



PRIMARY CARE CONTRACTOR ORGANISATION

PHARMACY PRACTICES COMMITTEE

Application by Dears Pharmacy for inclusion in the pharmaceutical list in respect of the address, 27 High Street, Aberlady, EH32 0RA.

The Pharmacy Practices Committee met at 12.30pm on 25 April 2018 in Midlothian Council Chamber, Midlothian House, Buccleuch Street, Dalkeith, EH22 1DJ to consider the above application in accordance with the National Health Service (Pharmaceutical Services) (Scotland) Regulations 2009, as amended.

Decision of the Pharmacy Practices Committee

The decision of the Committee was that the provision of pharmaceutical services at the premises was neither necessary nor desirable in order to secure adequate provision of pharmaceutical services in the neighbourhood in which the premises were located by persons whose names are included in the pharmaceutical list and that accordingly the application should not be granted.

Pharmacy Practices Committee

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| Councillor Fiona O'Donnell | (Chair) |
| Julie Blyth | (Non-contractor Pharmacist) |
| John Connolly | (Contractor Pharmacist) |
| Margaret Tait | (Lay member) |
| Jan Stirrat | (Lay member) |

In attendance

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| Mahyar Nickkho-Amiry | (Applicant) |
| Barrie Dear | (Dears Pharmacy, Applicant Support) |
| George Romanes | (Gullane Pharmacy & Market Street Pharmacy, Interested Party) |
| Balvinder Sagoo | (Boots UK Ltd, Interested Party) |
| Donald Hay | (Gullane Area Community Council) |
| Emma Smith | (Administrator to the Pharmacy Practices Committee) (Accompanied by Susan Summers) |

The Committee convened to consider an application for inclusion in the pharmaceutical list, dated 4 May 2017, by Dears Pharmacy in respect of the address, 27 High Street, Aberlady, EH32 0RA.

1. A copy of the application had been circulated in advance to the Committee and the parties.
2. Written representations had been received from Lothian General Practitioners Sub-Committee of the Area Medical Committee; Gullane Pharmacy; Longniddry Pharmacy; Market Street Pharmacy; Boots UK Ltd and Gullane Area Community Council. The applicant and the interested parties were entitled to comment on the representations received. Copies of the written representations had been circulated in advance to the Committee and the parties.

3. The Committee had before them maps of the area surrounding the proposed premises detailing the location of the nearest pharmacies and GP surgeries, deprivation categories and population density. They had details of the numbers of prescriptions dispensed during the months October 2016 – March 2017 by the pharmacies nearest to the proposed premises and the number of prescriptions they dispensed that were issued from the GP surgeries closest to the premises during the months April 2016 – April 2017. The Committee were also provided with “Pharmacy Profiles” of the nearest pharmacies detailing opening hours, premises facilities and services offered.
4. 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.”
5. It had been confirmed prior to the meeting that the members present did not have an interest to declare.
6. The Committee agreed to invite the Applicant and those who were present who had made written representations (Interested Parties) to attend before them. The Applicant was represented in person by Mahyar Nickkho-Amiry, assisted by Barrie Dear. The Interested Parties who had submitted written representations during the consultation period and who had chosen to attend the hearing were George Romanes of Gullane Pharmacy; Balvinder Sagoo of Boots UK Ltd and Donald Hay of Gullane Area Community Council.
7. The Chairman explained the procedure that would be followed and no person present objected.
8. The procedure adopted by the Committee was that the applicant made an opening submission to the Committee, which was followed by an opportunity for the objectors and the Committee to ask questions. The objectors then made their oral representations and the applicant and the Committee then asked the objectors questions. The parties were then given an opportunity to sum up. Before the parties left the meeting the Chairman asked all parties if they felt that they had had a fair and full hearing. They confirmed that they had.
9. Prior to the meeting the Committee undertook a site visit. The Committee noted the location of the proposed premises, the pharmacies nearest to the proposed premises, the nearest GP surgeries and the neighbourhood as defined by the applicant.
10. 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.

The Applicant's Case

11. The Applicant thanked members of the Committee for the opportunity to put forward his application for inclusion in the pharmaceutical list.
12. The Applicant gave an overview of Dears Pharmacy stating that there were five pharmacies within the group with three in Edinburgh and two in Fife. These pharmacies have been under the same ownership of Barrie Dear since the 1990's and is a family owned business. The focus is on supporting the health and well being of patients in the community with established close working

relationships with local GPs, healthcare professionals and third sector care. All five pharmacies are modern and fitted to a high standard.

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

14. The Applicant stated that if the application was successful, the pharmacy would provide the following:

- Independent prescriber to help with management of long term conditions and chronic medication service
- Would actively engage and provide core services and ensure patients were aware of these services
- Locally commissioned services
- A range of private additional services including travel clinics, children's vaccination, diagnostic, enhanced minor ailment services
- Free prescription collection and delivery service
- Consultation room which could be used by healthcare/social professionals
- Support to GP services in the area acknowledging that there is likely to be a decrease in GP numbers throughout Scotland in the next few years

15. The Applicant stated that the opening hours of the proposed pharmacy would be Monday to Friday 9am to 5.30pm and 9am to 12pm on Saturday with no lunchtime closing.

16. The Applicant provided details of the proposed pharmacy layout. This would be:

- Retail area
- Consultation room, which will be made available for use of local health and social care teams
- Disabled access
- Automatic doors
- Structured dispensary to support all levels of activity in dispensing
- Digital screens highlighting services and health promotion

17. Mr Nickkho-Amiry informed the Committee that 107 new houses were being built in Aberlady and that some of this housing would be affordable housing. He went on to say that these houses will have an impact on current healthcare resources in the area.

