

**Minutes of the meeting of the Pharmacy Practices Committee (PPC) held on  
Thursday, 20 April 2023 at 09:30 via MS Teams**

The composition of the PPC at this hearing was:

Chair: Mr Martin Connor, Non-Executive Member of NHS Lothian

Present: Lay Members Appointed by NHS Lothian

Ms Eleanor Baird  
Mr John Niven

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

Mr John Connolly (non-voting)

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

Ms Judie Gajree (non-voting)

Observer: Ms Amy Callaghan, NHS Borders  
Ms Michele Cramer, NHS Borders  
Ms Holly Hamilton-Glover, NHS Borders  
Ms Katerina Marinitsi, NHS Lothian

Secretariat: Ms Anne Ferguson, Committee Secretary, NHS National Services  
Scotland

**1. APPLICATION BY G.L.M. ROMANES LTD**

1.1. There was submitted an application and supporting documents from G.L.M. Romanes Ltd dated 5 October 2022 for inclusion in the pharmaceutical list of a new pharmacy at Unit 4, Haddington Retail Park, Haddington, EH41 3FW.

**1.2. Submission of Interested Parties**

1.2.1. The following documents were received:

- i. Letter dated 24 October 2022 from Mr Mike Embrey of WEB Pharmacy Ltd

- ii. Email dated 21 October 2022 from Dr Iain Morrison, Chair, GP Sub Committee and Lothian LMC

### 1.3. **Correspondence from the wider consultation process undertaken**

- 1.3.1.
  - i) Consultation Analysis Report (CAR)
  - ii) Joint Public Consultation Questionnaire
  - iii) Joint Public Consultation Advert

## 2. **Procedure**

- 2.1. At 0930 hours on 20 April 2023, the Pharmacy Practices Committee (“the Committee”) convened to hear the application by Mr George Romanes on behalf of G.L.M. Romanes 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”.
- 2.2. The Chair welcomed all to the meeting and sought permission for these proceedings to be recorded to assist in the production of an accurate minute. There were no objections raised by the Panel, Applicant or Interested Party and the recording commenced. Ms Ferguson was in attendance for minute taking purposes and was independent from the Health Board.
- 2.3. It was noted that there were several observers from NHS Lothian and NHS Borders in attendance. The observers were to leave at the end of the open session and play no part in proceedings. There were no objections to the observers being in attendance.
- 2.4. The Panel, Applicant and Interested Party were introduced. It was noted that Ms Baird’s camera was not working.
- 2.5. When asked by the Chair, members confirmed that the hearing papers had been received and considered. When committee members were asked by the Chair to declare any interest in the application, no interests were declared.
- 2.6. The Chair outlined the procedure for the hearing. All Members confirmed an understanding of the procedures.
- 2.7. 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.

2.8. The Chair advised that Mr Stephen Waclawski a Senior Solicitor at the Central Legal Office could be consulted on any legal matter during the hearing should this be required. In this event. Mr Waclawski would join the meeting so all could hear the advice provided.

### **3. Attendance of Parties**

3.1. The Applicant was G.L.M. Romanes Ltd represented by Mr George Romanes. From the Interested Parties eligible to attend the hearing, the following accepted the invitation:

- Mr Noel Wicks supported by Mr Embrey representing WEB Pharmacy which traded as Right Medicine pharmacy.

3.2. The Chair advised all present that the meeting was convened to determine the application submitted by G.L.M. Romanes Ltd dated 5 October 2022 in respect of a proposed new pharmacy at Unit 4, Haddington Retail Park, Haddington, EH41 3FW. The Chair confirmed to all parties present that previous decisions of the PPC or outcomes of the National Appeal Panel would have no bearing on the outcome of this hearing. Instead, 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 by persons whose names are included in the pharmaceutical list...”

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.

3.5. The statutory joint consultation was undertaken to assess the current provision of pharmaceutical services in or to the neighbourhood and whether it was adequate and to establish the level of support of residents in the neighbourhood. The consultation complied with requirements of Regulation 5(a)(3)(b) the range of issues to be consulted upon. It is presented as a factual Consultation Analysis Report (CAR) and has been provided to the PCC, Applicant and all parties consulted. The PPC was required to include a summary of the CAR in its published determination and illustrate how it was taken into account in its determination of the Statutory Test. When considering adequacy, the PPC would also have regard to NHS Lothian’s Pharmaceutical Care Services Plan

- 3.6. It had already been established that no member of the committee had a personal interest in the application.
- 3.7. Members of the Committee were aware of the location of the proposed site as independent site visits to Haddington and the surrounding area had been undertaken at different times of day and on different days of the week. 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.
- 3.8. 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. Applicant Submission**

- 4.1. The Chair invited Mr Romanes, to speak first in support of the application.
- 4.2. Mr Romanes read aloud the following preprepared statement making adjustments as necessary:
- 4.3. “Good morning and thank you for the opportunity to present this morning. I’m George Romanes and I’m the superintendent pharmacist of G.L.M. Romanes Ltd. We operate five pharmacies in the Scottish Borders and three pharmacies in East Lothian. I’m an independent prescriber myself and an NHS Borders pharmacy champion.”
- 4.4. Mr Romanes had begun by loading slides to support the representation. At this point Mr Wicks objected as the content of the slides had not been shared with others in advance of the meeting. The Chair agreed with Mr Wicks stating that any materials should have been submitted beforehand. Mr Romanes accepted this position and continued with the representation.
- 4.5. “I have been on the register for 43 years and I’m an NHS Borders pharmacy champion.
- 4.6. First of all, can I thank the team at NHS Lothian for working with me on the Consultation Analysis Report, getting that published and put out.
- 4.7. A wee bit about our family run pharmacy company, G.L.M. Romanes Ltd, we started out in 1976 with my late father buying a pharmacy business in Duns. Now we operate eight pharmacies in the Scottish Borders and East Lothian.
- 4.8. I am here this morning to take the rather unusual step of asking for an additional NHS contract in the town of Haddington. I sent a letter of interest in 2018 and I am even more convinced now than I was then that another pharmacy in the West of the town would address needs of the new patients who have come to the area of Haddington. We have seen sweeping changes over the past 24 months in West Haddington and the building works have probably got another two years to go. That’s not any information that is published but I’ve spoken to many builders on my site visits who say there’s at

least 2.5 years work there because the council housing and low-cost housing has been very popular. So, as I say there's been sweeping changes in West Haddington, and we have a population increase in the town of Haddington of over 25% and we still have no new doctor's surgery to cope with the demands on healthcare. At this point I was going to illustrate the population increase in Haddington so I will read the slide. The notes show that in 2010 the population was 8,800, by 2016 it had only grown to 9,020 and by 2020 there was only 10,260 people in Haddington. Over all these years there was an increase of 1.5% an incremental growth in population. Now we have in the region of 2,000 new residents with more moving in all the time to the region of Letham Mains.

- 4.9. I think there are three factors that have increased the demand for healthcare i.e.:
- The increase in population
  - Increased demand - during the pandemic it was very difficult to see a doctor face to face so pharmacy stepped up to the plate and has dealt with the demand. This demand has not diminished that much since the covid restrictions have reduced
  - Covid reticence - a lot of older people and those with disease states are not happy piling into small pharmacies
- 4.10. My next point is the neighbourhood and I'm defining the neighbourhood as follows:
- Northern boundary is the main A1
  - Eastern boundary on the A6137 which joins to the
  - South on the A6093
  - Western boundary is the boundary of the Letham Mains development.
- 4.11. If you go to an Ordnance survey map that chunk of land looks like a molar tooth sitting on its side at about 40 degrees.
- 4.12. There has been a massive development in the West and several house builders have come together in the area to offer buyers a range of housing and price brackets to suit. Just this week the Scottish Government were pleased to announce the opening of 37 low-cost affordable houses. The Health Minister was down this week opening them. These papers couldn't be given because it was too late for the hearing.
- 4.13. Currently in this neighbourhood there is no doctor's surgery and am not aware of any plans to have a doctors' surgery in this region. There is also no pharmacy in the West of Haddington to service the needs of these new residents. I contend that this neighbourhood is indeed a neighbourhood for all purposes as it has been planned as a neighbourhood by East Lothian Council. We have a strategic plan published in 2007 to make this a neighbourhood on the West of Haddington.
- 4.14. So, let's look at what we have in this neighbourhood.
- 4.15. We have a new Primary School which has been built with capacity for 500 children, showing foresight and forward planning and looking to the future. Currently the school roll is 120 children. Speaking to one of my pharmacists I'm

told the headmaster knows every child by name and it has already given the parents of the children who attend the school a feeling of a community.

