REPORT FROM AN ORAL HEARING HELD ON 6 AUGUST 2010 AT CASTLEFORD AND NORMANTON DISTRICT HOSPITAL, CASTLEFORD IN CONNECTION WITH AN APPEAL AGAINST WAKEFIELD PCT’S DECISION TO REFUSE AN APPLICATION BY COMMUNITY PHARMACIES (UK) LTD FOR PRELIMINARY CONSENT PRIOR TO INCLUSION IN THE PHARMACEUTICAL LIST IN THE VICINITY OF THE NEW HEALTH CENTRE DEVELOPMENT, LANGTHWAITE ROAD, SOUTH KIRKBY, PONTEFRACT, WF9 3AE
REF: 15704

1 Background

1.1 By application dated 4 November 2009, Community Pharmacies (UK) Ltd (“the Applicant”) applied to Wakefield District Primary Care Trust (“the PCT”) for preliminary consent prior to inclusion in the pharmaceutical list in the vicinity of the New Health Centre Development, Langthwaite Road, South Kirkby, Pontefract, WF9 3AE. The application and supporting documentation is between pages 1 to 13 of the bundle.

1.2 The PCT considered and decided to refuse the application. The decision letter dated 17 March 2010 is at pages 66 and 67 of the bundle and the letter dated 15 March 2010 to WYCSA, Wakefield District is at pages 63 to 65 of the bundle. The Minutes of the Pharmacy Application Panel are at pages 60 to 62.

1.3 In a letter to the Family Health Services Appeal Unit of the NHS Litigation Authority (“the Appeal Unit”), dated 14 April 2010, Community Pharmacies (UK) Ltd appealed against the PCT’s decision. This is at page 70 of the bundle.

2 Preliminary Consideration

2.1 The Pharmacy Appeals Committee appointed by the Family Health Services Appeal Unit of the NHS Litigation Authority, (“the Committee”) had before it the papers considered by the PCT, together with a plan of the area showing existing pharmacies and doctors’ surgeries and the site of the proposed pharmacy. It also had before it the responses to the Authority’s own statutory consultations.

2.2 On the basis of this information, the Committee considered it was necessary to hold an Oral Hearing, before determining the appeal. The Committee requested the Panel to recommend with reasons, the most appropriate neighbourhood for the proposed pharmacy and whether the application should be granted in order to satisfy the test in Regulation 12(1).

2.3 The Panel was appointed and sat at the Castleford and Normanton District Hospital, Castleford on 6 August 2010. A list of those present is attached at Appendix 1. On the morning of the hearing, it conducted a site visit. Its findings are set out below. It collected leaflets which are listed at Appendix 2. The full results of a survey had been submitted to the FHSAU with the analysis and summary included in the bundle. The actual survey sheets were not circulated and the Chairman therefore verified prior to the hearing that the summary correctly reflected the information given by the participants. A few days before the hearing, Lloyds Pharmacy submitted its own mystery shopper results.

3 The Site Visit

3.1 The proposed pharmacy is to be in Langthwaite Road, South Kirkby. Although there is a reference to the new health centre, there are no hoardings or signs in Langthwaite Road to indicate where this is to be built. There is however a vacant area of land towards the north of Langthwaite Road on its western side, opposite the junction with Lidgate Crescent. A lit and tarmaced footpath runs alongside this plot and leads to Church Avenue emerging between numbers 144 and 145.
Road and Lidgate Crescent off it give access to an industrial area comprising large units. Half way along Langthwaite Road is a second lit and tarmaced footpath which links to Church Avenue.

3.2 The nearest pharmacy to the vacant site is that of Lloyds shown at number 1 on the map. It is a small unit next to the surgery of Dr. Chandy and Partners, a 5 doctor practice which currently occupies a former house. There is some parking outside both the shop, the surgery and the nearby One Stop convenience store. The interior of the Lloyds Pharmacy is compact with 4 chairs located at the end of the aisles, in front of the counter. There were three people and two children near the counter of the pharmacy at the time of the site visit, and the Panel members thought that in busy times the shop could become congested.

