe. The Committee acknowledged that, in response to question two, 650 respondents answered yes to the question of whether there are gaps/deficiencies in the existing provision of pharmaceutical services to the neighbourhood. It was clear, however, that the comments in this section of the CAR were heavily weighted towards the two Lloyds pharmacies located at the Bathgate Primary Care Centre and at 25 King Street, Bathgate, although some comments related to Boots.
<b>19.12</b>	The Committee noted that evidence had been heard during the hearing about the huge problems experienced by all Lloyds branches in the locality (two being in Bathgate and one in Armadale) including major staff shortages, a hiring freeze, system failure and supply difficulties. The Committee considered, however, the very

	significant changes that have both already occurred and are in the process of taking place since the time of the CAR regarding pharmacy provision in Bathgate with Lloyds having already sold the pharmacy at King Street, now owned by an independent contractor and known as Bathgate Pharmacy and further noting that the Lloyds at Bathgate Primary Care Centre is due to change ownership within weeks, with the prospective owner also being an independent contractor.
<b>19.13</b>	The Committee considered it particularly relevant that the new owners of both Lloyds pharmacies in Bathgate are independent contractors. The Committee felt suitably reassured that the service they intend to operate constitutes a vast improvement from the position under Lloyds' management. In the case of Bathgate Pharmacy, the Committee heard evidence during the hearing, backed up by their observations on their various independent site visits, of significant improvements that have already been introduced at Bathgate Pharmacy.
<b>19.14</b>	The Committee also considered the evidence put forward by Boots in the hearing to be relevant in respect of significant improvements they have made in response to comments in the CAR, noting their use of an offsite pharmacy hub to move some prescribing away from the store to create more stability and additional scope for service provision in store.
<b>19.15</b>	The Committee reached the view, therefore, that the CAR does not present an accurate picture of the current provision of pharmaceutical services in Bathgate in view of the significant changes that have already occurred and the transformation taking place at present in respect of service provision and that the CAR cannot, therefore, be used to assess the needs of the population.
<b>19.16</b>	<b>Population</b>
<b>19.17</b>	Although the applicant put forward arguments that the size of population of Bathgate meant an additional pharmacy was required, the Committee considered the summary of pharmacy provision in Lothian and in particular West Lothian contained within the NHS Lothian Pharmaceutical Care Services Plan. Having considered the population figures per Community Pharmacy in the locality and wider area, the Committee were reassured that for the population of Bathgate (understood to be approximately 21,000) the four existing pharmacies in Bathgate were adequate. It was accepted by the Committee that the proposed Taylor Wimpey development referred to by the Applicant would be contained within the boundaries of the neighbourhood as defined and agreed by the Committee, but it was agreed that a development of this size would not have a significant overall effect on the levels of pharmacy demand within the area.
<b>19.18</b>	<b>Capacity within existing pharmacies</b>
<b>19.19</b>	The Committee also considered it relevant that the existing independent pharmacies in the area don't have any official complaints or a history of store closures during core opening hours.
<b>19.20</b>	Some existing pharmacies in the area still have capacity to expand their services. With the addition of the use of the offsite hub by Boots, their capacity has now been increased. The change of ownership to independent contractors for the two Lloyds

	branches was also considered very relevant with capacity likely to increase significantly. Gordons Pharmacy in Armadale also confirmed it has additional capacity.
<b>19.21</b>	The Committee believe that the significant changes already underway within the former Lloyds branch at King Street, now the independent Bathgate Pharmacy are being brought in at pace and the imminent changes coming with new independent owners at the Lloyds at Bathgate Primary Care Centre (due to take over within weeks) mean provision of pharmaceutical services within Bathgate is now secure and sustainable and totally different to the situation under Lloyds' challenging ownership. The Committee feel assured that these independent contractors will be able to significantly improve services quickly and support higher numbers of prescriptions going forward.
<b>19.22</b>	The Committee noted concern that the prescription numbers for Lloyds at Bathgate Primary Care Centre in particular were actually getting to a worryingly low level and considered the viability of this particular pharmacy could actually be at risk if another pharmacy were to open in the area.
<b>19.23</b>	<b>Current Pharmaceutical Services</b>
<b>19.24</b>	The Committee concluded that current pharmacies in the neighbourhood were providing adequate services during core opening hours. The Committee took account of the fact that there are changes they are aware of already taking place and due to take place that assure the viability of those pharmacies.
<b>19.25</b>	<b>Conclusion</b>
<b>19.26</b>	Following the withdrawal of Mr Bilon, Ms Greig and Ms Garven in accordance with the procedure on applications contained within Paragraph 6, Schedule 4 of the National Health Service (Pharmaceutical Services) (Scotland) Regulations 2009, as amended, the Committee, for the reasons set out above, decided that the provision of pharmaceutical services in and to the Neighbourhood was adequate.
<b>19.27</b>	The Committee considered whether granting this Application was necessary to secure adequate provision of pharmaceutical services in and to the Neighbourhood. The Committee agreed, unanimously, that it was not necessary nor desirable to grant the Application in order to secure adequate provision of pharmaceutical services within the neighbourhood in which the premises were located by persons whose names were included in the pharmaceutical list, and accordingly the Application was denied. This decision was made subject to the right of appeal as specified in Paragraph 4.1, Regulations 2009, as amended.
<b>19.28</b>	The Committee acknowledged the complaint raised by Mr Sagoo regarding the Applicant introducing what he considered to be new evidence into the summing up portion of the hearing. The Committee decided there was no need to take legal advice from the CLO on this point as none of that new evidence was taken into account in any way and it didn't influence decision making of the Committee in any way.
<b>19.29</b>	The Hearing closed at 15:30 hrs

**Signed by**

**Elizabeth Gordon**  
**Chair – Pharmacy Practices Committee**

**Date:                   07/09/2023**