- 4.16. Sadly, one of the local nurseries had an outbreak of E. coli which dented its reputation and closed recently. So, there is now a new nursery provision in the Letham Mains school. The school cost £8.7 million and was paid by a conglomerate of developers Cala, Stuart Milne homes, Wimpey and McTaggart and Mikel. So, this is a real community project which is aimed at causing cohesion in this new neighbourhood.
- 4.17. Also in this neighbourhood there is a centre with a shopping area where we have three large outlets, Aldi, Home Bargains, the Freezer Centre as well as Costa Coffee, Euro Garages and a new carwash. There is also Unit 4 which is currently unoccupied and the location of the proposed pharmacy premises.
- 4.18. There are 290 car parking spaces as well as charging points for electric vehicles available. This will be the central hub and the destination site for those residents in West Haddington. It should attract shoppers from the new development and probably the surrounding villages too. Some of those villages also have new housing developments such as Macmerry where there is 106 new houses on the old aerodrome site which used to be called Penston Landing. That's potentially another 300 patients signing up to the doctors' practice in Newton Port.
- 4.19. We've looked at the population of Haddington and the estimate for 2023 is just under 12,000 given the number of residents moving in.
- 4.20. We have nearly 1,000 new properties in the West and a massive increase in the population of Haddington.
- 4.21. Currently there are three medical practices based in the Newton Port Surgery
  - Lammermuir (list size 5,500)
  - Tyne Medical (list size 6,600)
  - Orchard practice (list size 5,500)
- 4.22. That is a total of nearly 18,000 patients, so in the region of 5,000 patients come from surrounding villages and settlements. None of these villages and settlements have a medical practice or a pharmacy.
- 4.23. Figures from NHS Lothian show that there are approximately 4,700 patients served by a pharmacy so I would contend that there is room for another Pharmacy in this new neighbourhood particularly if we focus on a population of West Haddington which will probably be as big as many villages that have a pharmacy. For example, my pharmacy in the village of Chirnside only has 2,300 patients so the Letham Mains development is as big as a village in the Borders.
- 4.24. The plans which were part of the strategic planning for East Lothian Council suggested that the houses in the Letham Mains development would lead to reduced travel, reduced emissions if residents can access services, schools and amenities. The phrase used in the planning documentation was it would be

the creation of a “walkable neighbourhood”. As I just said a few minutes ago we’ve just had the Scottish Government promoting 37 new houses. These have been so well received that there are plans afoot for more affordable new houses towards the Pencaitland Road end of the development.

- 4.25. Let me turn now to the adequacy of the current services.
- 4.26. As I said earlier, there is currently no pharmacy in the West Haddington neighbourhood, and neither is there any branch surgery there nor planned.
- 4.27. Walking distance to access the doctors is anything between 1.5 and 2.5 miles depending on whether you’re in the expensive Cala Homes which are nearer the town or in some of the affordable or Council houses which are at the end of the new development.
- 4.28. Topography is interesting. The topography is very much uphill from the town centre to the Letham Mains development. According to the CAR it can take between 20 and 40 minutes depending on which part of Letham Mains you are and how fit and able you are to do that walk.
- 4.29. All existing pharmacies are clumped in the town centre and there is nothing up at the other end of town whatsoever. It’s a big walk for those who are not lucky enough to have a car.
- 4.30. When we come to the pharmacies in the town, Boots UK has three steps up although they have made efforts to put a rail in, Right Medicine have steps down into their pharmacy and our pharmacy although it’s easy to access, has old fashioned double doors which make it difficult for patients with wheelchairs, sticks and the like to get into our pharmacy.
- 4.31. Parking may be considered a convenience, but I would contend parking is a big issue and is mentioned a lot in the CAR. Parking for patients is not easy at all and remember that about 5,000 patients (nearly 30% of the practice) are coming from villages out-with to come to consult a doctor or access a pharmacy service. They have no option of walking to the pharmacy so it’s not very easy at all particularly if disabled, on sticks or suffer from some [health] conditions like angina.
- 4.32. Our Market Street Pharmacy is perhaps a victim of its own success. We’ve had to refit it twice since we took it over to ensure a good safe workflow. Quite honestly it is now becoming inadequate for the volume of traffic we have and the demands on the services we have. As I said earlier, post covid people are now used to the norm of using a pharmacy service.
- 4.33. We have a small shop and queues build up at busy times, and our consultation room is really too small for two or three people to come into it. Often a mother will come in with two small children to use the services we have. We have an independent prescribing pharmacist and are offering Pharmacy First Plus.
- 4.34. This lack of space causes stressful conditions for the pharmacy staff as they can look out the window and see the queue is out the door. I don’t know what time of day you did your site visit, but you’d probably find if it was mid-morning there’d be queues outside our pharmacy. We’ve had to keep recruiting and put

as many qualified staff into the shop as possible to ensure the quality of our service.

- 4.35. We've looked at putting in a 24/7 prescription locker to help the out of hours service. Unfortunately, with the building being rather old it doesn't lend itself to knocking large holes in the stone building so we can't install that in the current premises. We would really like to improve the access to our premises.
- 4.36. We could address many of these issues if we were granted a new contract in the region of West Haddington.
- 4.37. Mr Sagoo, who I expected to be here from Boots, also has problems with his branch in that he has, I'm told by the public, too few staff to cope with the volume they've got in Boots. They also have issues with people getting in the front door. You will see it has been mentioned in the CAR that Boots have problems with continuity of staff and have had closures. When Boots is closed this puts pressure on the Market Street Pharmacy and Right Medicine Pharmacy.
- 4.38. Let me now turn to the CAR. Again, I would thank NHS Lothian for their input and the processing of that information. There are some illuminating comments from the public in the CAR. These are as follows:
- 89% think there are gaps or deficiencies in the service
  - Mention is made too of parking not merely being a convenience, it's an access issue. If I'd been able to show my slides you would have seen two or three pictures pulled off Google showing that the high street is absolutely full to overflowing and patients can't get particularly near to any of the existing pharmacies
  - Many also make mention of the fact that the development is too far away from the current pharmacies
  - Inadequate provision was talked about by some of the respondents
  - Boots closures
  - Mention was made of the queues to get into my pharmacy
  - Difficulty accessing all the services
  - 96% (I believe a high number) think it's a positive to have a pharmacy in the defined neighbourhood
  - This would result in quicker service times and availability of the walking neighbourhood that East Lothian Council talked about in the planning.
  - There was enthusiasm from respondents for the idea of a 24/7 prescription locker to address issues for commuters.
  - Perfect Position for a pharmacy, 95% positive. Enthusiasm and positivity for the situation of the proposed pharmacy in the retail park where there was great access, dropped kerbs and parking spaces. I hope the committee when considering this application will look at Regulation 7.1 concerning future planning because as more and more residents move into West Haddington there will be a greater need for a healthcare premises and pharmacy in that area.
- 4.39. Let me now turn to the proposal for Unit 4. Unit 4 is 1,500 square feet and would create a modern patient focussed pharmacy premises. The design that has been submitted has been done by Keith Anderson of Anderson Retail



design. I believe it will probably be the best pharmacy in East Lothian with a high-quality refit, two consultation rooms, excellent disability access, flat floors, no messy or excess retail offering. It would be a really focussed pharmacy. It would allow the patients of West Haddington to consult in one of the two consultation rooms and get access to as much Pharmacy First Scotland service as they need.

