



PHARMACY PRACTICES COMMITTEE

**Meeting held on
2 May 2014 at 1.00pm in
Seminar Room, Hawick Community Hospital, Victoria Road, Hawick, TD9 7AH**

Application by Elixir Healthcare Ltd for inclusion in the pharmaceutical list in respect of the address at 11 Kenilworth Avenue, Burnfoot, Hawick, TD9 8EG.

The Pharmacy Practices Committee met at 1.00pm on Friday 2 May 2014 to consider the above application in accordance with the National Health Service (Pharmaceutical Services) (Scotland) Regulations 2009, as amended.

Decision of the Pharmacy Practices Committee

The decision of the Committee was that the provision of pharmaceutical services at the premises was necessary in order to secure adequate provision of pharmaceutical services in the neighbourhood in which the premises were located by persons whose names are included in the pharmaceutical list and that accordingly the application should be granted.

Pharmacy Practices Committee

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| Doreen Steele | (Chair) |
| Ros Anderson | (Non - Contractor Pharmacist) |
| Ron Robertson | (Contractor Pharmacist) |
| Martin O'Dwyer | (Contractor Pharmacist) |
| Stewart Scott | (Lay Member) |
| Margaret Simpson | (Lay Member) |
| Margaret Tait | (Lay Member) |

In Attendance

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| Umar Razzaq | (Elixir Healthcare Ltd, Applicant) |
| Kenneth Brown | (Elixir Healthcare Ltd, Applicant Support) |
| Robbie McGregor | (Lindsay & Gilmour Pharmacy) |
| Charles Tait | (Boots UK Ltd) |
| Katie Kerr | (Contractor Support Officer, NHS Lothian) |
| Louise Hockaday | (Contractor Support Officer, NHS Lothian) |

Application for Inclusion in Board's Pharmaceutical List

1. The Committee convened to consider an application submitted by Elixir Healthcare Ltd to provide general pharmaceutical services from premises situated at 11 Kenilworth Avenue, Burnfoot, Hawick, TD9 8EG under Regulation 5 (10) of the National Health Service (Pharmaceutical Services) (Scotland) Regulations 2009 as amended. A copy of the application had been circulated in advance to the Committee and the parties.
2. The Committee had to determine whether the granting of the application was necessary or desirable to secure the adequate provision of pharmaceutical services in the neighbourhood in which the Applicant's proposed premises were located.
3. Written representations had been received from Boots UK Ltd; Lindsay & Gilmour Pharmacy and Borders Area Pharmaceutical Committee (Interested Parties). Further comments were received from Councillor Stuart Marshall and members of the public. Copies of the written representations had been circulated in advance to the Committee, Applicant and the Interested Parties.
4. The Committee had before them details of the numbers of prescriptions dispensed during the months May 2013 – October 2013 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 July 2013 – September 2013. The Committee were also provided with "Pharmacy Profiles" of the nearest pharmacies detailing opening hours, premises facilities and services offered.
5. The hearing was convened under paragraph 3(2) of Schedule 3 to the National Health Services (Pharmaceutical Services) (Scotland) Regulations 2009 as amended ("the Regulations"). In terms of this paragraph, the PPC "shall determine an application in such a manner as it thinks fit". In terms of Regulation 5(10) of the Regulations, the question for the PPC is whether "the provision of pharmaceutical services at the premises named in the application is necessary or desirable to secure adequate provision of pharmaceutical service in the neighbourhood in which the premises are located by person whose names are included in the Pharmaceutical List."
6. Prior to the meeting the Committee undertook a site visit. The Committee noted the location of the proposed premises, the pharmacies nearest to the proposed premises, the nearest GP surgeries and the neighbourhood as defined by the Applicant.
7. It had been confirmed prior to the meeting that the members present did not have an interest to declare.
8. The Committee agreed to invite the Applicant and those who were present who had made representations ("Interested Parties"), to attend before them. The Applicant was represented in person by Mr Umar Razzaq ("the Applicant"), assisted by Mr Kenneth Brown. The Interested Parties who had submitted written representations during the consultation period and who had chosen to attend the hearing were Mr Robbie McGregor of Lindsay & Gilmour Pharmacy and Mr Charles Tait of Boots UK Ltd.
9. The Chair asked the Applicant and Interested Parties to confirm that they were not attending the Committee in the capacity of solicitor, counsel or paid advocate. They confirmed that they were not.
10. The Chair explained the procedure that would be followed and no person present objected.