18. The Applicant showed the Committee and Interested Parties annotated maps and aerial views showing the housing development area. The Applicant also showed the Committee a map which had the GP practices and pharmacies in East Lothian plotted on it. Mr Nickkho-Amiry went on to say that it was not necessary for there to be a GP practice in the area in order to have a pharmacy as demonstrated by the town of Wallyford where a pharmacy application was granted but there was no GP Practice in the town.

19. The Applicant went on to define the neighbourhood as the Aberlady parish boundary:

- North-West – Gosford Bay to Peffer Burn
- North – Luffness Mill
- South-East – Mungoswells
- South - Spittal

20. The Applicant provided details of the services currently available in Aberlady; a parish church, post office, village hall housing a range of community activities, convenience store, public house and a primary school.
21. Mr Nickkho-Amiry added that the nearest GP practice is in Gullane where one of the GP Partners has recently retired and has not yet been replaced. The Aberlady community have to travel outwith the village to access GP services and pharmacy services.
22. The Applicant added that the Committee needed to take account of how people in the neighbourhood live their daily lives; shopping in the convenience store and post office, children attend local primary school and the fact that they may want to access pharmacy services but not have to make an additional journey in order to do so.
23. The Applicant stated that there were a number of points to consider:
- Adequacy of existing services
 - How the population access services
 - How they commute to existing pharmacies
 - Opening a new pharmacy in neighbourhood will remove inadequacy
 - New Government strategy to increase greater access to pharmacy
 - It is up to the existing pharmacies to prove to the PPC that, despite lack of pharmacy in the neighbourhood, the residents have an adequate service
24. The Applicant went on to speak about the Consultation Analysis Report (CAR). He pointed out that there were 146 responses which equated to more than 10% of the residents of Aberlady and there had been additional support from the Community Council and the MSP. Mr Nickkho-Amiry added that:
- 87.7% of responders had agreed the neighbourhood as defined by the Applicant
 - 84.9% of responders had agreed that there were agreed gaps/deficiencies in service
 - 95.8% agreed a positive impact of new pharmacy in neighbourhood
 - Only 5% thought that there was anything missing from the list of services to be provided
 - 92.8% agreed that a community pharmacy would work well with other NHS Health services
25. Mr Nickkho-Amiry added that 90.8% of responders to the CAR provided positive comments to the proposed pharmaceutical services, 65.2% did not think there was anything missing from the list of services to be provided and that 86.5% of respondents gave positive views about the location of the proposed pharmacy
26. The Applicant informed the Committee that the local Community Council was very supportive of a pharmacy in the village of Aberlady and that their remit was to develop the community and protect the best interests of the residents.
27. Mr Nickkho-Amiry provided information on the current GP provision in the area and highlighted that 96% of the local population access the services provided by Gullane Medical Practice. The appointment system operated by the practice was different to the usual by offering a drop in service in the morning and afternoon. This could result in patients waiting up to 2 hours to be seen by a GP and the practice is facing challenging times trying to accommodate the demands of their patients.
28. Mr Nickkho-Amiry went on to provide information about the existing pharmacy provision in the area saying that the nearest pharmacies are in Gullane and Longniddry. Residents of Aberlady would need to drive 2.8 and 3.5 miles respectively to access these pharmacies and the bus journey would take between 10 and 12 minutes while walking would take between 56 minutes and 1 hour 7 minutes. Pedestrians would need to be able bodied and in good health to walk these distances.

29. The Applicant added that the existing population are using the village to fulfil day to day activities except there is no community pharmacy.

30. Mr Nickkho-Amiry then went on to give a review of GP and pharmacy provision in Gullane and Longniddry. 73.9% of patients have prescriptions dispensed at Gullane Pharmacy and script volume has increased by 19% while the patient list size at Gullane Medical practice has increased by 14%. When the new housing development is completed, there is a potential of an increase of 1500 patients wanting to register at the Gullane Medical Practice. Mr Nickkho-Amiry added that the majority of Aberlady residents are registered at Gullane Medical Practice and not at Harbours Medical Practice which is the next nearest GP surgery.

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

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

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

32. The Applicant stated that Gullane Pharmacy and Longniddry Pharmacy have shown a decrease in MAS, CMS and smoking cessation which showed a clear lack of engagement with patients. He added that it was not clear what the pharmacies were doing in order to promote essential public health to the population as was demonstrated by the low uptake numbers for the essential services. With the added pressures on GP practices, it should be evident that local pharmacies need to engage with patients to offer help to the medical practice and promote the above services thus reducing the need for patients to see a GP.

33. Mr Nickkho-Amiry referred to the East Lothian Integrated Joint Board Strategic Plan in which the IJB acknowledges the need to work harder to listen to local peoples needs for local services. He added that with 10% of the population of Aberlady completing the CAR, their views need to be respected.