- 4.40. From day one we would have the 24/7 MED point locker to give people access to their repeat prescriptions out of hours and we would have the services of an independent prescriber and be able to offer the common clinical conditions service or Pharmacy First Plus.
- 4.41. Often there are complaints raised against community pharmacies that they don't have enough capacity with compliance aids. We have recently purchased an Omnicell robotic machine which produces compliance aids in our shop in Duns. That allows the branches in East Lothian and particularly the branch in Haddington that we currently have to take on new patients. That's another aspect of being able to cope with volume and the future.
- 4.42. The premises would also have modular shelving which would allow us to rip out the retail shelving and put in extra chairs to act as a covid or flu vaccination hub. Having the two consultation rooms, one could be used for vaccination and providing the other pharmaceutical care services such as smoking cessation, Pharmacy First Plus etc in the other consultation room. The premises would be an excellent addition to the premises in Haddington. I would commend that to the Committee.
- 4.43. In conclusion, West Haddington is a completely new neighbourhood. It's almost like a small village. It has no healthcare facilities but has all the parts that make a neighbourhood. The school often leads to people chatting and a neighbourhood feeling is already being created. The school has provision for the future. That is a good aspect of neighbourhood as is all the shops that have been created in the hub. I would commend to the Committee that we could really improve the services if we were given the contract in West Haddington. Thank you"

## **5. The Chair invited questions from the Interested Party to the Applicant**

### **5.1. Questions from Mr Wicks (Right Medicine Pharmacy) to Mr Romanes (the Applicant)**

- 5.1.1. At this point, Mr Niven pointed out that there was another person accompanying Mr Wicks of which the Committee had not been informed. Mr Wicks had notified NHS Lothian that Mr Embrey was attending in support of Right Medicine Pharmacy. The Chair did not have any issue with this provided only Mr Wicks engaged with the Committee and Mr Embrey was not a solicitor or paid counsel. Mr Wicks confirmed that Mr Embrey was not.
- 5.1.2. Mr Wicks asked for more information on the population of the defined neighbourhood and how this had been calculated. Mr Romanes confirmed the total population of West Haddington as 6,000 but highlighted a population of 2,400 was being created in Letham. To calculate the population of West

Haddington, Mr Romanes had determined the number and types of houses then used the average occupancy figure of 2.4 to arrive at 2,300-2,400 in Letham Mains. There were also two other developments created prior to the pandemic one to the North and one on the other side of the A1. Taking all that population into account using the multiplier of 2.4 there were between 5,000 and 6,000 residents.

- 5.1.3. Mr Wicks noted that some elements of that calculation were outside the neighbourhood defined by Mr Romanes and stated that the population of Haddington from the 2021 census was 10,000. So, Mr Romanes claimed that 60% of that population lived in West Haddington. Mr Wicks agreed to disagree with Mr Romanes on population.
- 5.1.4. Mr Wicks enquired about the distance from the location of the proposed pharmacy to the nearest pharmacy in Haddington town centre. Mr Romanes said it was two miles but depended on the mode of transport. Mr Wicks continued by asking how far it was on foot. Mr Romanes thought it would be two miles and was surprised to learn that Google had estimated the distance as 1.5 miles. Mr Romanes suggested that this distance must have been achieved using a shortcut and not using the normal pavements. Mr Wicks had found this distance to be 1.5 miles going down the main road but would leave this matter for the Committee to judge.
- 5.1.5. Mr Wicks asked about the distance from the houses in the most Eastern part of the Applicant's defined neighbourhood to Unit 4. Mr Romanes said not far at all. Mr Wicks said it was around one mile.
- 5.1.6. Mr Romanes was then asked how far it was from that same point to the nearest existing pharmacy in Haddington town centre. Mr Romanes thought it was about one mile and was surprised to learn that it was 0.3 miles.
- 5.1.7. Mr Wicks asked if Mr Romanes agreed that those resident on the Eastern part of the defined neighbourhood were closer to the existing pharmacies in the town centre than the proposed site. Mr Romanes supposed it would be but was talking about the new development in Letham Mains having no pharmaceutical care services (2,500 patients). Mr Wicks had asked about the neighbourhood that had been proposed the Applicant but if the boundaries had been misunderstood, Mr Romanes was invited to provide clarification. Mr Romanes confirmed that Mr Wicks' understanding of the boundaries was correct.
- 5.1.8. Mr Wicks asked what the average prescription volume was for a community pharmacy. Mr Romanes said it was currently around 6,000 per month.
- 5.1.9. Mr Wicks went on to ask how many of the existing pharmacies were at or below that current volume. Mr Romanes consulted information from Pharmadata and replied that one was below and the other two were busier.
- 5.1.10. When asked whether the pharmacy with prescription numbers below the average volume demonstrated any inadequacy of service, Mr Romanes said it did not.
- 5.1.11. Mr Wicks asked what the average population was for a community pharmacy. Mr Romanes said it was 4,800.

- 5.1.12. Given this response, Mr Wicks asked about the average patient population for three pharmacies. Mr Romanes concluded it would be just under 15,000.
- 5.1.13. Mr Wicks noted that the Applicant had estimated the population of Haddington at just over 10,000 in 2021 and asked whether Haddington had more than the average number of pharmacies per head of population. Mr Romanes pointed out that all patients registered at the Newton Port surgeries were not being taken into account of which there were 18,000. Generally, patients of Newton Port Surgeries would use a pharmacy in the area because patients from surrounding villages such as Darvel, Pencaitland etc. did not have access to a village pharmacy.
- 5.1.14. Mr Wicks asked whether it was possible that some of those village residents would go elsewhere to access pharmacy services. Pencaitland for example had pharmacies closer than Haddington. Mr Romanes acknowledged this was possible but what had been found in the Borders was that people used the pharmacy in the area where medical services had been accessed.
- 5.1.15. In that case, Mr Wicks asked if those patients would have had to drive and park in Haddington town centre to access medical services. Mr Romanes said this was possible but might have travelled by bus.
- 5.1.16. Mr Wicks asked whether there was demand for longer pharmacy opening hours in Haddington. Mr Romanes said that there was.
- 5.1.17. Mr Romanes was asked whether consideration had been given to extending the opening hours of Market Street Pharmacy. Mr Romanes had been unable to do so until recently because of the shortage of pharmacists. Mr Wicks asked whether Mr Romanes could do this tomorrow. Mr Romanes agreed opening hours could be extended but this would not solve the issues with the size of the shop, the consultation room, the long queues and access issues due to parking difficulties.
- 5.1.18. Mr Wicks asked if Mr Romanes agreed that extending the opening hours would improve access to pharmacy services. Mr Romanes said it possibly would but wouldn't help those that wanted to walk to the pharmacy from the Letham Mains area.
- 5.1.19. Mr Wicks asked whether there would be parking issues in the evening should the pharmacy be open until 8pm. Mr Romanes did not think there would be many pharmacists opting to work until 8pm adding that there were so many jobs in pharmacotherapy that finished at 5pm and did not require Saturday working making it exceedingly difficult to open after 6pm making pharmacist recruitment challenging. If information was available about the closures at Boots in Haddington and the number of days there was no pharmacist this would show it was difficult to obtain robust pharmacy cover even during normal opening hours. Mr Romanes stated that in the NHS Borders area there had been a reduction in opening hours at Boots and Tesco making evening opening exceedingly difficult.
- 5.1.20. Mr Wicks asked whether opening more pharmacies would alleviate the problem of pharmacist shortages and gaps in service provision. Mr Romanes said that it would because if there was a pharmacy in the West of the town it would address

many problems highlighted in the CAR e.g. patients disappointed at having to queue, not having access to pharmacy services quickly and the existing pharmacies being too busy in the town centre. The proposed pharmacy would provide good access to pharmacy services, two large consultation rooms and easy parking for those patients that came from surrounding villages. The fact that it would be a new contract there would be the opportunity to install a 24/7 locker to access prescriptions out of hours and enable items to be dispensed for the neighbourhood community hospital for collection out of hours.