11. The procedure adopted by the Committee was that the Applicant made an opening submission to the Committee, which was followed by an opportunity for the Interested Parties and the Committee to ask questions. The Interested Parties then made their oral representations and the Applicant and the Committee then asked the Interested Parties questions. The parties were then given an opportunity to sum up. Before the parties left the meeting the Chair asked all parties if they felt that they had had a fair and full hearing. They confirmed that they had.
12. The Committee was required to and did take into 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

13. The Applicant stated that their definition of the neighbourhood is that of the residential neighbourhood of Burnfoot. It is bounded by the A7 to the west, a busy arterial road into Hawick and the main route north and south, to where it meets Burnfoot Road. The southern boundary is the open land at Waverley Walk travelling east to Hamilton Road, with the eastern and northern boundaries being distinguished by open land and countryside.
14. The Applicant stated that it has been agreed by both Borders Council and NHS Borders that whilst Burnfoot is on the edge of the town of Hawick it is large enough to be considered a discrete neighbourhood in its own right, and has a population of 2,954 according to the Scottish Borders Councils most recent figures.
15. The Applicant explained that Burnfoot has all the hallmarks associated with being a neighbourhood for all purposes. It has its own churches, post office, Co-op store, bakers, general stores, takeaways, school and community facilities. He explained that very recently a lottery grant was gifted to a local community group to convert a disused pub into a brand new centre for group meetings and services for local people. There is also a community flat which provides a small amount of community services and health clinics.
16. The Applicant explained that there are no pharmaceutical services or medical services currently within the defined neighbourhood, with the nearest being some distance away in Hawick town centre. He explained that there are four pharmacies located in the town centre, with the next nearest pharmacies located in Selkirk and Jedburgh. He explained that while it may not be necessary to have a pharmacy in every single neighbourhood that lacks one, in the case of Burnfoot there are greater reasons to need one, and the difficulty accessing services out-with is an indicator of inadequacy. The current pharmacy network is currently set up to be as close to the GP surgeries in the town centre as possible. The Applicant advised that this is an out-dated model and not in line with the Scottish Governments policy recommendation that community pharmacy lie at the heart of the community. The Applicant noted that one of the pharmacies (TN Crosby) was once located on Kenilworth Avenue in Burnfoot and re-located to be nearer to the GP surgeries.
17. The Applicant stated that the main route to the town centre involves travelling along the steep Burnfoot Road and onto the A7, a busy road with steep inclines which involves a long walk on foot and is more challenging on the return journey. The Applicant explained that there is an alternative route which is the Waverley Walk but part of this involves steep inclines, stairs and tunnels which are poorly lit and he believes it is not a suitable route to the town centre, especially not for an elderly person or a mother with a pram. The Applicant stated that residents have commented that it is dangerous during adverse weather conditions. He explained that

another option is Hamilton Road but this involves a longer distance and still has inclines to be traversed. The Applicant felt that it is unreasonable to expect residents of Burnfoot to make this journey to reach a pharmacy on foot.

18. The Applicant advised that the nearest pharmacy in the town centre is TN Crosby, at a distance of about 1.2 miles from the proposed location, followed by Lindsay & Gilmour Pharmacy and Boots Pharmacy at roughly 1.4 miles, and lastly the health centre pharmacy being the furthest away at 1.5 miles. To walk from the proposed site to the nearest pharmacy takes about 25-30 minutes or longer for those of poorer mobility. The Applicant stated that the distance and difficulty in accessing the town centre pharmacies is an indicator of inadequacy and that the public consultation comments echo this sentiment.
19. The Applicant stated that the bus services provided to the neighbourhood are roughly about 3 every hour until just after 6pm and thereafter it becomes an hourly service. The Applicant stated that the cost for a return journey is £3.10 to the High Street, which to a resident of the poorest area in the Borders is expensive. The Applicant noted that there used to be a further bus service to Burnfoot provided by Munro's of Jedburgh but that this service is no longer in operation. The Applicant stated that having to rely on a bus service to access pharmaceutical services clearly demonstrates inadequacy, especially when considering this is one of the most deprived areas in the Borders.
20. The Applicant stated that car ownership is extremely low in Burnfoot with 44.6% of households having no access to a car, compared to 37.3% for the rest of Hawick and 34.2% for Scotland as a whole, therefore large numbers of the population are relying on travelling by bus or on foot to access current services. The Applicant noted that parking on the high street during the day can be difficult, with most parking areas located on the edge of Hawick town centre and that there have been complaints of congestion due to the one way traffic system.
21. The Applicant stated that the only pharmacy services currently available directly into Burnfoot are delivery services which are provided by some of the current pharmacy network. The Applicant explained that from phone calls made to the pharmacies in Hawick they had discovered 2 of the pharmacies did not deliver at all and 1 pharmacy provided only a partial delivery service. He stated that core NHS services which have been deliberately designed to improve health cannot be delivered from a van.
22. The Applicant explained that Burnfoot has no GP services and these are located in Hawick town centre. He noted that given that it is well documented that Burnfoot has the poorest health/deprivation statistics for the whole of the Borders it is unacceptable that local residents cannot access a pharmacy in their neighbourhood. The Applicant explained that services such as the Minor Ailment Service and Public Health Service to which an ageing population and a high proportion of children would benefit from are being missed out on. He explained that many residents that they had spoken to were unaware the Minor Ailments Service even existed despite being eligible to use the service. The Chronic Medication Service requires patients to be able to have decent access to a pharmacy if it is to have any beneficial effect on educating patients in their medication, improving compliance and implementing long term health improvements. While there is a small amount of health services available from the community health flat on Kenilworth Avenue such as a smoking cessation clinic for a few hours on a Tuesday, Burnfoot is very limited in health related services. The Applicant noted that Burnfoot has the highest proportion of smokers in the Borders compared to 27.2% for Scotland.
23. The Applicant explained that when there is no pharmacy in a neighbourhood several factors have to be considered.