34. The Applicant summarised the current service provision as:

- Restricted GP appointment times and loss of one GP
- Script volume is growing above overall Lothian figure (11.2%) by 19.2%
- No real engagement with regard to CMS registration and no serial prescriptions
- EMAS is not being engaged as only 1003 patients and 148 items per month supported
- Only 4 patients supported in last 12 months in the Smoking Cessation service
- Lack of engagement with local GP practice

35. Mr Nickkho-Amiry concluded by summarising the points for a new pharmacy by stating:

- There is no pharmacy provision within the village of Aberlady
- The population of Aberlady accounts for 11.3% of the population in North Berwick Coastal Ward

- The addition of new houses will increase the existing health access challenges in the locality as well as the pharmacies not within the neighbourhood
- By providing a new pharmacy the needs of the neighbourhood can be met and greater access to healthcare services locally in the village can be supported
- There is a challenge to patients with restricted appointment times at the GP practice in Gullane
- Engagement in all services as well as promotion of public health and well being
- There is a lack of engagement in pharmacy services from existing pharmacies
- Work closely with the local GPs and other healthcare professionals in a collaborative way to improve patient access and reduce health inequalities
- Offering a service is not adequate, actively engaging in services is key to support patients health and well-being
- Over 10% of the village have expressed their desire for a pharmacy for the village

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

Questions from Mr George Romanes to the Applicant

37. Mr Romanes questioned the MAS figures and asked the Applicant if he agreed that following changes to the service in 2016 with regard to greater restrictions being put in place, the figures could naturally reduce.

38. The Applicant agreed but added that pharmacies still need to actively engage with and register patients.

39. Mr Romanes stated that he had met with the practice manager at Gullane Medical Practice to discuss serial prescriptions but the practice were not keen to change their methods of prescribing at this time. He asked the Applicant if he had had similar feedback from the practice.

40. Mr Nickkho-Amiry responded that his impression was that the practice was keen to work with Dears Pharmacy on this.

Questions from Mr Balvinder Sagoo to the Applicant

41. Mr Sagoo asked the Applicant to confirm that 96% of the residents of Aberlady were registered at Gullane Medical Practice.

42. The Applicant confirmed that this was the case.

43. Mr Sagoo asked the Applicant if he had looked at the Boots pharmacies in the defined neighbourhood.

44. The Applicant replied that he had not as these pharmacies were actually outwith the defined neighbourhood.

Questions from the Committee to the Applicant

45. Mrs O'Donnell asked if there would be a pharmacist on duty at all times in the proposed pharmacy.

46. The Applicant replied that there would one pharmacist on duty and would be available even if on a break. He added that he was aware of Employment Regulations concerning breaks.

47. Mrs O'Donnell asked the Applicant to clarify what level of service and performance the other pharmacies with the Dears Pharmacy group achieved.
48. The Applicant replied that there were approximately 1600 patients registered for MAS in each pharmacy and approximately 150 patients registered for Smoking Cessation in each pharmacy. In addition there were 200 registered for CMS and the pharmacies fully and actively engage with all services and the local GP practices.
49. Mrs Tait asked if the proposed pharmacy would be DDA compliant and asked for clarification on what disabled access would be available.
50. The Applicant replied by saying that there would be automatic doors and a ramp would be available on request with assistance from staff if required.
51. Mrs Tait noted that there had been a 2 year wait for this application to be heard and asked if the property was still available under the original lease.
52. Mr Nickkho-Amiry confirmed that the original terms still applied.
53. Mrs Tait acknowledged that part of the proposed pharmacy would be dedicated to a post office and asked if the current postmaster/postmistress would work in this area.
54. The Applicant confirmed that this would be the case from time to time and added that the post office services would be maintained.
55. Mrs O'Donnell (Chair) informed all present that the validity of the post office was not to be considered at this hearing, the Committee would only be considering the pharmacy application.
56. Mrs Tait went on to ask the Applicant what arrangements would be in place to staff the two different areas in the building and whether pharmacy staff would be expected to man the post office and vice versa.
57. The Applicant replied that there would be two kinds of staff roles, post office and pharmacy. However, on occasion there would be cross cover arrangements if required. Dears Pharmacy has operated similar set-ups with no problem and has relief dispensing staff within the company.
58. Mrs Tait asked about busy periods i.e. Christmas and how staffing levels could cope.
59. Mr Nickkho-Amiry confirmed that they would employ temporary staff in order to cope with increased demand.
60. Mrs Stirrat asked the Applicant what percentage of Gullane Medical Practice patients would come to the pharmacy and for what reasons.
61. Mr Nickkho-Amiry replied that he could not be specific about numbers but he expected that there could be a high number of patients seen under MAS as long as the GP practice promoted the service. He added that the reasons for patients visiting the pharmacy would be varied and the GP practice could sign post patients to the pharmacy.
62. Mrs Stirrat asked if GP practice reception staff would be expected to send patients to the pharmacy.