- 5.1.21. Mr Wicks thanked Mr Romanes for that response providing clarification that the question had actually been about whether the new pharmacy contract would help with pharmacy shortages or reduce the availability of pharmacists in the area, bearing in mind the comments made a moment ago about difficulties getting pharmacists to work outside normal working hours and the proposed pharmacy opening all day Saturday and Sunday. Mr Romanes said it would probably reduce the availability of pharmacists in the area, but the important point was that employers now had to provide excellent clinically orientated premises and good support staff to attract pharmacists. The proposal for a modern patient focussed pharmacy at Unit 4 was much more likely to attract applicants.
- 5.1.22. When asked whether Mr Romanes had thought about a relocation of the existing premises which seemed to Mr Wicks, to be a solution which would not put strain on the provision of pharmacy services in the area, Mr Romanes had looked at moving Market Street Pharmacy to another building but there were no suitable premises available to address all the issues e.g. parking. Disabled parking facilities could be available, but the premises were small. Giving patients an option was considered the right solution by the Applicant.
- 5.1.23. Mr Wicks apologised for being unclear, the question was whether consideration had been given to relocating the Market Street Pharmacy to Unit 4. Mr Romanes said that wouldn't provide a service to all the patients that currently walked into town or currently worked in the East Lothian Council buildings.
- 5.1.24. Mr Wicks asked if the Applicant agreed that in relocating Market Street Pharmacy there would still be two other pharmacies in the town to supply that demand. Mr Romanes said that would depend on whether the other two pharmacies could cope with demand as Market Street Pharmacy currently supplied 50% of the prescription volume of Haddington. Mr Romanes acknowledged that it was a strange situation asking for a new pharmacy contract in a town where it already had a contract, but strongly believed splitting the workload would make the pharmacies much more effective and provide the services that patients wanted. There was a big demand now for Pharmacy First Scotland so much so that a film crew was sent to the Borders and Mr Romanes interviewed about Pharmacy First and Pharmacy First Plus. The important point was that Mr Romanes wanted to offer more to the residents in the West.
- 5.1.25. Mr Wicks invited Mr Romanes to agree that the Legal Test was not there to assist a contractor that was very busy suggesting the contractor needed to address this matter with investment, expansion or relocation. Mr Romanes did not understand the question. Mr Wicks explained that the Committee would consider the application by applying the Legal Test around inadequacy of pharmacy services and asked whether the Applicant agreed that the Legal Test was not there to

assist a contractor having problems being busy. Mr Romanes replied 'certainly not' but the patients' perspective detailed in the CAR indicated there was room for another pharmacy. Patients were dissatisfied with the time taken to obtain a prescription in the town centre which applied to all existing pharmacies. Mr Romanes considered the CAR very positive and highlighted the current inadequacy.

- 5.1.26. When asked how many people had responded to the joint consultation, Mr Romanes stated just under 200. As a percentage of the population, Mr Romanes admitted that it was not high, but responses had not been forced in any way so was a genuine response from the public. Adding that the bulk of respondents were probably from the West and in particular Letham Mains. Mr Wicks wondered how Mr Romanes knew the location of respondents. Mr Romanes said the only way people could have responded was from the article in the Courier or the QR code displayed on Unit 4. Mr Wicks had missed the fact that the QR code was displayed on the building but pursued this line of questioning by asking whether a 2% response rate was very low in comparison to many contract applications in the last few years. Mr Romanes hadn't seen all the applications in the last couple of years, but the largest consultation response Mr Romanes had ever seen was 300-400 responses which had been driven by the Community Council. Mr Romanes had not driven any responses; it was entirely the public's comments. Mr Romanes considered the answers to all the questions to be remarkably highly positive.
- 5.1.27. Mr Wicks enquired whether Market Street Pharmacy offered a delivery service. Mr Romanes said that it did. When asked if Boots offered a delivery service, Mr Romanes wasn't sure but if so, thought it was chargeable. Mr Wicks confirmed that Boots offered a delivery service free of charge. Mr Wicks then asked whether Right Medicine Pharmacy offered a delivery service. Mr Romanes said it did.
- 5.1.28. Mr Wicks asked whether there were any caps on services at Market Street Pharmacy. Mr Romanes explained that there were no caps on services but what capped service level was the number of patients that could get into the shop. Mr Romanes had talked earlier about Covid Reticence. The number of patients that would come in and wait in the shop had greatly reduced. Social distancing requirements during the pandemic had stayed in peoples' minds. The cap on services was a result of the number of patients that could physically get into the consultation room and stand at the counter. People preferred to queue outside than wait in the shop. Mr Romanes would never cap the number of patients that were taken on for smoking cessation, Medicines Care & Review, serial dispensing, compliancy aid provision or anything like that because that was the way community pharmacy was going. Mr Romanes was not aware of any of the existing pharmacies having a cap on services when asked by Mr Wicks.
- 5.1.29. Agreement was sought from the Applicant that pharmacies did not have to be located in a neighbourhood to provide pharmaceutical services to that neighbourhood. Mr Romanes agreed.
- 5.1.30. Mr Wicks referred to the inadequate medical services mentioned during the hearing and asked whether Mr Romanes agreed that these were not part of the Legal Test. Mr Romanes had not stated that the medical services were

inadequate but as a result of the reduction in medical services because of historic closures or during covid, there had been a subsequent enthusiasm for pharmaceutical care services. This was the reason for needing another pharmacy in the town. The legacy of Covid was an increased demand for pharmacy services. Mr Romanes was not criticising Newton Port Surgery at all, but when surgeries closed and mostly carried out online and telephone consultations, pharmacies were still open, and the demand rose.

5.1.31. Mr Wicks agreed with the comments made by Mr Romanes and asked whether having two existing pharmacies at or below the average dispensing volumes were well placed and had capacity to take up some of that demand. Mr Romanes agreed stating that if the two existing pharmacies took on more dispensing volume, Market Street Pharmacy would have more capacity to provide Pharmacy First Plus.

5.2. **This concluded questioning by the Interested Party, so the Chair invited questions from the Committee members.**

5.3. **Questions from Mr Niven (Lay Member) to Mr Romanes (the Applicant)**

5.3.1. Mr Niven asked whether the Applicant had considered including Clerkington in the neighbourhood thereby moving the Eastern boundary further West. People in Clerkington needed to travel as far as residents of Letham Mains to access pharmaceutical services in the town. Mr Romanes agreed with Mr Niven but had chosen the boundaries as main roads.

5.3.2. Mr Niven referred to the prescription figures provided by NHS Lothian. When asked for a reason for a reduction in Market Street Pharmacy's figures for December 2022 compared to October or November, Mr Romanes did not know.

5.3.3. In the event of the new contract being granted, Mr Niven asked what level of prescription dispensing was anticipated to transfer from Market Street Pharmacy to Unit 4. Over time, Mr Romanes expected around 50% to transfer to Unit 4 from the existing pharmacy.

5.3.4. Reference was made to the new Nursing Home that was expected to be built in the neighbourhood. Mr Niven asked whether the proposed pharmacy would look to provide its pharmacy services. Mr Romanes would very much like to do that.

5.3.5. Mr Niven asked whether Sunday opening was an absolute necessity for Haddington. Mr Romanes said it would be greatly beneficial as there was no pharmacy currently open on a Sunday in East Lothian. The prescription locker would also be available for out of hours collection of prescription medications from the first day of opening.

5.3.6. Mr Niven enquired about the level of staffing anticipated in the new shop. Mr Romanes said that initially there would be a pharmacist, two accredited dispensing technicians and two front of shop staff. The staffing level would be reviewed as volume of services built up and the size of the dispensary would accommodate more staff over time if required.

- 5.3.7. Mr Niven sought clarification on the opening hours. Mr Romanes confirmed that Unit 4 would close over lunch.
- 5.4. **Questions from Ms Baird (Lay Member) to Mr Romanes (the Applicant)**
- 5.4.1. During the site visit around 1pm on a Wednesday, Ms Baird had spoken to several people in Haddington Retail Park about the prospect of a new pharmacy opening in Unit 4. These lunchtime shoppers had indicated possible use of the new pharmacy at this time if open, so Ms Baird asked why the pharmacy was scheduled to close between 1pm and 2pm. Mr Romanes stated that initially there would only be one pharmacist in Unit 4. There were insufficient pharmacists available to enable two to be recruited from day one.
- 5.4.2. Ms Blair enquired about the lease length on the premises. Mr Romanes said the lease was for ten years. Epic Retail owned the premises and would not sell Unit 4 so it had to be leased.
- 5.4.3. In the event of the application being granted, Ms Blair asked when the new pharmacy would open. Mr Romanes said the new pharmacy must open within six months. The plans circulated were already with shop fitters and had been costed so work could begin fairly rapidly.
- 5.4.4. Ms Blair was interested to know whether the Community Council had been supportive of the new pharmacy. Mr Romanes said there had been positive comments from the Community Council, but it had chosen not to write a letter of support for this application. Mr Romanes drew attention to the letter of support received from the Medical Committee particularly given the increasing number of patients in the West of Haddington.
- 5.5. **Questions from Ms Gajree (Non-contractor Pharmacist Member) to Mr Romanes (the Applicant)**
- 5.5.1. Ms Gajree requested clarity on the opening hours as the CAR stated Unit 4 would be open 9am-6pm Monday to Saturday, but the application stated 9am-5pm on a Saturday. Mr Romanes intended to be open 9am-5pm on a Saturday and on weekdays Unit 4 would be open 9am-1pm and 2pm-6pm.
- 5.5.2. Reference was made to those patients living out with Haddington that travelled into Haddington to access medical services and had any prescriptions dispensed nearby. Ms Gajree asked whether the Applicant envisaged patients from West Haddington having travelled to Newton Port Surgery taking prescriptions to the proposed pharmacy to be dispensed. Mr Romanes said such patients may well do so as the hub in the retail park had shops. It may well be easier than using the short stay car parking on the High Street.
- 5.6. **Questions from Mr Connolly (Contractor Pharmacist Member) to Mr Romanes (the Applicant)**
- 5.6.1. Mr Connolly asked Mr Romanes about the thought process around the decision not to relocate the existing Market Street Pharmacy to the proposed Unit 4 premises. This had been considered by the Applicant, but Mr Romanes felt in doing so would be abandoning those patients in the East of the town and the

5,000 patients entering Haddington from surrounding villages to access medical services. It would destroy completely relationships built up over time with existing patients of Market Street Pharmacy. To do so, a full application would have to be made to NHS Lothian in any case as it would involve a major relocation.