24. With regards to population size, the Applicant explained that Burnfoot has a population large enough in size at close to 3,000 to be able to support a new pharmacy and that it is one of the single largest neighbourhoods in the Borders.
25. With regards to demographics, the Applicant explained that Burnfoot is a recognised area of unemployment and deprivation and such populations have more vulnerable residents, greater health issues, poorer mobility and statistically are the highest users of pharmaceutical services. It is the most deprived neighbourhood in the Borders and is made up of four data zones, 3 of which are in the top 15% of the most deprived neighbourhoods in Scotland according to the Scottish Index of Multiple Deprivation (SIMD), 2 of which are in the top 10% and 1 is in the top 5%. The statistics for all these data zones have progressively worsened since records began in 2002. The applicant noted that the worsening SIMD statistics have been further highlighted in the recently published Strategic Assessment for the Scottish Borders by Borders Council.
26. The applicant explained that in Burnfoot there are a high number of children and a constantly ageing population. The applicant stated that other statistics include: income deprived in Burnfoot is 27.3% compared to 15.1% in Scotland, adults claiming incapacity/disability allowance is 9% compared to 5.6% for Scotland, patients with multiple hospitalisations and hospitalised with coronary heart disease is significantly worse than the Scottish average and mothers smoking during pregnancy is 48.1% compared to 22.6% for Scotland.
27. The Applicant explained that recent news reports from the local press have been published and further emphasise the deprivation of Burnfoot naming it as one of the most deprived areas in Scotland not just the Borders.
28. With regards to routine daily behaviour, the Applicant explained that residents will most likely visit the supermarkets on the edge of the town centre to do a weekly shop, and use medical/pharmacy services when needed due to lack of any locally. He explained that for everyday life most essentials are available from the local retail facilities without the need to travel out-with Burnfoot. The applicant stated that it is well documented that the High Street is no longer being visited to any extent and has become something of a ghost town with many shop units lying empty, unused buildings are falling into a state of dilapidation and fake shop fronts are currently being used on many empty shops to try and give the street a facelift. The Applicant stated if people do travel out-with Burnfoot for anything, they are not travelling to the High Street for the every day fabric of their lives.
29. With regards to access to existing services, the Applicant explained that where there is a neighbourhood which lacks a pharmacy, and which involves public transport use to access one, certain considerations need to be made. There are plenty of neighbourhoods throughout Scotland which have no pharmacy and do not necessarily need one. The Applicant stated that this would be the reality if the population was low, fairly affluent with high car ownership, of decent health and lower uses of pharmaceutical services or as part of their everyday routine residents travel to a place where there is an existing pharmacy. The Applicant stated that Burnfoot meets none of these criteria and is very similar in scope and definition to Langlee, another area in the Borders where recently the PPC have twice granted a pharmacy contract.
30. The Applicant stated that in some pharmacy applications situated in a more rural locale it could be suggested that such residents are more used to travelling than those who live in larger urban conurbations. He explained that Burnfoot is more unusual and very similar to Langlee, as its demographics resemble those of deprived areas more commonly found in larger towns and cities throughout Scotland. He explained that a neighbourhood in clear pharmaceutical need should not be penalised and forced to travel further for services simply because where they

happen to live is more geographically isolated than neighbourhoods on the edge of more populated centres of residence.

31. The Applicant explained that there have been a small number of negative comments in the local newspaper surrounding the application centred on the supply of methadone. The Applicant stated that this has no bearing on the legal test and that he appreciates there are often concerns regarding methadone in new pharmacy applications particularly in deprived areas and residential locations. He explained that they do not think this will be a problem and have experience in dealing with such issues when they opened their pharmacy in North Motherwell.
32. The Applicant stated that there has been some mention of opposition from Burnfoot Community Council although they have not formally responded during the public consultation. He stated that they had spoken to many residents who support the application and many of which have informed them that the community council never consulted them on this matter. The Applicant questioned how in touch the community council is with the residents of Burnfoot.
33. The Applicant stated that there have also been one or two comments made during the public consultation about the delivery services provided by T N Crosby Pharmacy. The Applicant stated that as mentioned previously the new pharmacy contract cannot be provided through a delivery service and this cannot be considered adequate. The Applicant explained that they had phoned TN Crosby recently to enquire if they could deliver a blister pack to Burnfoot and were advised that they could only deliver to Burnfoot on certain days as they cover a large area and there was a waiting list for blister packs.
34. The Applicant noted that during the public consultation and time spent in the neighbourhood they had received a positive response. Many residents they had spoken to felt aggrieved that Burnfoot does not have a pharmacy and felt left out especially with the worsening health statistics. The applicant read out some quotes from members of the public.
35. The Applicant explained that they have also contacted the Director of Public Health for NHS Borders and Borders Council about their proposals for a new pharmacy in Burnfoot and have gained his support.
36. The Applicant explained that there is ample free car parking outside the proposed premises and in terms of opening hours for the proposed pharmacy these are Monday to Friday 8am - 6pm, Saturday 9am - 5pm and Sunday 10am – 5pm. He stated that this would provide the neighbourhood with an extra 7 hours of access a week to a pharmacy compared to what is available from the current network in Hawick. The Applicant believed that the Sunday opening hours would be of great benefit, with the only Sunday opening pharmacies in the entire Borders both being located 18 miles away in Galashiels. He stated that in the 2011 Pharmaceutical Care Services Plan it is noted that there is very limited service provision for the entirety of the Borders when it comes to Sunday access to services.
37. The Applicant confirmed that the pharmacy would participate in all core aspects of the pharmacy contract including any local health board initiatives. The core NHS Services that they would provide are the Acute Medication Service, Chronic Medication Service, Minor Ailments Service and Public Health Service. They would also provide additional NHS services which would include advice to care homes, smoking cessation, keep well service, compliance support, healthy start vitamins service, stoma service, and substance misuse services. The Applicant confirmed that they would also actively look to set up supplementary prescribing in conjunction with local GP's if such opportunities were made available. Other services they would provide are free blood testing, blood glucose testing, weight management service, vaccination service and a free collection and delivery service.