3.3 Next to the Lloyds Pharmacy is a Chinese take away and next to the surgery is the One Stop Convenience store which is of reasonable size selling a good range of food including fresh food.

3.4 South Kirkby is a discreet community surrounded on three sides by open land. It has its own church and nearby is the Town Hall, police station, small park with duck pond and memorial to miners killed in local collieries. This is the centre of the village with a dozen or so shops and businesses including a post office which lie mainly around the junction of Carr Road, Barnsley Road and Langthwaite Road. There is parking on the service road in front of some of the shops. At the time of the site visit, it was surprisingly busy. The businesses continue some way up Langthwaite Road with a hairdresser on the top floor of a 60s building, a joiners in a second block and offices next door. On the other side of Langthwaite Road are the ambulance station and the rear access to a community clinic. The housing in South Kirkby is a mixture of large areas of social or former social housing, terraced streets in the area of Mill Lane where a second post office is located, and private semi detached properties. There is also a small amount of new development scattered throughout the village but in particularly on Carr Lane. A reasonably large Co-op store is on the fringe of the village to the north of Mill Lane at the junction with Hemsworth Road with another convenience store at the north end of Mill Lane which would probably serve the large residential estate located to the west of the village. In general it appears to be a mixed community with what could be described as pockets of deprivation.

3.5 To the east of South Kirkby is the larger community of South Emsall. It has its own station and bus station at the south east end of the main street. This street has a large number of small independent shops and high street names. It is here the Boots pharmacy shown at number 4 of the map is located. The Rowlands Pharmacy shown number 3 is located on Barnsley Road further west and is a very spacious corner unit near the Netto supermarket. Between Rowlands and Netto is a road which gives access to the extensive pay and display car park (30pence for one hour). On the east side of the car park is the White Rose Surgery with its on site pharmacy (shown as number 2 on the map). This is very much a dispensary and customers are served through two hatches. There is a waiting area with seats in front of the hatches but it seemed to the Panel there was very limited over the counter medication etc available. On the same site are a dental surgery, gym, and a number of clinics.

3.6 On the opposite site of the car park is the South Emsall Health Centre which houses the surgery of Dr. Diggle and Partners and a branch surgery of the Stockinggate practice in South Kirkby.

3.7 South Elmsall is also a very mixed community with terraced houses, large areas of social or former social housing and a selection of private housing. There are more community facilities here and it has its own open air market.

3.8 Westfield Lane runs south west from the centre of South Elmsall and there is some new residential development. There is also a completed access road for what the Panel presumed is to be further development at some stage in the future. There
were no house builders’ hoardings there however so the Panel presumed this is on hold at present.

3.9 Not shown on the map is the community of Hemsworth which lies to the north west of South Kirkby. The centre of the town is dominated by a huge 24 hour Tesco store with associated car parking. Within it, at the rear of the store but visible from the turnstile in, is a 100 hour pharmacy. There are a further 3 pharmacies in Hemsworth, one of which is in the centre.

3.10 Distances were measured as follows:

3.10.1 From the Tesco store at Hemsworth to the site on Langthwaite Road was 2.7 miles as measured by the car’s odometer. It took a matter of minutes to drive.

3.10.2 From the south eastern tip of the vacant site via the footpath to Church Avenue, via Convent Avenue and then onto the Lloyds Pharmacy at Stockingate was 787 metres as measured by surveyor’s wheel which took 11 minutes to walk at a steady pace. The last part was a steady climb uphill which would not present difficulty for the reasonably fit person but might be more challenging for the older or less fit person.

3.10.3 From the Lloyds Pharmacy on Stockingate back to the site via the churchyard was 910 metres which took 12 minutes to walk. The footpath on the western side of the hill down was obstructed in part by overhanging vegetation. The pavements are not particularly wide but are lit. The route through the churchyard appeared to be well used and removed the need to walk along a section of Barnsley Road where there is only a footpath on the northern side.