- 5.6.2. Reference was made to the statement that 50% of business from the existing pharmacy would transfer over time to Unit 4, Mr Romanes confirmed this was expected over 12-18 months. Looking at the prescription figures, Mr Connolly said the prescription volume would be 5,500-6,000 items per premise. Mr Connolly asked whether Mr Romanes envisaged business to be gained at Unit 4 from the other two existing pharmacies in Haddington. Mr Romanes thought some patients would come from Boots UK because of the parking aspect and the issues with staffing at Boots. Many more consultations and pharmacy services were expected to be provided because it was easily accessible with good parking facilities with patients possibly from Garvald, Athelstaneford or Drem.
- 5.6.3. Mr Connolly asked where those patients mentioned from outlying areas currently accessed pharmacy services. Mr Romanes said that those patients would currently use pharmacies in many other areas, but the Applicant may even lose some patients from the G.L.M. Romanes Ltd pharmacy in Gullane. Patients from Drem currently used pharmacies in Gullane or North Berwick. Adding that the congestion in North Berwick was even worse than in Haddington.
- 5.6.4. Mr Romanes was asked at what point one of the existing pharmacies in Haddington would close should it become unviable. Mr Romanes thought there was enough business to go round given the number of properties being built over the next three years in Letham and the surrounding villages. It had been mentioned previously that 106 houses were being built in Macmerry which, like Letham Mains, had no pharmacy or GP surgery.
- 5.6.5. Mr Connolly was aware from the site visit that there was definitely an issue with parking in Haddington and asked what drove that issue - the pharmacies, the surgery, the independent retailers or all of these. Mr Romanes stated that Haddington being a market town had a good range of services and a big catchment area. Parking had gotten worse in the last couple of years.
- 5.6.6. During the site visit, Mr Connolly had been surprised by the Eastern boundary chosen by the Applicant and noted the earlier comment that it was a main road. Mr Connolly asked whether there were any other factors that made that road a boundary. Mr Connolly immediately followed this question with another - where would a resident of the Letham Mains development consider themselves to be from and would it be Haddington. Mr Romanes said that Mr Connolly would see from the site visit that the new development was almost like a new village created in the West of Haddington. East Lothian Council had given it the properties of a neighbourhood i.e. school, shops, modern housing. Mr Romanes had used the A6093 as a boundary because it was a main road but was more enthusiastic to capture the residents of West Haddington in the neighbourhood. One of the local MSPs had commented that new houses were not being built in Letham Mains but a new community. Mr Romanes was not disagreeing that those residents would consider themselves coming from Haddington but would probably say Letham Mains Haddington because it was a cohesive new development.



**5.7. Questions from Mr Connor (the Chair) to Mr Romanes (the Applicant)**

- 5.7.1. Mr Connor enquired about the public transport links to the retail park. Mr Romanes said that it was very good now and was improving because of the growing population. Adding that it was still a very long walk if not using the bus.
- 5.7.2. Mr Connor wondered whether the Applicant had explored the possibility of installing a 24/7 locker in the current premises. Mr Romanes explained that this had been considered but could not be done without taking space away from the dispensary which would increase the stress levels of staff. Expert advice was that the current premises did not have sufficient space for installation of a 24/7 locker.
- 5.8. The Chair noted that this concluded the Applicant's presentation and questioning. A short break was taken before the Hearing reconvened at 11:20am for Mr Wicks' submission.

**6. Interested Party Submission**

**6.1. Submission from Mr Wicks (Right Medicine Pharmacy)**

- 6.1.1. Mr Wicks made the following representation:
- 6.1.2. "Thank you, Chairman, and good morning to members of the committee. Firstly, let me thank you for letting me come along today to represent Right Medicine Pharmacy. As you know we trade out of the premises in High Street, Haddington.
- 6.1.3. So, my name is Noel Wicks. I am a pharmacist and one of the directors and I will be explaining why I believe the proposed application is neither necessary nor desirable to secure adequate provision of pharmacy services to the neighbourhood.
- 6.1.4. Firstly, I would like to give you our version of the neighbourhood. We believe it to be the town of Haddington, bounded by the A1 to the North and fields in all other directions. We believe that this could be considered an area for all purposes. This contrasts with that proposed by the Applicant. He seems to have drawn a neighbourhood aimed at excluding the existing pharmacies in an attempt to justify their application. We do not think that the proposed neighbourhood could be considered a neighbourhood for all purposes, and it doesn't seem to fit with the description given by the Applicant in terms of the new housing that is being built because large sections of the Applicant's neighbourhood contain existing housing.
- 6.1.5. So, within the neighbourhood, as we define it, there are already three pharmacies providing pharmaceutical services to the neighbourhood. These three pharmacies are already servicing the population of Haddington and surrounding [area]. The population figure for Haddington in 2021 was 10,500 which suggests that three pharmacies are ample. This is based on the national average of 4,500 patients per pharmacy and in fact, even with the growth in housing that the

Applicant refers to, it would take a population of 13,500 before even starting to edge over the national average.

- 6.1.6. The committee will be able to see this from the dispensing figures of the three pharmacies in Haddington, and whilst we acknowledge that Market Street is a busy pharmacy due to its prime location next to the medical centre, the other pharmacies are around about average or below average. For example, in October 2022, we dispensed just over 4,331 prescriptions. Which put our pharmacy in Haddington as the 996th busiest pharmacy in Scotland out of 1259. Boots did 6,752 items and was the 587th busiest pharmacy in Scotland. To put this in context, our branch is in the bottom 25% of pharmacies in the country based on prescription volume and Boots is near the middle. It is worth noting also that our pharmacy took on the nursing home in Pencaitland in early 2022 in order to try and boost its prescription numbers and keep the pharmacy viable. This 45-bed home contributes around 500 prescriptions a month to the figures you see before you. Our viability would most certainly be in question should this new pharmacy contract be granted
- 6.1.7. Our understanding is that our pharmacy does more than its share of the daily supervising of substance misuse patients as well as being the only needle exchange pharmacy in Haddington. Offering these services can sometimes mean alienating other customers. However, we feel they are vitally important for that patient group. Our pharmacy is easy to access, and it actually has a ramp into it, so it is able to be accessed by a wheelchair. It does not have steps.
- 6.1.8. Within the CAR, we could see little or no evidence that the service from our pharmacy was lacking. Indeed, the main comments from people seemed to relate to Market Street itself. I think though in general the massively underwhelming response to the CAR, less than 2% of the population of Haddington gives an indication to the lack of local support to having another pharmacy in the area. Indeed, I think if the CAR had asked the question, would you support one pharmacy going out of business due to another opening on the edge of the town retail park, then more people would have filled in the CAR.
- 6.1.9. The people of Haddington are rightly proud of their busy and vibrant High Street that forms the centre of their neighbourhood, and it is well known that there are concerns over the effect that the out-of-town retail park might have on the High Street. This is particularly relevant given the close proximity of the retail park to the High Street. For example, the distance from the Aldi at the Western edge of the Applicant's neighbourhood to our pharmacy in High Street is only 1.5 miles. The distance from the Eastern edge of the Applicant's proposed neighbourhood the A6137 is 0.3 miles. This highlights the fact that much of the proposed neighbourhood is actually closer to the three pharmacies in the centre than that of the Applicant's. In either case, you would also have to be passing the other two pharmacies first before reaching ours.
- 6.1.10. In fact, because the Applicant's location at Unit 4 of the retail park is at the upper left extreme of the proposed neighbourhood or the Southwest corner, those at the Southern boundary, i.e. the streets just above the A6093 like Buchanan Avenue would face the same walk of just over a mile to access the Applicant's pharmacy or any of the three in the town centre.