38. The Applicant stated that in keeping with the implementation of the Chronic Medication Service they would be available to give advice and support to help tackle issues which can lead to poor health and illness such as obesity, excessive alcohol consumption and consequences of physical inactivity and poor diet. In line with Prescription for Excellence they would also have high on their agenda the education of medicine use and minimising non-adherence, and identifying need and providing compliance initiatives where necessary.
39. In conclusion the Applicant stated that the neighbourhood is that of Burnfoot and it is statistically proven to be the most deprived neighbourhood in the Borders with consistently worsening figures, a high proportion of children and an ageing population. It is isolated geographically from the current network of pharmacies, which are located in such a way as to be as close to the medical practices as possible and can only be accessed after a lengthy walk or a bus journey. The Applicant concluded that he believed this contact is needed to secure adequate pharmaceutical services to this neighbourhood and asked that it should be granted.
40. **Questions from Mr Robbie McGregor to the Applicant**
41. The Applicant confirmed when asked by Mr McGregor that the premises is the unit currently trading as a bakery shop at Kenilworth Avenue and that the Applicant has a legal agreement in place to purchase the premises.
42. The Applicant confirmed when asked by Mr McGregor that the bus figures stated in his presentation were given by First Borders bus service whom the Applicant had telephoned.
43. Mr McGregor stated that the pavements from Burnfoot to Hawick are in good condition and noted that there is a path way. The Applicant responded that this is the case but still believes that it is too far to walk.
44. **Questions from Mr Charles Tait to the Applicant**
45. Mr Tait asked the Applicant how far it was from the extreme edge of Burnfoot to T N Crosby Pharmacy. The Applicant confirmed that he thought it would be less than a mile.
46. Mr Tait asked the Applicant what an acceptable distance to walk to a nearest pharmacy is. The Applicant stated that some people will have to rely on public transport no matter how close a pharmacy is.
47. Mr Tait pointed out that one of the respondents to the public consultation had referred to the area as a housing scheme and asked the Applicant how he would define a housing scheme. The Applicant stated that he wasn't sure but explained that he had already defined the neighbourhood.
48. **Questions from the Committee to the Applicant**
49. The Applicant confirmed when asked by Ms Tait that the percentage of children in the area is 26% and that the Scottish average is 19%.
50. Ms Tait asked the Applicant whether women with children received a discount on public transport. The Applicant responded that he was not sure but that it was possible.

51. The Applicant confirmed when asked that he had spoken to one of the two Health Centres in the town centre. He explained that they had found that GP practices did not want to have much communication at this stage in the application process but that he had spoken to O'Connell Street Medical Practice and they had no objections.
52. The Applicant confirmed that there would always be one pharmacist available during the pharmacy opening hours and that there would be locum cover at the weekends.
53. Ms Simpson pointed out that the proposed pharmacy was a small unit and did not seem easy to access for a disabled person. The Applicant confirmed that the shop fitter they will use specialises in pharmacy lay outs and will be able to provide a lay out which is suitable.
54. Ms Simpson asked whether the pharmacy would work with the health clinic and the Applicant confirmed that they would. The Applicant also confirmed that there are procedures in place for methadone and they don't envisage there being a problem with this service.
55. The Applicant confirmed when asked by Mr O'Dwyer that the vaccination service would not be a free service but the blood pressure testing etc would be free of charge.
56. The Applicant confirmed when asked by Ms Anderson that the area is in the worst deprivation data zone. The Applicant also confirmed that the pharmacy in the future would hopefully provide independent prescribing in line with Prescription for Excellence.
57. Ms Steele asked what plans were in place in terms of business continuity and the Applicant confirmed that they already have Standard Operating Procedures in their Motherwell pharmacy and would have something similar for the pharmacy at Burnfoot for emergency situations.
58. The Applicant confirmed when asked by Mr Scott that they currently own one pharmacy in Motherwell which is also in a deprived area.
59. Mr Scott asked how much time the Applicants had spent speaking to the residents of the local area. The Applicant confirmed that they had spent a lot of time in the shops speaking to people which was mostly during the day time. The Applicant also confirmed that they thought they might receive some transient business from the industrial estate. The Applicant confirmed that their overall impression of the area is that it is very deprived and that many residents did not know about the pharmacy application. The Applicant noted that the majority of residents they spoke with were positive about the proposed pharmacy. Mr Scott pointed out that the High Street is busy and the Applicant responded that there are still a number of empty units even if people are still there.
60. The Applicant confirmed that they would be open on a Sunday and they felt that residents shouldn't have to travel 18 miles to Galashiels to access a pharmacy on a Sunday. The Applicant confirmed that they intend to integrate with the local community and provide a pharmacist for 7 days a week.
61. The Applicant confirmed when asked by Mr Robertson that there is only 1 bus service which is First Borders in the area. The Applicant also confirmed that they had spent a lot of time in the neighbourhood when asked if they had carried out any constructive canvassing.
62. Ms Anderson asked if the Applicant had made any contact with the 'Health Flat' in Burnfoot. The Applicant confirmed that they had not as yet but that they plan to. The Applicant stated that the smoking service offered by the 'Health Flat' is only for 1 morning and the pharmacy would offer the service every day. The Applicant confirmed when asked by Ms Anderson that they did