63. The Applicant confirmed that this could be the case for minor ailments but if a patient arrived at the pharmacy and needed a GP, then the pharmacist would refer them back to the GP practice for an appointment with a GP. He added that a variety of diagnostics would be used by the pharmacy to provide patients with access to blood pressure testing, checking cholesterol levels, help for Coeliacs and HIV testing for example. The Applicant acknowledged that some of these services are chargeable.
64. In response to a question from the Committee, the Applicant confirmed that the population of Wallyford was 2,700 but although there was no GP practice there, there was a pharmacy.
65. In response to a question from Mr Connolly the Applicant confirmed the population of the village of Aberlady was 1190.
66. Mr Connolly asked Mr Nickkho-Amiry to confirm the percentage of car ownership in Aberlady to which he replied that it was 89% and that across the whole ward 36% of the population had 1 car, 44% had 2 cars, 5% had 3 cars and 11% had no cars.
67. Mr Connolly asked the Applicant to provide the breakdown of age groups in the ward. Mr Nickkho-Amiry replied that 59.5% were working age, 15.9% were children and 21.6% were over 65. He confirmed that the population was relatively well off and that there was not much difference between the Aberlady population and that of Gullane.
68. Mr Connolly asked the Applicant how many prescription items the proposed new pharmacy expected to dispense each month.
69. Mr Nickkho-Amiry replied that he would expect about 2,000 prescription items to be dispensed per month which in his view is sufficient to support a pharmacy when all other services offered were taken into consideration. He added that the pharmacy would be sustainable on NHS services alone along with the support of the other pharmacies within the Dears Pharmacy group.
70. Mr Connolly asked the Applicant if in his view there would be a drop in patients accessing the Gullane Pharmacy services if the application for the proposed pharmacy was granted.
71. Mr Nickkho-Amiry agreed that this would be likely but with the completion of the new housing, numbers should balance as more residents moved into the area.
72. Mr Connolly asked the Applicant how he would ensure that patients were engaged with CMS, EMAS and other services.
73. Mr Nickkho-Amiry replied that the population need to be made more aware of the availability of these services and there were information booklets that could be distributed. He added that he would use local venues like the village hall to arrange events to engage with the local residents.
74. Ms Blythe asked the Applicant what in his opinion was the reason that 96% of the population go to Gullane to access local services.
75. The Applicant replied that Gullane was closer to Aberlady than Longniddry and has a bigger range of shops and other services.
76. Mrs O'Donnell asked the Applicant to provide information on the out of hours service.
77. Mr Nickkho-Amiry replied that pharmacy extended hours scheme is offered to provide a range of services to lessen the burden on NHS. NHS24 can provide pharmacy advice

78. Mrs O'Donnell asked the Applicant if new pharmacy services like 'Pharmacy to You' is of concern and if there was a possibility that services like this would impinge on pharmacies.
79. The Applicant replied that patients still want to have an interaction with pharmacy staff and overall bricks and mortar pharmacies are still preferable. He added that he would want to be innovative in the use of IT to enhance services not replace them.
80. Mrs O'Donnell went on to ask what evidence the Applicant had for the higher numbers of population visiting Aberlady.
81. The Applicant replied that there were more people coming to the village in order to use existing services and to use the post office and the local bank as these services were no longer available in Gullane.

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

82. Mr Sagoo started his presentation by saying that there were no great issues with the Applicant's defined neighbourhood; however it does seem to extend a way to the south to incorporate a larger area of open land. The distance from the town centre of Aberlady to Mungoswells is well over 2 miles.
83. Mr Sagoo went on to say that whatever definition is adopted by the PPC, they should be aware that consideration should be given to the provision of services to the neighbourhood from pharmacies located outside of it.
84. Mr Sagoo stated that Aberlady is a village with a small population of under 1200 people and whilst population size alone is not a reason for granting or refusing an application, the viability of the proposed pharmacy and the effect on the existing provision in the area should be considered.
85. Mr Sagoo stated that the village of Aberlady is located within the North Berwick Coastal Ward and the ward profile document published in November 2017 states that Aberlady is within the least deprived quintile of the 132 data zones within East Lothian. He added that 76% of all housing is owner occupied with detached housing being the most common form of housing in the North Berwick Coastal Ward. Almost three-quarters of all housing falls into council tax bands D-H.
86. Mr Sagoo went on to say that residents of the ward rating their health as Good/Very Good are higher than the East Lothian average (85% versus 82%) and those rating their health as bad/Very Bad is lower than the area average (2% v 6%).
87. Mr Sagoo added that the village does not have a GP surgery and patients will be registered with practices in neighbouring towns and villages. Given the very limited facilities in the village, many residents of Aberlady will leave the village on a frequent basis to access amenities in the wider area and will access pharmaceutical services while doing so.
88. Mr Sagoo said that the high level of car ownership in the ward is also reflected in Aberlady with residents of the village benefitting from high levels of car ownership and with a significant percentage of households having access to two or more vehicles. He added that the village is also well served by public transport with at least three bus services an hour running between North Berwick and Edinburgh, calling at Aberlady.
89. Mr Sagoo stated that free delivery services are available from local pharmacies, including Boots in Haddington, should any patient require such a service. He added that Market Street Pharmacy

have said that they also provide a delivery service to the housebound from their pharmacy in Haddington.

90. Mr Sagoo went on to talk about the CAR and said that while there may be some support for the application indicated within the CAR, some of this may be due to the fact that residents wish their valued post office services to remain.
91. Mr Sagoo went on to say that there is no suggestion within the CAR that patients are experiencing significant difficulties when wishing to access services or that the services provided by the existing pharmacies are not meeting their needs.
92. Mr Sagoo added there were a few issues raised within the CAR that he would like to highlight:
- Concerns from respondents about space within the Post Office premises and the provision of drug user services (page 6)
 - Comments regarding difficulty with parking, congestion on the road and concerns about increased traffic (page 10)
 - Respondent also expressed concern as unsure about some of the services offered and do not want negative impact on village (page 10).
 - Services are currently being very well provided by the existing pharmacies (page 10)
93. Mr Sagoo then went on to talk about the consideration of adequacy with regard to pharmaceutical services. He said that the Applicant stated that the proposed pharmacy will provide the neighbourhood with access to healthcare services as well as maintaining a post office to support the community. He added that the feeling towards safeguarding the existing postal and banking services is evident from the representations made and it is possible that locally people may see the pharmacy as a means to ensuring this. It is detailed on the CAR that a passport photo booth was suggested as a possible additional service and one respondent stated that keeping the post office open was important to the community. Mr Sagoo questioned whether the same level of support would have been received had the suggestion of retaining the post office services not been made.
94. Mr Sagoo went on to say that whilst he understood the strength of feeling, the continuing provision of the services from the post office is not a relevant consideration of the regulatory test and he respectfully asked that the Committee should be mindful that it is the provision of pharmaceutical services that should be considered.
95. Mr Sagoo said that the Applicant had failed to provide any evidence within the application to suggest that the existing pharmaceutical services in the area are unable to meet the present or any future demand for pharmaceutical services, nor has the Applicant provided any indication of significant difficulties encountered by patients wishing to access pharmaceutical services in the area.
96. Mr Sagoo added that the existing pharmacies in East Lothian provide patients with access to a range of pharmaceutical services and that this application does not secure opening hours in addition to those already available. He went on to say that the Applicant does not propose to offer any services for which they have identified an unmet need that cannot be filled by the existing contractors.
97. Mr Sagoo went on to speak about the access to existing pharmaceutical services. He said that car ownership in the North Berwick Coastal Ward is higher than both the national average and the average for East Lothian. 89% of households have access to at least one vehicle with 49% of households having access to two or more vehicles.