- 6.1.11. The few responses in the CAR that are supportive, and many are not, seem to highlight on convenience. While we appreciate convenience has a place, it is not the soul, or indeed the main reason on which to base the granting of the pharmacy contract. Otherwise, there would be one on every corner. In fact, we see no firm evidence within the CAR, or indeed from the Applicant's submission that there is any need, let alone any demonstration of inadequacy of service provision to the neighbourhood.
- 6.1.12. The town centre is well served by buses along the main route, which take as little as five to seven minutes to reach the centre, where arguably people would normally be going in order to access their everyday services anyway.
- 6.1.13. While the people who responded to the CAR highlight parking is an issue, I personally have not had the same experience. It may not always be possible to pull up directly outside the pharmacy at any given moment. However, the provision of longer stay parking within a few minutes' walk of all of the pharmacies means that for those without a blue badge, the distance to the pharmacy is easily walkable. In my own experience, the short maximum waiting times for spaces in the High Street means a steady churn of spots becoming available.
- 6.1.14. Now let's consider the demographic of Haddington. The Scottish Index of Multiple Deprivation shows Haddington to be an area of mixed deprivation. To the East side of the village, the area has parts that are as low as in the 30 to 40% of the most deprived in Scotland. In the centre it is more in the 50 to 60% range but to the West, in the Applicant's proposed neighbourhood, the vast majority is in the top 10% least deprived areas in the whole of Scotland. This will tell me that we have working people in that area or with access to vehicles, and I would imagine in many cases working away from Haddington and are likely to be accessing services elsewhere. If not, then our pharmacy, unlike the Applicant's one in Market Street opens all day on a Saturday to allow access.
- 6.1.15. I note at this point that the CAR and the application differ in opening hours. The CAR has within it times that give six more hours opening a week than the application we are looking at in front of us today. So, I have some concerns about how valid the CAR is, bearing in mind it asked people about a service that was open from 9am till 6pm Monday to Saturday and then also on a Sunday, whereas the application in front of us has closing hours at lunchtime and a slightly earlier finish time on the Saturday. So, I do wonder if CAR respondents, the few that there were, would have been as supportive had they realized that the hours were actually similar or less than or in some case worse than the hours already available to them in the town centre pharmacies.
- 6.1.16. Our pharmacy, which currently has no limits on any core contract NHS service, nor indeed on any non-NHS service such as deliveries or filling compliance aids, is open longer hours than Market Street, including as mentioned all day on a Saturday. Our experience of Saturday afternoon is that it is quiet with little to no demand. Our suggestion would be that rather than proposing a new pharmacy contract with additional hours, the Applicant need only open their existing pharmacy for longer.
- 6.1.17. I know in speaking to our colleagues at Boots, who unfortunately due to an administration error submitted their response late, that they have no limits on

services and also have extra capacity from their premises, the same as us. They also agree with our definition of the neighbourhood and that at under 2% the response of the CAR is far lower than would normally be expected for a population of this size.

6.1.18. For all the for all the reasons that I have highlighted in the summary I've just given and because of the underwhelming lack of support shown by the local population, zero evidence to demonstrate to the Committee any inadequacy of service provision and that much of the proposed neighbourhood is closer to the existing pharmacies, we believe the Applicant has failed to show that an application is either necessary or desirable, and we would therefore urge the Committee to reject it. Thank you.”

6.2. **The Chair invited Mr Romanes (the Applicant) to question Mr Wicks (Right Medicine Pharmacy)**

6.2.1. Mr Romanes asked why Mr Wicks thought the neighbourhood was the whole of Haddington when there was a large development, almost village, on the edge of the town. Mr Wicks said that Haddington itself formed a natural town. In fact, when members of staff living in the new housing developments were asked where they came from the response was from Haddington. In Mr Wicks' opinion the neighbourhood defined by the Applicant did not have all the amenities or services needed for day-to-day living. As a result, residents needed to travel into the centre of town to access those services anyway e.g., medical services. Mr Wicks felt it was more natural to have the whole town as the neighbourhood rather than carving off a portion of it.

6.2.2. Mr Romanes referred to Mr Wicks' earlier statement about the risk of Right Medicine Pharmacy becoming unviable if another pharmacy opened in Haddington. Mr Romanes asked whether there was not sufficient business to go round. Mr Wicks did not think that was the case. Prescriptions were currently split across three pharmacies in Haddington. In the event of 50% or even 25% of prescriptions from all three existing pharmacies going to Unit 4, then with the increasing cost of staffing, heating, lighting, and getting locums, then it would become very difficult to keep Right Medicine Pharmacy open.

6.2.3. Mr Wicks was asked whether there was an access issue because of parking difficulties and disability access at all the existing pharmacies and whether it would be better to have an out-of-town premise that was patient focussed and able to provide more services than were currently available. Mr Wicks took a lead on that from the responses of the CAR which were very low and suggested that Mr Romanes was trying to solve a problem that didn't appear to be there. Disabled patients could currently access Right Medicine Pharmacy using a ramp though appreciated Boots had steps and used a portable ramp if needed. Mr Wicks did not consider current pharmacy services to be inadequate.

6.3. **Questions from John Niven (Lay Member) to Mr Wicks (Right Medicine Pharmacy)**

6.3.1. Mr Niven enquired when the Right Medicine Pharmacy application had originally been granted. Mr Wicks bought the premises from Lloyds Pharmacy in 2010 or 2011. It was possibly owned by Munroe's before that.

- 6.3.2. Mr Niven asked what the population of Haddington was when Right Medicine Pharmacy opened and whether at that time, Market Street and Boots pharmacies were already established. Mr Wicks was not sure about the chronology of the pharmacies opening in Haddington. There had been a pharmacy in Right Medicine Pharmacy's premises for the last 20-30 years and suggested asking Mr Romanes when Market Street Pharmacy had opened. The population of Haddington at the time would have been around 8,500.
- 6.3.3. Mr Niven was trying to establish the chronology of pharmacies opening in Haddington to provide some context stating that Mr Wicks obviously thought Right Medicine Pharmacy a viable option when it was bought in 2010/2011. Mr Niven invited Mr Romanes to comment. Mr Romanes explained that the pharmacy operating as Market Street Pharmacy was owned previously by John Brewis for many years in tiny premises owned by the Courier offices. Mr Brewis realised these premises were utterly inadequate but did not want the hassle of moving the pharmacy. Mr Romanes bought the pharmacy from Mr Brewis nine years ago and moved it to the current premises in Market Street which at the time was a dress shop. Market Street Pharmacy had been refitted twice to keep up with patient demands. In addition, pharmacy deliveries are made round the villages three days a week.
- 6.3.3.1. Mr Wicks added to the response of Mr Romanes that Right Medicine Pharmacy had been around longer than Market Street Pharmacy. It had just occurred to Mr Wicks that the premises had brass plaques outside and was in a listed building, so it was probably one of the original pharmacies in Haddington.
- 6.3.4. Mr Wicks was invited to comment on the viability of Right Medicine Pharmacy when the premises were bought from Lloyds. Mr Wicks said that it was a viable business when there were three pharmacies with the scope of future housing developments. Mr Wicks never expected there to be another pharmacy and the prospect of a 33% increase in contractors in the neighbourhood.
- 6.4. **Questions from Ms Baird (Lay Member) to Mr Wicks (Right Medicine Pharmacy)**
- 6.4.1. Ms Baird enquired about deliveries. Mr Wicks confirmed that deliveries were made daily free of charge.
- 6.4.2. When asked whether Mr Wicks had thought about extending the opening hours or on a Sunday, Mr Wicks had not because Saturday afternoon was fairly quiet. Mr Wicks agreed with a previous comment from Mr Romanes that it was difficult to employ pharmacists at the moment let alone for unusual hours or at the weekend. So, there didn't seem to be the demand and would struggle to staff the pharmacy if opening hours were extended.
- 6.5. **Questions from Ms Gajree (Non-Contractor Pharmacist Member) to Mr Wicks (Right Medicine Pharmacy)**
- 6.5.1. Ms Gajree was interested to know whether the premises in Haddington provided Pharmacy First Plus. Pharmacy First Plus was provided until recently when one of the pharmacists relocated to the centre of Edinburgh. So Right Medicine Pharmacy did have Pharmacy First plus but not currently though would like to

have it again. The premises still had a consultation room available to provide this service. Mr Wicks explained that pharmacists with prescribing qualifications were targeted for recruitment by primary care and other pharmacies making this service offering challenging. However, Right Medicine Pharmacy was actively training and supporting pharmacists all the time through prescribing qualifications.