not envisage that it would take long to open the pharmacy and that they had not yet spoken to the General Pharmaceutical Council.

63. The Applicant confirmed when asked by Ms Simpson that they would be providing dosette boxes and a delivery service.
64. Mr Scott stated that the car parking at the pharmacy is not ideal and that there is only 1 disabled parking space. The Applicant confirmed that there are about 20 spaces and 1 disabled space and that they have always managed to get parked when visiting the premises.
65. The Applicant confirmed when asked by Mr Scott that it was a 2 ½ hour drive to Motherwell but that they both were planning to relocate to the Borders. They would have a manager in the Motherwell Pharmacy. The Applicant confirmed that he did not envisage any issues with staffing.
66. **The Interested Parties Case – Mr Robbie McGregor of Lindsay & Gilmour Pharmacy**
67. Mr Robbie McGregor stated that he would like to object to the recent application for an additional NHS pharmaceutical contract at 11 Kenilworth Avenue, Burnfoot, Hawick on the grounds that the application does not meet the criteria for being necessary or desirable to secure adequate provision of pharmaceutical services to the neighbourhood.
68. Mr McGregor defined the neighbourhood as the whole of Hawick. He stated that there are currently four pharmacies serving the population of Hawick each within a mile and a half of the proposed premises, each accessible on foot, by bus and by car. There are around three buses an hour and a large proportion of Burnfoot residents are eligible for free, concessionary travel on the grounds of age or disability.
69. Mr McGregor stated that the residents of Burnfoot are already used to travelling into the town centre to access their medical services and pharmaceutical services as well as supermarkets, sports facilities, banking etc.
70. Mr McGregor noted that a number of concerns have been raised both in the press and by local councillors around anti-social behaviour in Burnfoot. There is a fear that the opening of a pharmacy and the provision of methadone locally would have a further detrimental impact on the area. Mr McGregor stated that whilst it would be unfair to blame the social ills of an area upon patients under the care of the addiction teams these patients are currently being adequately served at one of the four existing pharmacies where there is ample capacity.
71. Mr McGregor explained that Lindsay & Gilmour Pharmacy offers a full range of pharmaceutical services including the contracted services such as the Gluten Free Food Service, Ostomy Service, Minor Ailment Service, Public Health Service, Acute Medication Service and Chronic Medication Service. In addition locally negotiated services such as methadone supervision are also provided and dosette boxes are freely available to anyone who is recommended one and that all of these services are available to all patients in Hawick. Mr McGregor pointed out the Sunday opening hours was stopped by NHS Borders and is usually carried out by the Out of Hours Service and believes that there is no demand for a Sunday Service in the area.
72. Mr McGregor stated that their pharmacy offers a daily acute and repeat prescription collection service from both Medical Practices in Hawick and also provide a free, on demand, delivery service to patients throughout the town, including Burnfoot. Many of these prescriptions are delivered the same day.

73. Mr McGregor explained that they have ample capacity and sufficient trained staff to allow them to develop services as they are rolled out as the pharmacy contract continues to develop following the publication of the Prescription for Excellence document. He explained that the current pharmacist has worked there for a number of years and many more within the town of Hawick itself and has developed good relationships with both patients and local GPs.
74. Mr McGregor stated that the population of Hawick is 14,294 and that currently the average patient population per pharmacy in Scotland is 4,243. The Hawick pharmacies are well below this with an average of 3,573 and that consequently any loss of business from any of the pharmacies in the town could have a significant impact on the viability of the existing services.
75. Mr McGregor concluded that the Applicant does not propose to offer any services not currently available from pharmacies within the town. He stated that he does not believe that any inadequacy in the existing services has been demonstrated and that whilst a case can always be made for desirability it should not be confused with convenience. He therefore urged the Committee to reject the application.
76. **Questions from the Applicant to Mr Robbie McGregor**
77. Mr McGregor confirmed when asked by the Applicant that Lindsay & Gilmour Pharmacy provide about 15 deliveries a week to Burnfoot. The applicant pointed out that the Minor Ailment Service and the Public Health Service cannot be provided by delivery service.
78. The Applicant asked Mr McGregor if their pharmacy currently provides supervised methadone. Mr McGregor confirmed that they do and they have occasional problems but have contracts in place.
79. **Questions from Mr Charles Tait to Mr Robbie McGregor**
80. Mr Tait asked Mr McGregor to clarify that the anti-social issues in Burnfoot in the local press that he mentioned were current issues and not issues to do with methadone and that this service could potentially increase the anti-social behaviour. Mr McGregor confirmed this is what he had meant.
81. **Questions from the Committee to Mr Robbie McGregor**
82. Mr McGregor confirmed when asked by Ms Tait that they would reserve their position on whether they think the application is valid and acceptable with regards to timescales.
83. Mr McGregor confirmed that Lindsay & Gilmour Pharmacy offer a collection and delivery service.
84. Ms Anderson noted that a letter from the public consultation had complained that the pharmacy they use in Hawick did not always have full stock and asked Mr McGregor if Lindsay & Gilmour Pharmacy would deliver if this was the case. Mr McGregor stated that there were no limits to the delivery service and that if there weren't enough stocks then they would deliver if asked. Ms Anderson also noted that the consensus population figures are misleading as does not take in the whole area and the population is 18,500.
85. Mr McGregor confirmed when asked by Ms Simpson that they advertise their services on a board inside the pharmacy which is visible.