98. In summary, Mr Sagoo stated that the village of Aberlady has a small, relatively affluent population that benefit from high levels of car ownership, high home ownership and good levels of health. The suggestion that post office services would be secured into the future by having a pharmacy at the proposed site may have misguided those supporting the application with regard to the services under consideration. He added that comments within the CAR that support the application suggest a level of convenience in having a pharmacy at this location but there is little or no evidence within the report or in the representations made to suggest an inadequacy in pharmaceutical services to the neighbourhood.
99. Mr Sagoo ended by saying that the Applicant has failed to provide any factual information at this time in accordance with the regulations that would indicate an inadequacy within the existing pharmaceutical provision and that he respectfully urged the Committee to reject this application as being neither necessary nor desirable for these reasons.

Questions from the Applicant to Mr Sagoo

100. The Applicant asked Mr Sagoo if the free collection and delivery service was an NHS service.
101. Mr Sagoo replied that it was not.
102. The Applicant asked Mr Sagoo if he had visited any sites of a similar layout and space to the proposed pharmacy.
103. Mr Sagoo said that he had made reference to the space as it had been highlighted in the CAR.

Questions from Mr Hay to Mr Sagoo

104. Mr Hay asked Mr Sagoo why there was so much reference made to the matter of vehicle numbers in the area and what was the significance of this.
105. Mr Sagoo replied that the population of Aberlady routinely visit surrounding areas to access services and that they do so predominantly by car.

Questions from the Committee to Mr Sagoo

106. Before commencing with questions, the Chair, Mrs O'Donnell again read out Regulation 5(10) to the hearing:
Regulation 5(10) provides that an application shall be granted if the Board is satisfied that the provision of pharmaceutical services at the premises is necessary or desirable in order to secure adequate provision of pharmaceutical services in the neighbourhood in which the premises are located.
107. Mrs O'Donnell asked Mr Sagoo if residents of Aberlady could register with the GP practice in Haddington.
108. Mr Sagoo replied that they could register and there were currently Aberlady residents registered with that practice as their boundary area covers Aberlady.
109. Mrs O'Donnell asked Mr Sagoo if there was a pharmacist available in the Boots pharmacy over lunchtimes.
110. Mr Sagoo informed the Committee that there was a pharmacist available over part of the lunchtime but they did have to have a break of 1 hour.

111. Mrs Tait asked Mr Sagoo if the proposed pharmacy application was granted what impact it would have on Boots in Haddington. She added that the bus service from Aberlady to Haddington was not regular.
112. Mr Sagoo agreed that the bus service was not ideal between Aberlady and Haddington and went on to say that Boots would certainly lose some business if the pharmacy application was granted.

The Interested Parties Case – Mr George Romanes of Gullane Pharmacy

113. Mr Romanes started his presentation by introducing himself as the Superintendent Pharmacist of a small family run group of seven Community Pharmacies in the Borders and East Lothian.
114. Mr Romanes went on to say that he was representing Gullane Pharmacy and Market Street Pharmacy in Haddington.
115. Mr Romanes said the he hoped that the Committee on their site visit saw that he was very serious about the profession of Community Pharmacy and all the staff have been trained to a high level providing excellent over counter sales and advice. The pharmacies offer core NHS services along with private consultation rooms. Also offered are the private services such as flu vaccinations to ease pressure in local NHS services to the local population.
116. Mr Romanes then said that it was the job of the Committee to consider the question of whether it is necessary or desirable to grant the application to ensure adequacy of pharmacy services in or into the neighbourhood in question.
117. Mr Romanes added that he would respectfully put to the Committee that it is not necessary to grant another pharmacy contract to get adequate pharmaceutical services provision in the village of Aberlady. Mr Romanes went on to say that he was unaware of any inadequacy of service to the residents of Aberlady.
118. Mr Romanes stated that the residents of Aberlady have a choice of 5 pharmacies within a short drive with Gullane Pharmacy being the nearest at just over 2 miles away. The other pharmacies in the area are also nearby with one being in Longniddry and three in Haddington. Indeed, some patients choose to travel to North Berwick where there are another two pharmacies.
119. Mr Romanes then said that he could not argue that the Applicant's definition of the neighbourhood had not been picked well as it contains the new housing area so therefore would agree with the definition.
120. Mr Romanes then went on to say that the neighbourhood cannot be claimed to be a neighbourhood for all purposes. Whilst the village has a shop and a post office, it has no GP surgery, dentist, optician and little in the way of retail shops to anchor the residents in the village. He added that the residents of the proposed new housing will not be able to use the facilities of Aberlady for day to day needs and will not benefit the village hugely in economic terms. They will need to leave the village to access banks, supermarkets, butchers and other similar services.
121. Mr Romanes stated that the residents of the area enjoy a higher than average car ownership and have six buses daily to Gullaner or North Berwick.
122. Mr Romanes then said that the residents of the area also enjoy better than average health and score low in SIMD, which means that the residents are not living in a deprived area which generally leads to higher need for health service input.