3.10.4 From the proposed site to the Rowland’s Pharmacy in South Elmsall was 1 mile as measured by the car’s odometer. It took only a few minutes to drive. It would then be necessary to drive past it and park in the car park and walk back. On street parking in South Elmsall is free but the number of spaces in Barnsley Road are restricted and all were taken at the time of the Panel’s site inspection. There was very heavy traffic in South Elmsall and negotiating Barnsley Road was not straightforward.

4 The Hearing

The Chairman confirmed the Panel had undertaken a thorough site visit. She also indicated the additional documentation before the Panel.

COMMUNITY PHARMACIES (UK) LTD

4.1 In addition to the matters raised in the application, appeal, comments and further information which are found at pages 87 to 195 and 197 to 199 of the bundle, Mr. Murray and his representative Mr. Wardle and his witnesses Dr. Buckham and Mr. Firth made the following additional points in oral evidence and in answer to questions.

4.2 The Panel should have regard to the recent case in Scotland of Lloyds and National Appeal Panel. In the light of this, the Panel should not only look at what is there now but what could potentially be achieved when assessing adequacy.

4.3 The current service is not adequate not only as at today’s date but in the future given the changes proposed. There are a number of factors which whilst individually may not demonstrate inadequacy, cumulatively they do. The PCT itself found the application to be desirable.
4.4 According to the 2001 census the population of the neighbourhood of South Kirkby is 8,207 and of those households 36% have no car or van; 28% of residents suffer from a limiting long term illness 16% of residents rated their health as not good; 38% of houses are rented from a local authority or social landlord.

4.5 A new proposed health surgery has been approved in principle by the PCT Board. (A letter from the architects dated 4 August 2010 was handed in). It is intended to house two doctors’ practices with a combined list size of 12,000 patients. Other services will be on site. A detailed planning application will be submitted probably in September.

4.6 The Applicant has no financial interest in either the land or the buildings of the proposed new health centre.

4.7 If there is delay then it is the intention of the Applicant to open in premises in the shopping area to the north. There is one empty vacant unit there at present, 200 metres from the proposed site. If the surgery is progressing but not completed then temporary premises will be opened on site.

4.8 The needs of the patients will be looked at in conjunction with the surgery. It is expected services will be paid for initially by the pharmacy and then evaluated in the light of the doctors needs. It might then be funded by the joint venture.

4.9 Dr. Buckham has been a partner at the Stockingate Surgery for 2 years. The current surgery is too small to permit expansion and the building is not DDA compliant. There have been attempts since 2004/5 to find a new site and the original one on a sports field was not approved by the council. The site on Langthwaite Road was deemed to be the most suitable. The local council has indicated it is happy. It is hoped to have as many services as possible under one roof as that is what the patients have indicated they would like. Final PCT board approval should be given by the end of the year. There is no need to go out to tender as a developer is in place and it is hoped to have the surgery up and running in autumn 2011. It was important for the GPs to have control over the pharmacy in the building via a joint venture in order to make it as effective as possible for the patients. At present Lloyds is next to the surgery and there is a perception that somehow it is linked to the doctors so the doctors tend to receive the complaints about the pharmacy. The prevalent health issues in the area are diabetes, heart disease and strokes which require the patients to use pharmacies a great deal. A previous Lloyds’ manager did approach the practice with a view to a joint venture but it is not known whether he was speaking on behalf of Lloyds or on his own behalf. In view of the track record the surgery did not pursue it. She had been unaware there had been a meeting last week with the practice as a result of which Lloyds are to extend its morning opening hours.

4.10 There was some negative feedback about the choice of the Langthwaite Road site for the new surgery and issues relating to traffic will have to be overcome.

4.11 At page 96 of the bundle, there is a quote from the judge in the first instance decision of the Lloyds case. The proposed premises are within a health centre which is a relevant factor and convenience is also a relevant factor.

4.12 The distance to Lloyds from the proposed surgery is not insignificant, especially for the sort of people who will be accessing the services. It is not entirely flat and there is an incline up to the pharmacy. Those difficulties are brought out in the survey.