86. **The Interested Parties Case – Mr Charles Tait of Boots UK Ltd**

87. Mr Tait stated that he believed that the neighbourhood is Hawick due to rurality. He stated that Hawick is the epicentre of a rural area and that it cannot be subdivided. He explained that the population relies on the town centre of Hawick for other facilities and services for their normal life.
88. Mr Tait stated that the nearest pharmacy is within a 20 minute walk. He explained that he believes that if a person can't walk for 20 minutes then they can travel by bus which takes 10-15 minutes. Mr Tait stated that he believed that is reasonable.
89. Mr Tait stated that reasonable access to pharmaceutical services is achievable for all residents of Hawick. Mr Tait stated that he believed that on a Sunday residents will travel to Galashiels for other amenities that are not in Hawick. Mr Tait stated that a housing scheme is what it says and is not about provision of services. Mr Tait stated that he believed that the application is based around convenience. Mr Tait also pointed out that there have been no complaints about pharmacy provision which the Patient Rights Act has allowed for and has been in force for the past two years. Mr Tait stated that the community's heart is the centre and that there will always be pockets of deprivation.
90. Mr Tait stated that he believes that the town centre is thriving and will change. For example in East Kilbride 1 in 5 shops are closed so it is having to change and that Hawick is the same. Mr Tait concluded that he believed the application is based on convenience and should not be granted.

91. **Questions from the Applicant to Mr Charles Tait**

92. The Applicant asked Mr Tait whether Wilton Dean residents would consider themselves neighbours with Burnfoot. Mr Tait stated that they would say that they are residents of Hawick and that Hawick is not subdivided which is similar to other Borders towns.
93. Mr Tait confirmed when asked by the Applicant that Boots offer a delivery service to those who have difficulty accessing the service. The Applicant stated that he had telephoned Boots Pharmacy in Hawick and was told that they do not offer a service at all. Mr Tait confirmed that they offer a nationwide delivery service.

94. **Questions from Mr Robbie McGregor to Mr Charles Tait**

95. No questions.

96. **Questions from the Committee to Mr Charles Tait**

97. Mr Tait confirmed when asked by Ms Tait that Boots offer the service appropriate to the area. Mr Tait confirmed that the 24 hour service was not required in the area. Mr Tait explained that the catchment area for a Sunday service provision will be bigger, similar to the out of hour's service, as this service is not going to attract a large volume of patients.
98. Mr Tait responded when asked that the term housing scheme cannot be differentiated between an area of social housing as opposed to an estate of private houses.
99. Mr Tait confirmed when asked by Ms Anderson that the pharmacy could post prescriptions and do have pre-printed envelopes if there were not full stocks available. Mr Tait confirmed that a

patient would have to be proactive and ask for that service and noted that many patients choose to come back as they have other things to do in Hawick.