123. Mr Romanes went on to say that the residents of Aberlady and the surrounding areas have not only access to a choice of seven community pharmacies but can get access to home deliveries from these pharmacies to improve access to repeat medications. This service is provided free of charge from all the local pharmacies and is used by the elderly and housebound. Mr Romanes added that during the bad snow a 4x4 was used to ensure the deliveries were made and his Haddington pharmacy was the only one open do one of the worst snow days. Staff coped with the extra workload which proves that the pharmacy and its team can cope well with increased demand for daily supervisions, compliance aids etc.
124. Mr Romanes stated that the residents of Aberlady use Haddington, Gullane and North Berwick for shopping and daily needs and choose to access the pharmacy services there. He added that most utilise the pharmacy in Gullane as it is close to the GP surgery and that the investment in the pharmacy environment, high levels of stock and staff training has made it a better pharmacy. He added that core services are offered and that the Gullane pharmacy strives to work with the local GP practice at all times to be responsive to their needs. Mr Romanes referred to the CMS numbers and informed the Committee that the Gullane Medical practice choose to prescribe that way they currently do and although this may change in the future, a new pharmacy in Aberlady would not change their prescribing methods. Communication between Gullane Pharmacy and the surgery has improved as this is now done by email.
125. Mr Romanes went on to speak about the CAR. He said that the CAR did not provide much in the way of substantial information and only three respondents actually mention easier access whilst six respondents do not want daily supervision of methadone and buprenorphine to be offered as a service by the proposed pharmacy.
126. Mr Romanes added that the proposed site for the pharmacy is not very large to fit in all the facilities needed for a modern pharmacy. Parking is difficult due to the narrow street and number of parked cars.
127. Mr Romanes stated that much has been made of the retention of the post office as part of the application. He added that whilst it was good to retain services such as the post office, this should not be part of the considerations about the pharmaceutical services that are provided locally. He went on to say that the post office in Gullane moved in to the local Day to Day store and had closed down due to lack of profit per square foot.
128. Mr Romanes went on to talk about sustainability. The Aberlady population of about 1100 times the average scripts per month only gives 1580 items and that is assuming that everyone will use the proposed pharmacy and not other local pharmacies. This makes a very marginal economic case.
129. Mr Romanes ended by saying that overall there is no demonstrable service inadequacy in the area. High car ownership, good bus service and deliveries in to the neighbourhood should be considered. It would not be necessary to grant another pharmacy contract as there are over five pharmacies within easy reach of the residents of Aberlady. Mr Romanes said finally that the Committee should not let the post office issues cloud the issue and should reject the application accordingly.

Questions from the Applicant to Mr Romanes

130. The Applicant asked Mr Romanes if he had engaged with the Community Council and if so how had he done so.

131. Mr Romanes replied that they had had discussions but these had not been in any depth as it was felt that any discussion about the new pharmacy application may prejudice a decision. Mr Romanes confirmed that he had spoken to a few members of the Community Council but not the Chair.
132. The Applicant asked Mr Romanes if he felt that only four patients per year signed up for Smoking Cessation service was acceptable.
133. Mr Romanes replied that it was a low number but patients could not be forced to access this service. He added that health needs are discussed with patients but the interest in Smoking Cessation is poor.
134. Mr Nickkho-Amiry asked Mr Romanes if he had engaged with or visited the GP practice in Gullane.
135. Mr Romanes confirmed that he had visited the surgery 3 times in the last 3 years and now that email communication was being used between the pharmacy and the surgery, contact had been much improved.
136. The Applicant went on to ask if Mr Romanes utilised other methods to engage with the practice.
137. Mr Romanes replied that the practice did not intend to engage with CMS at this time but this may change in the future. He confirmed that there were 294 registered patients at Gullane Pharmacy on CMS and that it was challenging to get patients to commit to full assessments.
138. Mr Nickkho-Amiry asked Mr Romanes if he had looked at the Coastal Ward profile and that it states that 69% of patients rated health services contributed to making an area a good place to live.
139. Mr Romanes confirmed that he was aware of this and went on to confirm to the Applicant that in his view that free telephone advice from a pharmacy, CMS, Smoking Cessation all make up essential health services for the community and that the pharmacy engage on a day to day basis with patients to promote them.

Questions from the Committee to Mr Romanes

140. Mrs O'Donnell asked Mr Romanes why he had made reference in his presentation to some CAR respondents objecting to daily supervision of methadone and buprenorphine.
141. Mr Romanes replied by saying that it did not matter how wealthy or healthy a community is, all community needs should be considered. He felt that it was distressing to think that some members of the community had raised this issue when responding to the CAR. He added that the patients that need this service are to be respected and agreed that the population may not be as informed as they should be about this service.
142. Mrs Tait asked Mr Romanes about extended hours in his pharmacies and Saturday opening hours.
143. Mr Romanes replied that there were no extended hours opening until 8pm or 9pm and it seems to be that reduction in the out of hours GP services that are causing any problems. He added that he would be keen to see an increase in pharmacy services to help GP services. Mr Romanes went on to say that Saturday afternoon opening had been trialled in the Gullane Pharmacy but the

demand was not there. Due to the loss of the bank, post office and café in Gullane, residents are travelling elsewhere for services.