4.13 Whilst the drive to the other pharmacies is not difficult there is low car ownership in the neighbourhood.

4.14 At page 208 of the bundle is the decision of the appeal authority in August 2006. At 5.10 there is a reference to complaints about the existing contractor in the
neighbourhood and the fact that things had been sorted out. It is evident that complaints were ongoing after that time. From page 98 to 102 are details of the sorts of issues raised by the patient participation group and doctors. Further evidence of informal complaints are given by the PCT at page 74 of the bundle. A survey was undertaken in the last two weeks of March 2010 by an independent survey company and the form is at page 131 of the bundle. 957 comments referred to inadequate service levels at Lloyds. Since March 2010 there has been a mystery shopper result done in May 2010. What have not been provided by Lloyds are the waiting time figures or their own customer survey. Even the mystery shopper check reflects people were waiting so long that a blood pressure check was offered.

4.15 Dr. Buckham indicated that her patients on a virtually daily basis have a complaint about the pharmacy. Some are patient safety issues. These are taken up with the pharmacy and tend to result in an apology but do give rise to inconvenience. Last year, an elderly patient was prescribed antibiotics at a home visit on a Thursday and it was not delivered that day, or Friday and Dr. Buckham had a phone call late Friday afternoon indicating it could not be delivered until Monday. There are numerous instances of prescriptions being taken to the pharmacy and being mislaid. There are instances of medication not being in stock and the surgery being told it is not available. There is an extended hours surgery in South Kirkby until 9pm which is always fully booked and patients have been unable to get to a 100 hour pharmacy. Lloyds has been aware of this change for 2 years and nothing has been done. Patients have been given the Lloyds head office number but patients can’t get through and so they come back to the surgery. She has been a GP for 7 years both in London and Leeds before coming to South Kirkby. She has never had the same problems with pharmacists before.

4.16 6,000 patients from South Kirkby attend the Stockingate surgery and 1,500 patients of Dr. Diggle live in South Kirkby.

4.17 Mr. Firth said he was a member of the patient participation group and has lived in the area all his life. He is registered at Stockingate Surgery. Things started going downhill about 3 or 4 years ago. He found that going into Lloyds was worse than going to the doctor in terms of queuing. This is particularly annoying when the script was sent from the doctors two days before and either could not be found or had not been dispensed. It is quicker to go home, get the car and go to Rowlands. Not everyone can do this however. The usual response to the question “how long is it going to be?” is “5 minutes” but it invariably is at least 20 minutes. Despite that, those on methadone are served first. People are too frightened to say anything. On 17th December 2009, the script for Angitil was taken in. When he got home, it wasn’t the usual packaging so he got another script and took it to Rowlands. He went back to Lloyds to be told that Angitil was not in stock and they had issued a replacement. 30 or 40 other people could have come and complained today. Once he had offered to take people to South Emsall in view of the wait. A lot of people have no car and although the bus service is good, many people do not have the energy or ability to get on a bus. South Elmsall is too far to walk. All patients within the practice seem to have problems with Lloyds and these are taken up with the practice manager at the surgery. If an attempt is made to speak to someone at Lloyds, no-one has time to discuss the complaints. There are no complaints about Rowlands. A new pharmacy at the proposed site is a good thing. Even if a new surgery were not being built, another pharmacy in South Kirkby would be supported. There is no choice in the neighbourhood. Those who have a car can drive to other pharmacies but that is not the case for everyone.

4.18 The intention of the Applicant is to match the hours of the surgery and that will fill an inadequacy which is there already. It will also open at 8.30am and stay open at lunchtime.

THE PCT
In addition to the matters raised in the decision letter and associated documentation and the further comments which are found at pages 81 to 83 of the bundle, Mrs Wilde made the following additional points in oral evidence and in answer to questions.

The new surgery has got in principle approval from the PCT but there are a large number of issues still to be determined such as size etc. There is no objection to one of the existing pharmacies moving into the new surgery if agreement can be reached but at present there are enough pharmacies in South Elmsall and Hemsworth which include 3 100 hour pharmacies.