100. Ms Anderson noted that community pharmacies play a useful role on a Sunday. Mr Tait confirmed that the pharmacy in Galashiels does not have a huge demand on a Sunday and very rarely get an urgent prescription. Mr Tait pointed out that it was NHS Borders that made the decision to no longer provide a Sunday service and that the regulations allow for Health Boards to insist that a pharmacy is open on a Sunday but have not done so.
101. Ms Anderson noted that it is not always that easy to get a bus and the service is not always reliable. Mr Tait stated that there would have to be a large number of pharmacies in the Borders if this was the case.
102. Mr Tait agreed when asked by Mr O'Dwyer that a delivery service is not a core NHS service. This is a service that could be ceased at anytime by the pharmacy.
103. **Summing Up**
104. The Applicant and Interested Parties were then given the opportunity to sum up:
105. **The Applicant stated** that the neighbourhood is that of Burnfoot and within that neighbourhood there are no pharmacies. It is a neighbourhood for all purposes, with continually worsening deprivation and health statistics. The Applicant stated that the NHS Borders 2011 Pharmaceutical Care Services Plan intimated at the time that this area could be considered in need of a new pharmacy given its circumstances and that the Area Pharmaceutical Committee agrees that it is an area of identified pharmaceutical need. The Director of Public Health for NHS Borders and Borders Council fully supports the proposal. Several local people have also made the time and effort to give their written support. The Applicant stated that it is unacceptable to expect residents of Burnfoot to use public transport to access pharmaceutical services and that the bus service does nothing to reduce inadequacy. He believes that residents should be able to walk to their nearest pharmacy. The Applicant concluded that a new pharmacy would secure adequate services and is both necessary and desirable for this neighbourhood.
106. **Mr Robbie McGregor of Lindsay & Gilmour Pharmacy stated** that granting the application will have a significant effect on other pharmacies in Hawick. Mr McGregor urged the Committee to reject the application and that only convenience had been demonstrated not desirability or necessity.
107. **Mr Charles Tait of Boots UK Ltd stated** that much of the discussion has been in relation to non - NHS services and that the application is about NHS services. Mr Tait concluded that the neighbourhood is Hawick which already has very good services and that he believes that the application should be rejected.
108. At the conclusion of the summing up, the Chair asked the Applicant and all of the Interested Parties if they considered that they had had a fair and full hearing. The Applicant and Interested Parties all agreed that they consider that they had had a fair and full hearing and there was nothing further that they wished to add.
109. The Chair advised that the Committee would now consider the application and representation and make a determination. A written decision with reasons would be prepared and a copy sent to them as soon as possible. A letter would be included with the decision advising of the appeal process. The Chair then thanked the parties for attending.

110. **The Applicant (Mr Umar Razzaq and Mr Kenneth Brown), Interested Parties (Mr Robbie McGregor and Mr Charles Tait) and Board Administrators (Ms Katie Kerr and Ms Louise Hockaday) then left the meeting.**

111. **Decision**

112. 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.

113. The Committee considered the validity of the application as put forward by Lloyds Pharmacy in their written representation and as discussed during the hearing and agreed that it had been confirmed by the Board that the application was within the timescales as set out in the Regulations.

114. **Neighbourhood**

115. 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 the neighbourhood in which the premises, to which the application related, were located.

116. The Committee considered the neighbourhood as put forward by the Applicant, and the Interested Parties, as well as comments received during the public consultation.

117. The Committee took into account a number of factors in defining the neighbourhood, including those who were resident there, that it had natural and man made boundaries, the presence of schools, shops and the distance which residents are required to travel to obtain pharmaceutical and other services.

118. The Committee took into account that Burnfoot has a school, two churches, Co-op store, a hub called the 'Burnfoot Future', has its own festival/carnival and NHS outreach centre. The Committee therefore considered that the daily needs of Burnfoot were being met with these services. The Committee noted that Burnfoot has its own Community Council which has a seat on the Scottish Borders Area Forum distinct from Hawick Community Council. The Committee also considered that Burnfoot is defined as a community in the Scottish Index of Multiple Deprivation (SIMD), Pharmaceutical Services Plan and the Director of Public Health Report.

119. The Committee therefore considered that the neighbourhood is Burnfoot and should be defined as follows:

North: Bounded by Burnhead Road across open land to the B6359 which intersects with the A7. The Committee considered beyond this there is open land.

East: From the intersection of Burnhead Road and Hamilton Road travelling to Waverley Walk along the cemetery wall to the Burnfoot Road intersection.

South: The intersection of the cemetery to Burnfoot Road and the A7.

West: Bounded by the A7 to the west to where it meets the B6359 and Burnfoot Road, the committee considered that this was a busy arterial road into the town of Hawick and that this was a physical boundary.

120. **Adequacy of Existing Provision of Pharmaceutical Services and Necessity or Desirability**

121. Having reached that decision the Committee were then required to consider the adequacy of existing pharmaceutical services in that neighbourhood, and whether the granting of the application was necessary or desirable in order to ensure adequate provision of pharmaceutical services in that neighbourhood.
122. The Committee in determining adequacy of existing provision of pharmaceutical services in the defined neighbourhood and whether the granting of the application was necessary or desirable in order to ensure adequate provision of pharmaceutical services took account of all the evidence provided by the Applicant, Interested Parties and made available from other sources.
123. The Committee noted that within that neighbourhood, as defined, there are no community pharmacies and that pharmaceutical services are currently being provided from pharmacies out with the neighbourhood. These are Lindsay & Gilmour Pharmacy, Boots Pharmacy, Hawick Health Centre Pharmacy and T N Crosby Pharmacy. The Committee also noted that there are no GP services within the neighbourhood. The Committee noted that all other pharmacies are located a substantial distance from the neighbourhood.
124. The Committee noted that there is the delivery service to Burnfoot. The committee noted that the services provided by a pharmacy include not only the dispensing of prescriptions but other services which include the Public Health Service, Chronic Medication Service and Minor Ailments Service. The Committee considered that these services cannot be provided by a delivery service. The Committee also considered that although pharmaceutical services were available out with the neighbourhood there could be no reliance on delivery services which could be withdrawn at any time.
125. The Committee considered the access to the services provided out with the neighbourhood considering the demographics of the area and noted that it is difficult for the elderly, people with prams and multiple children to access the services out with the neighbourhood. The Committee noted from the evidence and site visit the different routes to travel on foot from Burnfoot to Hawick. The Committee noted the difficulties with traversing steep gradients on foot and that this would be a challenging journey for some elderly residents. The Committee also considered that Burnfoot is the second most deprived income area in the Borders and therefore bus fares for residents would be expensive for a return journey.
126. The Committee noted from the evidence and SIMD statistics that the neighbourhood has a low car ownership and that there was a bus service from Burnfoot to Hawick. The Committee however considered that for residents with push chairs, wheel chair owners and the elderly it can be difficult to get on and off the bus and for some on the outer edges of Burnfoot it can be a journey to get to the nearest bus stop. The Committee also took into consideration that some buses are not adapted for non-ambulatory and prams. The Committee also considered that for those with cars, parking is not easy in Hawick and therefore there is difficulty of access. The Committee considered that the existing provision of pharmaceutical services to the neighbourhood could therefore not be considered adequate.
127. The Committee noted that the population size of Burnfoot is approximately 3000. The Committee considered the demographics of the area and noted that there is a high population of