144. Mr Connolly asked for more details about the extended Saturday opening trial. Mr Romanes responded by saying that the trial was two years ago during the Scottish Golf Open week and although the pharmacy was quite busy, it ran at a loss.
145. Mr Connolly asked if with the introduction of Pharmacy First, could costs be covered. Mr Romanes responded by saying that this would need review and adaptations made accordingly.
146. Mr Connolly asked Mr Romanes if he could explain the unusual appointment system that the Gullane Medical Practice operates.
147. Mr Romanes agreed that the system used is not the norm but Gullane Medical practice choose to use this system and that it can offer unique challenges for patients and the pharmacies in the area. He added that patients have complained of the lengthy waiting times.
148. Mr Connolly asked about the prescription figures Mr Romanes referred to in his presentation.
149. Mr Romanes confirmed that he used the Scottish average and this equated to 1.67 per month x1100 which equalled 1600.

The Interested Parties Case – Mr Donald Hay of Gullane Community Council

150. Mr Hay started by saying that residents of the neighbourhood would want all services within easy reach.
151. Mr Hay went on to say that residents do not need to cross the A198 to access services and that the application should not be considered as a post office wanting a pharmacy but the other way round.
152. Mr Hay added that Gullane and East Linton no longer have post offices and that the continuation of post office services in Aberlady would be welcome. He went on to say that the staff who would work in the Aberlady post office would be qualified post office staff.
153. Mr Hay stated that any changes to the existing building would need to go through the planning process and would therefore be DDA compliant providing disabled access.
154. Mr Hay went on to say that in villages, it is important to have a hub where people can congregate. Currently the post office is this hub and the addition of a pharmacy would only increase the number of residents using this facility.
155. Mr Hay stated that he found it strange that the issue of car usage was important instead of looking at environmental issues.
156. Mr Hay ended by saying that just because an area has a good health report, it doesn't mean that a pharmacy is not required and it would ne a facility fit for purpose for the community, not for private or personal gain.

Questions from the Applicant to Mr Hay

157. The Applicant asked Mr Hay if the other two Interested Parties present at the PPC had been in touch with him.

158. Mr Hay responded by saying that officially there had been no contact. Community Council meetings are held monthly and the subject has not been brought up until the Applicant had asked for support from the Community Council for the proposed pharmacy.
159. Mr Nickkho-Amiry asked Mr Hay how the village perceived the addition of extra pharmacy provision.
160. Mr Hay responded by saying that the residents were happy about this as people like to make a choice of where to access services and a pharmacy in Aberlady would reduce journey times to other areas to access pharmaceutical services.

Questions from Mr Romanes to Mr Hay

161. Mr Romanes asked Mr Hay if he thought the proposed pharmacy would be able to be constructed and open within 6 months.
162. Mr Hay replied that there was no reason for it not to be as long as planning application was in order and there were no complications, missing details or objections as these were the things that delayed applications.

Questions from the Committee to Mr Hay

163. Mrs O'Donnell asked Mr Hay how many members of the Gullane Community Council live in Aberlady. Mr Hay replied that there were four residents of Aberlady sitting on the Community Council but there were representatives from many villages in the area.
164. Mrs Tait asked Mr Hay if residents in Aberlady consider the existing pharmaceutical services in the neighbourhood adequate as there were easily accessible pharmacies in the area.
165. Mr Hay replied that the residents considered the existing services adequate but that the surrounding environment changes and there has been a 30% increase in the East Lothian population. Looking to the future, existing services may not be adequate and people currently travel to access existing services because there isn't currently a pharmacy in Aberlady.
166. Mrs Tait asked Mr Hay what new housing is being built in Aberlady. Mr Hay confirmed that 107 new houses are being built and work has just started on the development.
167. Mrs Stirrat asked Mr Hay how long he had been involved in the Gullane Area Community Council to which Mr Hay replied by saying that he has been Chair for one year and had been involved with the Community Council for three years.
168. Mrs Stirrat then asked Mr Hay if any of the Aberlady residents had spoken of a need for additional pharmacy provision in the area.
169. Mr Hay replied that he was not aware of any discussion about the need for additional pharmacy provision in the area prior to the information coming to light about a proposed pharmacy which was willing to take on the post office and retail unit in Aberlady.
170. Mrs O'Donnell asked if there would still have been support for the pharmacy application had the post office not been part of the development.
171. Mr Hay replied that there would have been support regardless as a pharmacy would offer a service to the residents of Aberlady.

172. Mr Connolly asked Mr Hay if he could clarify what the stimulus for conversation about the proposed pharmacy was in relation to the Community Council.
173. Mr Hay responded by saying that it was the current owners of the post office that had brought this to the attention of the Community Council. He added that it was by chance that the Applicant and the post office owners had come together and then developed a good working prospect for the village.
174. Mr Connolly asked Mr Hay if he thought that the residents of the village considered the proposed pharmacy as an important and necessary addition or if it would just be nice to have.
175. Mr Hay replied that there had not been pharmacy provision in Aberlady for a long time if ever and it would be an addition that would be useful and convenient to the population.
176. Mr Connolly asked if Mr Hay felt that the residents of Aberlady have difficulty in accessing pharmaceutical services in the area.
177. Mr Hay replied that he felt that future needs of the community needed to be considered not just the current needs.