A previous application was refused and the PCT noted there had been no change since then. It would be useful to have a pharmacy co-located with a surgery but there is no need in this area. There is sufficient coverage of pharmaceutical services.

Services commissioned at present by the PCT are smoking cessation, EHC, turning point services, palliative care, MRSA, needle exchange, and decolonisation. There are no others planned for the area.

A new PMS contract has been written which would include a number of the additional services. If a pharmacist wished to provide a particular service then all aspects of it would be looked at. There is no gap in service.

The PCT has had telephone calls from patients expressing concern about Lloyds but when patients are advised to put it in writing, they have not wanted to go down that route. There have been no complaints formal or informal this year. If PALS receive a call, then the Primary Care Team would hear about it. The PCT has received the paginated appeal bundle but it cannot respond to patients’ concerns raised in this type of information.

There have been problems with the Tesco Pharmacy as it has been running on locum pharmacists. There is a further 100 hour pharmacy in Hemsworth as well as two other pharmacies in Hemsworth with established clientele.

LLOYDS PHARMACY

In addition to the matters raised in the representations which are found at pages 21, 71 and 196 of the bundle, Ms. Boiston, Ms. Green and Mr Campbell made the following additional points in oral evidence and in answer to questions. A submission was handed in which is listed at Appendix 2.

It would not be true to say there have been no issues in the past with regard to dispensing and staff but much work has taken place over the last 8 weeks. 22 patients have recently returned. A change has been made in the way methadone patients in that they are seen in that this is now only between 11am and 5pm during the week so they don’t clash with patients who have appointments at the surgery.

The pharmacist who was in the branch is now longer there and once the new one does start, then the provision of additional services will be discussed.

If someone wanted to make a complaint then they would be taken into the consultation area and if it can be dealt with in branch it will be. If it cannot be dealt with in the branch then the patient would be given a service leaflet which gives the address, or they could phone head office. All complaints which are not resolved are reported on the computer. Over the last 3 years, there has been involvement with a number of complaints for South Kirkby under that system. The specific complaint by Mr. Firth has not been recorded as being reported to the superintendent pharmacist.

Diabetes testing, blood pressure testing, supervised methadone, are provided and EHC will be offered when the new pharmacist starts.

In February 2010 only 1 MUR was done but over the year 380 were done. For a period the accredited pharmacist was off work due to an accident and because of his daughter’s illness. MURs were being provided outside the neighbourhood. This branch does not pass the Lloyds waiting time target.

None of the specific 5 complaints referred to in the bundle have been recorded in the superintendent’s data base.
BOOTS PLC

4.33 In addition to the matters raised in the representations found at pages 19, 20, 85 and 86 of the bundle, Mrs. Watson made the following additional points in oral evidence and in answer to questions.

4.34 The neighbourhood defined by the PCT is agreed. Whilst the railway is a boundary it is not a barrier to access. Residents of South Kirkby already access services in South Elmsall and Asda are to develop a site there as well.

4.35 There remains uncertainty as to whether the new surgery will go ahead. Whilst patients may support a new development, there is concern about its location.

4.36 The survey was commissioned in March which was between the application being submitted and before the decision was taken. The questions contained could be said to be leading and seek to advance a particular point of view. Question 7 talks about “difficulties” which does not suggest positive views can be expressed.

4.37 The Boots branch provides services to the whole area. It does not provide MRSA and palliative care. Boots delivers free throughout the whole area on a daily basis. The branch has a spacious dispensary and consultation area. There is a permanent pharmacist and a regular cover pharmacist.

4.38 Car parking on the roadside is free limited to 1 hour. There is car parking behind the carpet shop next door.

4.39 There are several bus services which run along Barnsley Road which run every 15 minutes.

ROWLANDS PHARMACY

4.40 In addition to the matters raised in the representation at page 22 of the bundle, Mr. Thomas and Ms. Roberts handed in a statement which is aside at Appendix 2. They added that car parking is available behind the South Elmsall shop.