elderly and pensioners, growing at 1.4% per annum in the Scottish Borders and that there is 22.6% pensioner population in the Scottish Borders. The Committee noted that Burnfoot is the second most deprived income area in the Borders and that 3 areas of Burnfoot are in the second most deprived SIMD category and 1 area is in the most deprived SIMD category. The Committee noted that there is a high level of co-morbidity of chronic conditions. The Committee considered for the demographics of the area it was important to have access to the Minor Ailment Service, Chronic Medication Service and Minor Ailments Service. The Committee considered that for those using the Chronic Medication Service they would be left to travel to Hawick for repeat prescriptions which could not be considered adequate. The Committee noted that there are high levels of teenage pregnancy and young mothers in the area and therefore access to EHC provision is important. The Committee noted that access to a Sunday service would therefore be of great benefit to residents as currently the nearest pharmacy open on a Sunday is in Galashiels.

128. The Committee noted from the Pharmaceutical Care Services Plan that Burnfoot was identified as an area of need of pharmaceutical care provision and that it had been identified as being 'a key area of deprivation within the region, this in combination with the projected growth and ageing of the population could in the future mean they may be considered to be both large enough in population terms and have the potential demand for pharmacy service'. The Committee also noted that there is an expanding business park with Scottish Borders Council funding which is bringing more people into the area. The Committee also considered that there is limited building of social housing in the Hawick area and therefore people are likely to remain in the neighbourhood.
129. The Committee considered the argument of convenience as put forward by the Interested Parties. The Committee noted that access to a pharmacy for residents of Burnfoot can require planning and considerable time and travel to Hawick. This was considered not to be an everyday occurrence given that there are local services in the neighbourhood which include a Post Office and large Co-op store. They noted that the distance on foot there and back is considerable and could be 2 miles each way from some parts of the neighbourhood.
130. The Committee noted that there were several letters of support from the public consultation and noted that there were also two letters of objection received. The Committee considered the letters of objection that had been received had a potential conflict of interest in the application and noted the other letters received were all positive with regards to the application.
131. The Committee considered that there had been no objection from the Community Council submitted, and the comments made by the Borders Area Pharmaceutical Committee and the Borders Public Health Report has identified Burnfoot as an area in need of pharmaceutical services. The Committee also noted that the Borders Area Pharmaceutical Committee had made no objection to the application.
132. The Committee considered the 20:20 vision, person centred services, access, quality and the public sector quality duty.
133. **In accordance with the statutory procedure the Pharmacist Members of the Committee (Ros Anderson, Ron Robertson and Martin O'Dwyer) left the meeting and were excluded from the voting process.**

DECIDED/-

134. The Committee agreed unanimously that there are currently no pharmaceutical services within the neighbourhood, as defined by the Committee. The Committee in determining adequacy, and taking into consideration all of the evidence, agreed that the current pharmaceutical services provided to the neighbourhood are not adequate due to the demographic of the area and the difficulty in accessing the services out with the neighbourhood as discussed. They therefore agreed that it would be necessary to grant the application in order to secure adequate provision of pharmaceutical services in the neighbourhood given the social health and financial deprivation (as identified in the SIMD statistics) in the neighbourhood and projected growth and ageing population as discussed. The Committee agreed that that it was not a matter of convenience as the current access to a pharmacy for residents of Burnfoot can require planning and considerable time and travel to Hawick and travelling to Hawick was not an everyday occurrence given that there are local services in the neighbourhood which include a Post Office and large Co-op store. They also agreed that the distance on foot there and back is considerable for some residents given the high percentage of elderly and young mothers and that the bus service is expensive given Burnfoot is the second most deprived area in the Borders. The Committee agreed that it was necessary for the demographic of the area to have access to Chronic Medication Service, Minor Ailment Service and Public Health Service which a delivery service cannot provide.
135. The Chair invited members of the Committee to vote on the application by Elixir Healthcare Ltd to provide pharmaceutical services at 11 Kenilworth Avenue, Burnfoot, Hawick, TD9 8EG. The Committee unanimously agreed to grant the application.

Signed: Doreen Steele

Date: 16.05.2014

Doreen Steele, Chair
Pharmacy Practices Committee