Summing Up

178. The Applicant and the Interested Parties were given the opportunity to sum up:
179. Mr Sagoo of Boots UK Ltd summed up by making the following points:
- Aberlady is a small affluent community with a high car and home ownership.
 - The population enjoys good health.
 - The post office should not be taken into consideration.
 - The application should not be granted as it was neither necessary nor desirable.
180. Mr Romanes of Gullane Pharmacy summed up by making the following points:
- The defined neighbourhood is not a neighbourhood for all purposes.
 - Patients currently have the choice of two local pharmacies.
 - This is a mobile population with a high car ownership.
 - The population is in good health.
 - The local pharmacies are working hard to improve pharmacy services to the local population.
 - The post office should not be taken into consideration as it is not relevant to the pharmacy application.
 - The application should not be granted as it was neither necessary nor desirable.
181. Mr Donald Hay of Gullane Area Community Council summed up by making the following points:
- The emphasis of the Community Council is purely for the requirements of additional facilities for the area.
 - Aberlady is a community that takes in other towns.
 - The fact that there is a high car ownership and that the population enjoy good health should not be an argument for rejecting the application.
 - Gullane Area Community Council strongly supports this application.

182. The Applicant summed up by making the following points:

- The Gullane Area Community Council is strongly supportive of the application.
- A community pharmacy would be a welcome addition to the current services available in Aberlady.
- 10% of the Aberlady population voiced their approval of the application.
- There are currently no health care facilities in the neighbourhood and a pharmacy would provide these facilities.
- There is a lack of engagement by the existing pharmacies.
- The proposed pharmacy would engage actively with the population and the local GP practices and would encourage patients to sign up for Smoking Cessation and other community pharmacy schemes.
- Aberlady is a significant village within the Coastal Ward and is expanding.
- The post office is a bonus for the residents and has nothing to do with the application for inclusion in the pharmaceutical list.
- The population is expanding and pharmaceutical services provision is not available within the neighbourhood so the populace have to travel to access the services.
- The Committee should grant the application for inclusion in the pharmaceutical list.

183. At the conclusion of the summing up, the Chair asked the Applicant and the Interested Parties if they considered that they had had a fair and full hearing. Both the Applicant and the Interested Parties agreed that they had had a fair and full hearing and there was nothing further that they wished to add.

184. The Chair advised that the Committee would now consider the application and representation and make a determination. A written decision would be prepared and a copy sent to them as soon as possible. A letter would be included with the decision advising of the appeal process. The Chair then thanked the parties for attending.

The Applicant (Mr Mahyar Nickkho-Amiry and Mr Barrie Dear), Interested Parties (Mr George Romanes, Mr Balvinder Sagoo and Mr Donald Hay) and Board Administrators (Mrs Susan Summers and Ms Emma Smith) then left the meeting.

Decision

185. 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.

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

- i. Email from Dr Peter Shishodia of the Lothian General Practitioners Sub-Committee of the Area Medical Committee
- ii. Letter from June Friel of Longniddry Pharmacy
- iii. Letter from Kathy Stephen of Market Street Pharmacy
- iv. Letter from Joanne Watson of Boots UK Ltd

- v. Letter from George Romanes of GLM Romanes Ltd (Chemists)
- vi. Letter from Tom Drysdale of Gullane Area Community Council

187. The Committee also considered:

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

Neighbourhood

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

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

The community of Aberlady in its entirety; which is a natural neighbourhood surrounded by clear green spaces.

Adequacy of Existing Provision of Pharmaceutical Services and Necessity or Desirability

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

191. The Committee felt that there were no gaps in the existing provision of services within the neighbourhood as the other pharmacies in the area could provide the full range of pharmaceutical services. The Committee also noted that there was no evidence provided of concern being raised about the adequacy of current pharmaceutical services.

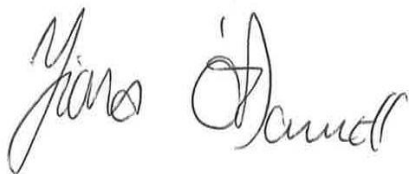
192. The Committee felt that the existing pharmacies in the area surrounding the village of Aberlady had capacity to take on additional patients and could quite easily absorb any increase in demand. The Committee also noted that consultations by telephone were offered by one of the pharmacies in the area. It was also noted that extended hours provision was offered by Asda at The Jewel on the east side of Edinburgh, a distance of only 13 miles.

193. The Committee considered the CAR and noted that the majority of respondents had provided positive feedback about a new pharmacy in Aberlady although when the individual comments were taken into consideration this was felt to be about convenience and not inadequacy of service. The Committee further noted that respondents referred positively to the continuation of the post office service which would sit alongside the proposed new pharmacy and agreed that this was not an area for consideration by the Committee.

194. The Committee further noted that there was a high level of car ownership in the area and that the public transport links from and to Aberlady were good. There were also delivery and collection services from the other pharmacies in the area which serviced the housebound patient and the frail/elderly patients. The Committee agreed that the parking available was adequate.
195. The Committee considered the building of 107 new houses taking place in the area and noted that the existing pharmacies would be able to cope with the increase in demand.
196. The Committee noted that the Community Council were unable to provide any evidence of concern from the Aberlady residents about adequacy of pharmaceutical services.
197. The Committee further noted that there was no reference in the Pharmaceutical Care Service Plan of a need for additional pharmaceutical services in Aberlady.

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

198. The Committee agreed unanimously from the information made available that the existing pharmaceutical services in the neighbourhood were adequate.
199. Accordingly, the Committee agreed that the provision of pharmaceutical services at the premises was neither necessary nor desirable in order to secure adequate provision of pharmaceutical services in the neighbourhood in which the premises were located by persons whose names are included in the pharmaceutical list.
200. In these circumstances, it was the Committee's unanimous decision that the application should not be granted.



Signed.....
Fiona O'Donnell , Chair
Pharmacy Practices Committee

8th May 2018
Date