Regulations 5(2) and (11) and 6(3) and Schedule 1, paragraph 4

FORM A

FOR USE BY PHARMACISTS

APPLICATION FOR INCLUSION IN THE PHARMACEUTICAL LIST* (See Note 1)

TO NHS GRAMPIAN

			RRIAN AND GIOLA DERIS						
1.	<i>X</i> IWe	~/o	BRIAN AND FIONA ARRIS Unt 3 Rowan Drive, Birch way, Balmedie ASZ) 2					
	ot	/	8	35					
	apply to	apply to have my / our name(s) included in the pharmaceutical list for the provision of the pharmaceutical services specified in paragraph 4 below: the application is in respect of							
	*)&(specifi	ovision of services from premises from which the pharmaceutical services fied in paragraph 4 below are already provided (complete paragraphs 2, 3, 4 and nd sign the application)						
	* [60]	the rela	location of the premises from which I / we provide pharmaceutical services lete paragraphs 2, 3, 4 and 5(b) and sign the application)						
	(G)		pening of premises for the provision of pharmaceutical services specified in raph 4 below (complete paragraphs 2, 3, 4 and 5(c) and sign the application)						
	*1947		ovision of pharmaceutical services other than those already listed from currently premises (complete paragraphs 2, 3, 4, 5(c) and 5(d) and sign the application)						
2.	(a)	service	remises from which // we propose to provide pharmaceutical es are / will-be at						
		68 c	osite Somerfield + Blockbuster)						
	(b)	The pro	remises from which it is proposed to provide pharmaceutical services are:						
		(i)	already constructed YES/NO*						
		(ii)	already in our possession (through lease or ownership)						
			YES/NO*						
		(iii)	registered by the Royal Pharmaceutical Society of Great Britain in my / our name(s) YES/NO* (See Note 2)						
If the a comme	inswer to ence busing lear inswer to	(ii) is no, ness fron L Coc (iii) is yes	submit such further information as will indicate that the applicant intends to the premises. Head of terms agreed compilions of the premises agreed as sempling and the premises agreed as sempling the premises agreed as sempling and the premises agreed as sempling as sem						
If the a	nswer to	(iii) is no,	o, give date of application for registration Application will be made of this is	۱,					
	(c)	The ph	harmacist in charge at said premises will be :-						
			BRIAN ARRIS						
		Registr	tration Number8806 7						

2	1 / \	la undarta	ke to provide the pharmaceutical services specified below from the said premises				
3.	from (date)						
	folio	wing hour	8				
	10110	wing nou	C 1 1 9 12:20 00				
	1	<u>day</u>	friday 9-5.30pm. Schwday 9-12.30pm				
4.	1/W	Ve propos	e to provide the following pharmaceutical services, and undertake to provide such of s as may be approved by the Board in accordance with the terms of service for or the time being in operation:-				
	prio	5 1	ng of medicines, and supplying of drugs and of listed appliances as specified in the				
		Dispensi Drug Tar *Supplyi	iff ng a domiciliary oxygen therapy serviceYES/N				
5.(a)	to the least the pareons applying under paragraph (1)(a) above who are proposing to					
		(i)	The name of the person who is currently providing services from the premises named in paragraph (2) (a) above is				
			mrparagraph (e) (e)				
		(ii)	There will be no change in the pharmaceutical services provided and those services from said premises will be continuous / interrupted for the period (state period)				
		:					
	(b)	(To be applying	completed only by persons whose names are included in the pharmaceutical list gunder paragraph 1(b) above.)				
		(i)	The premises in the Board's area from which I am / we are providing pharmaceutical services are at				
		(ii)	The relocation is for the following reasons:-				
		łk.					
		(iii)	(To be completed only if the applicant considers relocation to be minor. A minor relocation is one where there will be no significant change in the neighbourhood population services, and other circumstances are such that there will be no appreciable effect on the NHS pharmaceutical services provided by the applicant or any other person on the Board's list.)				
			I / We consider the relocation to be minor for the following reasons:-				

	(iv)	There will be no change in the pharmaceutical services provided and the provision of services by me / us will be continuous / interrupted for the period of (state period)						
(c)	(To be	completed only by persons applying under paragraphs 1 (c) or 1(d) above.)						
	named	our view the provision of the pharmaceutical services specified above at the premises in paragraph 2(a) above is necessary or desirable in order to secure adequate provision maceutical services in the neighbourhood of the said premises for the following s:-						
	plea	please se separate sheet.						
(d)	(To be o	(To be completed only by persons proposing to provide other pharmaceutical services from premises from which some pharmaceutical services are already provided by them.)						
	(i) •-	My / Our NHS services shall be those pharmaceutical services granted in respect of this application.						
	(ii)	The other pharmaceutical services proposed for provision are (specify)						
		signed Sin Are						
		Date 2/7/10						
elete	the section	ons or words that do not apply.						
otes:-								

No

- Ap application on Form A will be required by any person already included in the pharmaceutical (1)list who wishes to undertake to supply pharmaceutical services from additional or alternative premises or to vary the pharmaceutical services provided from currently listed premises. The alternative Form A is for use by persons other than pharmacists.
- Please note that medicines cannot be dispensed from the premises until they are registered by (2) the Royal Pharmaceutical Society of Great Britain under the Medicines Act 1968. Although an application to be included in the pharmaceutical list (Form A) can be considered in advance of such registration, registration details or any other information required but not given on this Form must subsequently be provided on Form B before inclusion in the list is confirmed.
- Payment cannot be made for NHS services provided before the date of entry in the (3)pharmaceutical list recorded in Form C as issued by the Board.

5c) Provision of Pharmaceutical Services at New Pharmacy 68c&d Countesswells Road

The application is both necessary and desirable because the Neighbourhood population is large. There is a new housing development nearby at Kepplestone which is not finished yet and the Aberdeen structure plan has a future planning development of 3000 units to the west of the pharmacy at Countesswells. Success of the new Great Western medical practice is clear and the pharmacy would be similar as parking is easy and it would be centrally located next to the local supermarket and post office in the centre of the Seafield and Countesswells community. The primary care strategy is shaping up for services ideally located near peoples homes.