WAKEFELD LPC

4.41 In addition to the matters raised in the representations which are found at pages 18 and 84 of the bundle, Mr. Chapman did not wish to make any other points in oral evidence.

Consideration

5.1 The Panel was mindful of the test as set out in Regulation 12(1) and the matters to which it must have particular regard as set out in Regulation 12(2). It also had to assist it the Guidance issued by the Department of Health revised in September 2009.

5.2 The Panel firstly considered the issue of neighbourhood. All parties agreed South Kirkby should be considered to be the neighbourhood. The Panel on the basis of its site visit agreed the definition given the fact South Kirkby does appear to be a community with very much its own identity. The eastern boundary is the railway line as there does seem to be an openness to the east of it which seems to be a natural break.

5.3 Within the neighbourhood as defined there is one pharmacy. It follows therefore there is no choice of pharmacy provider within the neighbourhood but that is one factor which the Panel needs to consider alongside others.

5.4 The population of the neighbourhood in 2001 was said to be something in the region of 8,000. The Panel did not think it would have increased significantly since that time. The Panel thought the level of car ownership might have increased but could not determine by how much but concluded it was still likely to be below the national average.
5.5 The Panel accepted from the statistics and the evidence of Dr. Buckham that there are many patients with long term chronic conditions and also those with a perception of ill health. This is reflected in the figures produced with the % being above the national average. To some extent the Panel’s own observations on the site visit bore out the statistics provided.

5.6 The Panel treated the independent questionnaire with a degree of caution given that it felt some of the questions were skewed towards negatives rather than positives. The Panel similarly could not view Dr. Buckham’s evidence as totally impartial as the practice is apparently to enter a joint venture with the Applicant pharmacy. Having said that she did describe particular incidents and confirmed complaints were ongoing and time consuming for the practice manager. The Panel was impressed with the evidence of Mr. Firth of the Patient Participation Group and felt he was well placed to take soundings from fellow patients. Furthermore, the PCT did acknowledge there had been informal complaints made prior to 2010 which had not been pursued because they had not been put in writing. More telling is the evidence of the witnesses from Lloyds who confirmed there had been issues in the past which have now been or will shortly be resolved with the arrival of a permanent pharmacist in two weeks time. Furthermore, the branch does not meet the Lloyds waiting time targets. There is reference in the previous appeal decision to shortcomings with the existing pharmacy but it is noted they had been resolved which does not have to have happened in practice.

5.7 The Panel was told that in the last 8 weeks the situation has improved. The previous pharmacist has left and a new one is to arrive in 2 weeks. The Panel was concerned about why it has taken so many years for the situation to be recognised and remedied. The Panel could not be satisfied that any of the proposed improvements would be implemented considering there is still no permanent pharmacist in post. The meeting with the surgery’s practice manager is belated, taking place as it did only last week. There appears to have been a lack of co-operation and dialogue with the surgery over a number of years, and the Panel felt it would take more than one meeting to build up the necessary trust and good daily working relationships.

5.8 The Panel was satisfied looking at all the evidence about the pharmaceutical services in South Kirkby that at present they could not be said to be satisfactory or inspire the confidence of a significant number of patients of the surgery. From the Panel’s own observations on its site visit, the shop is restricted. Ms. Green mentioned the branch dispensed over 10,000 a month and the Panel suspected this may have overstretched those available to provide the service and which resulted in delays at peak times.

5.9 Mr. Firth has voted with his feet and now receives what he describes as a good service from Rowlands in South Elmsall. He drives there. The Panel was mindful for those who are car borne, there are pharmaceutical services relatively close in South Elmsall and Hemsworth which between them could provide an adequate service which would include all commissioned enhanced services over very long hours. For those who choose to use either of these towns for other services, and who wish to fill a script at the same time, the Panel also considered the services would be adequate.

5.10 The Panel had concerns however that for those on foot in need of any pharmaceutical services, or health related advice there is no choice for them without catching public transport or relying on the goodwill of neighbours or family. The Panel was satisfied that only the most energetic would walk to South Elmsall.