**6.6. Questions from Mr Connolly (Contractor Pharmacist Member) to Mr Wicks (Right Medicine Pharmacy)**

6.6.1. Mr Connolly had internet connection issues whilst Mr Wicks was talking about the neighbourhood so wanted to check that the neighbourhood had been defined as the village of Haddington. Mr Wicks said that was correct; the A1 to the North and fields to all other sides.

6.6.2. Mr Connolly wanted to know what percentage of business, if any, Right Medicine Pharmacy would lose if another pharmacy was to open. Mr Wicks expected at least 25% (1000 items per month) would be lost.

6.6.3. Mr Connolly wondered about the reasons for that whether those patients lived in the neighbourhood defined by the Applicant or whether patients were gravitating more towards the retail park from Haddington as a whole. Mr Wicks had based that estimation on the law of probability - if the number of contractors increased then business would be lost in proportion to that.

6.6.4. Reference was made to the provision of needle exchange and substance misuse services from Right Medicine Pharmacy and the fact this may deter some patients from using the pharmacy. Given that is not a core service, Mr Connolly asked if provision of these services would be reconsidered to attract more custom. Mr Wicks would struggle in doing so ethically and wasn't sure if that was even possible. Doing so hadn't occurred to the directors.

**6.7. Questions from Mr Connor (the Chair) to Mr Wicks (Right Medicine Pharmacy)**

6.7.1. As Mr Connor had no outstanding questions for Mr Wicks this concluded Right Medicine Pharmacy representation and questioning.

6.8. The Chair gave the Committee an opportunity to ask further questions of the Interested Party. Mr Connolly took this opportunity to ask Mr Wicks about the population of the town of Haddington which had been defined as the neighbourhood. Mr Wicks could only find a figure for the population in 2021 which was 10,500. There had been a few hundred houses built in the town since then and did not think the figure quoted by the Applicant unreasonable at around 12,000.

**7. Summing Up**

7.1. The Chair asked all parties in reverse order to provide a summary of the points made during the submissions.

## 7.2. **Mr Wicks (Right Medicine Pharmacy)**

- 7.2.1. Mr Wicks summarised that this application was for the pharmacy in a neighbourhood that already had an above average pharmacy service for its population. At least one of those pharmacies was in the bottom 25% of all the Scottish pharmacies according to dispensing volume and had additional capacity as did Boots. The proposed pharmacy location was at the far extremity of the neighbourhood however defined and only provided a modicum of extra convenience to an area deemed one of the least deprived in Scotland. A mobile population with above average access to vehicles, be in good health and have less requirements to access healthcare services and prescriptions than most. When access was required, this population had multiple points of access to services at just over one mile away in an area that was well served in terms of buses, walking, cycling routes and parking. Even if the PPC were to agree with the neighbourhood of the Applicant, it might also agree that the services currently into it were adequate especially with regards to delivery services etc.
- 7.2.2. The CAR conducted as part of the application had shown very little support for the new pharmacy with less than 2% of the population responding. Indeed, it seemed to highlight that the Applicant would be better off investing in its existing premises in Market Street or extending its opening hours than going to a huge expense fitting out another pharmacy in an expensive retail unit on the edge of town that would no doubt need a slice of all existing pharmacies' prescriptions in order to pay for itself. Especially as it was to have two pharmacists.
- 7.2.3. On that basis, and on the basis that the Applicant had failed to show any inadequacy, Mr Wicks believed the Committee should reject the application.

## 7.3. **Mr Romanes (the Applicant)**

- 7.3.1. Mr Romanes thanked all present for listening to the presentation this morning. Mr Romanes believed the neighbourhood defined in the application to be correct. It was a new community, and a new neighbourhood. It had schools, it had cohesion and it had a centre. So, this increased population of probably 1,000 houses by the time it was all done, was expected to result in a population increase in Haddington of around 2,400 patients.
- 7.3.2. Mr Romanes thought there were plenty of prescriptions to go round. The application would bring a modern pharmacy to the area where people would be able to easily access services. It would help those patients living out with Haddington to access services with the availability of parking and the two consultation rooms. So, it would provide a better service to patients.
- 7.3.3. Because of the cost of the new pharmacy, the Applicant had considered closing the pharmacy in Market Street and relocating to the new retail area. However, that would abandon all those patients that had faithfully used Market Street as well as previous patients of John Brewis, the pharmacist that had been in Haddington for many, many years and sold the business to Mr Romanes believing that Mr Romanes would look after the business.

- 7.3.4. For those reasons, Mr Romanes was seeking a new contract in the town to address the needs of the new population and address the East Lothian Plan which was for a walkable neighbourhood in West Haddington.
- 7.3.5. Mr Romanes hoped that the Committee would consider general point 7.1 which was the need to consider future changes to the population.
- 7.3.6. Mr Romanes thanked the Committee for its time and for considering this application, apologising that the Powerpoint presentation wasn't allowed.

## **8. Retiral of Parties**

- 8.1. The Chair then invited each of 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. All parties were satisfied.
- 8.2. The process was outlined by the Chair in that all but the Panel and Committee Secretary would shortly be asked to leave the hearing and go into a closed session.
- 8.3. The Chair advised that should the Committee require any further factual or legal advice, the open session would be reconvened so the Applicant and Interested Party could also hear that advice and question or comment on the advice provided by Mr Stephen Waclawski, Senior Solicitor at the Central Legal Office. All parties present acknowledged an understanding of that possible situation. However, the Chair did not anticipate that this would be required.
- 8.4. The Chair advised that the Committee was to 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.
- 8.5. This concluded the open session. The Applicant, Interested Parties and Observers left the meeting to allow the Committee to deliberate on the written and verbal submissions. The Committee adjourned for a short break and reconvened at 12:05pm.

## **9. Supplementary Information**

- 9.1. Following consideration of the oral evidence, the Committee noted:
  - 9.1.1.
    - i. That they had undertaken individual site visits of the proposed neighbourhood within Haddington and the surrounding area noting the location of the proposed premises, the pharmacies, general medical practices and the facilities and amenities within.
    - ii. Maps showing
      - a. the location of the proposed Pharmacy in relation to existing Pharmacies and GP surgeries within Haddington and the surrounding area



- b. SIMD 2020 quintiles by data zone for Haddington and the surrounding area
- c. Population Heatmap CHI Sep 2022 for Haddington and the surrounding area
- iii. Details about the existing Medical Services to the proposed neighbourhood
- iv. Report on Pharmaceutical Services provided by existing pharmaceutical contractors to the neighbourhood including dispensing figures, prescription figures, profile summary, temporary pharmacy closures and complaints.
- v. NHS Lothian Pharmaceutical Care Services Plan
- vi. The application and supporting documentation including the Consultation Analysis Report, proposed pharmacy floor plan provided by the Applicant and cover page of the lease for Unit 4, Haddington Retail Park
- vii. Email of support from Dr Iain Morrison, Chair, GP Sub Committee and Lothian LMC (South Scotland) dated 21 October 2022

## 10. **Summary of Consultation Analysis Report (CAR)**

### 10.1. Introduction

10.2. NHS Lothian undertook a joint consultation exercise with the Applicant, Mr Romanes, regarding the application for a new pharmacy at Unit 4, Haddington Business Park, West Road, Haddington, EH41 3FW.

10.3. The aim of this consultation was to assess the current provision of Pharmaceutical Services in the neighbourhood, determine whether it was adequate and establish the level of support from the local public.

### 10.4. Methodology

10.5. The consultation was conducted by placing an advertisement in the East Lothian Courier and posting it on NHS Lothian's website. Respondents could either respond electronically or request a hard copy.

10.6. The consultation period lasted for 90 working days, the final day for responses being 2 August 2022.

### 10.7. Results

10.8. Questions covered: the neighbourhood; location of the proposed pharmacy; opening times; services to be provided; perceived gaps/deficiencies in existing services; impact on the neighbourhood; impact on existing NHS services, individual or organisation responses and optional questions concerning respondent contact information.

Question	Response Percent			Response Count			Skipped
	Yes	No	Don't know	Yes	No	Don't know	
1. Do you agree the neighbourhood described is accurate?	95.7	1.2	3	157	2	5	
2. Do you think there are any gaps/deficiencies in the existing provision of pharmaceutical services to the neighbourhood?	89	7.9	3	146	13	5	
5. Do you think there is anything missing from the list of services to be provided?	3	78	18.9	5	128	31	
6. Do you think a community pharmacy in the neighbourhood will work with other NHS health services such as GP practices?	95.7	1.8	2.4	157	3	4	1

	Positive	Negative	Don't know	Positive	Negative	Don't know
3. What impact do you think a community pharmacy would have in the neighbourhood?	96.4	2.4	1.2	159	4	2
4. What are your views on the pharmaceutical services being proposed by the Applicant?	95.1	3	1.8	156	5	3
7. Do you believe the proposed pharmacy would have a positive or negative impact on existing NHS services?	94.5	3	2.4	156	5	4
8. What do you think of the location of the proposed community pharmacy?	95.2	4.2	0.6	157	7	1
9. What do you think about the proposed opening hours?	96.3	2.5	1.2	157	4	2

10.9. The total number of responses received was 165. 164 were submitted from individual members of the public and one was submitted from a group/organization. One respondent did not clarify if the response was from an individual or a group/organisation.

## 11. The Decision

11.1. The Committee in considering the evidence submitted during the period of consultation, presented during the hearing and recalling observations from individual site visits, first had to decide the question of the neighbourhood in which the premises, to which the application related, were located.

### 11.2. Neighbourhood

11.3. The Committee noted the difference in neighbourhood defined by the Applicant and Interested Party. The Applicant's neighbourhood was supported by 95.7% of respondents to the CAR. A number of factors were taken into account when defining the neighbourhood, including those resident in it, natural and physical boundaries, general amenities such as schools/shopping areas, the mixture of public and private housing, the provision of parks and other recreational facilities,

the distance residents had to travel to obtain pharmaceutical and other services and also the availability of public transport.

- 11.4. The Committee agreed with the Applicant and decided to define the neighbourhood boundaries as follows:

North - the main A1

East - A6137 until it joined the

South - A6093

West - boundary of the Letham Mains development

- 11.5. The A class roads provided physical boundaries whilst the fields surrounding Letham Mains on the West provided a natural boundary. There were many amenities within this area to support daily living - shops, school, nursery, churches, cafés, community hospital and vet. The Interested Party did not agree with this neighbourhood definition stating that there were no medical services and so it was not a neighbourhood for all purposes. However, evidence had been heard that during the pandemic, most GP consultations were conducted remotely rather than face to face and this had continued post pandemic. Such services could therefore be accessed without leaving the neighbourhood. The Applicant's definition of neighbourhood was also in line with East Lothian Council's 2007 strategic plan to create a new neighbourhood in the West of Haddington. For these reasons, the Committee did not define the neighbourhood as the whole of the town. The committee therefore agreed to accept the Applicant's neighbourhood boundaries.

- 11.6. **Adequacy of existing provision of pharmaceutical services and necessity or desirability**

- 11.7. 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 it inadequate, whether the granting of the application was necessary or desirable in order to secure adequate provision of pharmaceutical services in the neighbourhood.

- 11.8. Although there were no pharmacies within the neighbourhood itself, there were three existing pharmacies within a short distance in the centre of Haddington (0.3 miles from the Eastern boundary of the Applicant's neighbourhood and the closest being 1.5 miles from Aldi on the Western edge). The committee noted that a significant number of the new neighbourhood's population were closer to the present pharmacies than the proposed pharmacy.

- 11.9. There had been several comments concerning parking difficulties in the CAR. However, there only 165 responses to the consultation had been received which equated to 1.4% of the current population of Haddington at around 12,000. Although the responses within the CAR were generally supportive of having a new pharmacy at the Applicant's proposed location, the low overall level of responses, in the opinion of the Committee, were more associated with the convenience of the proposed location rather than an inadequacy of service within the existing provision.

- 11.10. When conducting the site visits in preparation for this Hearing, members of the Committee had visited the area at different times of the day and on different days of the week. Whilst on street parking was busy late morning and afternoon there was a constant turnover of spaces. All were able to park and only a couple of members had to take a second tour round the high street to find a vacant spot. Off street parking was also available at Tesco or in the public carpark for those physically able. The Committee concluded that whilst parking was busy it did not prevent patients accessing services at the existing pharmacies or make those services inadequate.
- 11.11. The bus service to the retail park from the town centre was described by the Applicant as 'very good' and the Interested Party had stated that the town centre was well served by buses along the main route, which took as little as five to seven minutes to reach the centre. Public transport was therefore a good option to avoid parking difficulties when accessing pharmacy services.
- 11.12. Although not a core service, all existing pharmacies made deliveries in Haddington and the surrounding area. So, items could be delivered to those unable to collect prescription medication in person.
- 11.13. Irrespective of whether people were able to travel to one of the existing pharmacies or not, pharmacy services could still be accessed remotely which had advanced greatly during the pandemic and had now become business as usual.
- 11.14. No members of the Committee witnessed long queues outside any of the existing pharmacies during the site visits.
- 11.15. The Committee noted the small premise size for both Market Street Pharmacy and Right Medicine Pharmacy. The Applicant had stated that the premises were inadequate, but the Committee did not consider the pharmacy services provided from these premises to be inadequate. Indeed, the monthly dispensing volume showed Market Street Pharmacy as by far the busiest in Haddington dispensing 11,365 items per month. Plans for a potential expansion of Right Medicine Pharmacy in the High Street had been put on hold until the outcome of this application was known.
- 11.16. Evidence had been heard and supported by information provided by NHS Lothian that the monthly dispensing figure for Right Medicine Pharmacy was significantly below the national average of 6,000 at 3,842. The monthly dispensing figure for Boots (UK) Ltd was about average at 6,678. This Right Medicine Pharmacy branch was in the bottom 25% of pharmacies in the country based on prescription volume and Boots was near the middle. It had been confirmed that Right Medicine Pharmacy had sufficient spare capacity to meet any increased demand for services. Although Boots had not been represented, it was reported that Boots could also cope with extra capacity. None of the existing pharmacies had a cap on services.
- 11.17. There had been much discussion about the current difficulties in recruiting pharmacists which had contributed to 14 temporary closures of Boots Pharmacy in Haddington during 2022 as well as lunchtime closures of this store. The Committee recognised that such staffing issues would not be resolved by

granting an additional pharmacy contract in the area which proposed to employ two pharmacists.

- 11.18. It was noted that NHS Lothian had received six complaints over the last two financial years concerning the three existing pharmacies in Haddington. There had been one complaint received for each of the following reasons staff attitude/behaviour, waiting time and availability of medicines. The reason for the other three complaints had not been specified. Given that the three pharmacies dispensed 238,265 items collectively from prescriptions issued by the three medical practices in Haddington during December 2021 to November 2022, the complaint information could not be used to demonstrate any inadequacy of current provision.
- 11.19. The Applicant had claimed that the proposed pharmacy was needed to address the needs of the new population moving into the West of Haddington. The vast majority in the Applicant's proposed neighbourhood, was in the top 10% least deprived areas in the whole of Scotland. This was an indication that the population of the Applicant's proposed neighbourhood had access to vehicles and was in good health thereby reducing the need for pharmacy services.
- 11.20. The Committee noted the comments by the applicant and in the CAR about new housing development and possible pressure on GPs and pharmaceutical services. The committee also noted that prescribing trends had been stable over the last year with no discernible increases.
- 11.21. Following the withdrawal of Mr Connolly and Ms Gajree 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, considered that the pharmaceutical service into the neighbourhood to be adequate.
- 11.22. The Committee concluded that there was no evidence provided to demonstrate any inadequacy of the existing pharmaceutical services to the defined neighbourhood.
- 11.23. Accordingly, the decision of the Committee was unanimous that the provision of pharmaceutical services at the premises was neither necessary nor desirable 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 rejected. This decision was made subject to the right of appeal as specified in Paragraph 4.1, Regulations 2009, as amended.
- 11.24. The meeting closed at 12:45 hours.

**Signed by the Chair on 1<sup>st</sup> May 2023**