5.11 The Panel was satisfied this is a situation where choice is relevant and weight should be placed on this factor. The Panel did not think choice from pharmacies outside the neighbourhood was a significant factor given their distance.

5.12 The Interested Parties appeared to be arguing that a pharmacy at Langthwaite Road was not central to the neighbourhood given that it is on an industrial estate. The
Panel did not agree. The site which has apparently been chosen for the surgery and where the proposed pharmacy hopes to open is towards the northern end of Langthwaite Road where the buildings between there and the junction where the rest of the shops and businesses are located could not be described as “industrial”. It would be reasonably convenient for those accessing the village services or shops in the area as well as being well placed to serve the needs of workers on the estate.

5.13 The Panel was told that even if the new surgery did not go ahead within the expected time scale the proposed pharmacy if given consent would open in any event either in temporary premises on the surgery site or in a vacant shop at the shopping centre at the Barnsley Road/Langthwaite Road/Carr Road junction.

5.14 The Panel considered that at present the pharmaceutical services could not be said to be adequate and it is expedient to grant the application. However if the Committee does not agree with the Panel’s recommendation, the Panel went on to look at the scenario of whether they would be adequate in the foreseeable future when the new surgery opens.

5.15 The Panel noted planning permission is shortly to be sought. Dr. Buckham said she hoped the premises would be open by the autumn of 2011. The Panel noted there has already been slippage in the timetable and thought the time scales tight but the Applicant indicated that if the building were not ready, temporary pharmacy premises would be opened on the site.

5.16 The Panel was cautious about “crystal ball gazing” but was satisfied the new surgery will be over 700 metres from the nearest pharmacy. The walk is not easy and either of the routes taken by the Panel members had shortcomings. The Panel noted it was suggested there would be an increase in the list size given that Dr. Diggle who has 1,500 patients living in South Kirkby would be moving into the new premises. The Panel was of the view that it could not be automatically assumed that all patients would transfer to the new site. Some people may find it convenient to change practices. On the other hand there will be other patients who may be attracted by the new facilities or it may easier to access from their home or work. On balance the Panel noted it was suggested there will probably be an increase in patients using the new surgery. It may of course be the case that some patients will be travelling from South Elmsall and will presumably be returning there and able to access pharmacies in that town. Even for them, however a co-located pharmacy could be advantageous and the Panel noted the observation by the PCT that a pharmacy in the new surgery would be desirable. The Panel concluded given all the factors as set out above, that for those, particularly on foot, the pharmaceutical services could not be said to be adequate in the foreseeable future.

6 Recommendation

Having taken all evidence both written and oral into account and on the basis of its site visit, the Panel members unanimously recommend that the current pharmaceutical services in or to the neighbourhood could not be said to be adequate either now or in the foreseeable future and it is expedient to grant the application.

J.E. Perrett (Chairman)
Appendix 1

ATTENDANCES

The Panel

Miss J.E. Perrett Chairman Mr. A. Dobson Mr. I. Sutcliffe

The Applicant/Appellant

Mr. A. Murray Community Pharmacies UK Ltd represented by Mr. N. Wardle Charles Russell, Solicitors who called Mr. N. Dr. B. Buckham Stockingate Surgery Patient Participation Group Mr. J. Firth

Interested Parties

Ms. C. Green Lloyds Pharmacy Mr. G. Campbell Mr. A. Boiston

Mr. S. Thomas Rowlands Pharmacy Ms. A. Roberts

Mrs. J. Watson Boots UK Ltd Ms. C. Zommers

Mr. B. Chapman Chairman Wakefield LPC

Mrs. H. Wilde Wakefield PCT

Mrs. P. Moss provided administrative support to the Panel
Appendix 2

ADDITIONAL DOCUMENTS BEFORE THE PANEL

1. Practice leaflets
2. Practice list sizes
3. Letter from P+HS Architects dated 4 August 2010
4. Lloyds presentation
5. Lloyds Customer First findings
6. Rowlands presentation