PHARMACY PRACTICES COMMITTEE

Application by Berryden Healthcare Ltd for inclusion in the pharmaceutical list in respect of the address, 6A Berryden Road, Aberdeen, AB25 3SA.

The Pharmacy Practices Committee met at 11am on Tuesday 7th October 2025 in the Board Room, Aberdeen Indoor Bowling Club, Summerhill Road, Aberdeen to consider the above application in accordance with the National Health Service (Pharmaceutical Services) (Scotland) Regulations 2014, as amended.

Decision of the Pharmacy Practices Committee

The Chair confirmed the decision had been reached on the Application. The reason for the decision was based on the following:

- The residents of Berryden had access to the full range of pharmaceutical services from those pharmacies located in the defined neighbourhood and surrounding areas, which were easily accessible by car or public transport.
- The residents have the ability to receive collection and delivery services from those pharmacies located out with the neighbourhood.
- Although it would be very convenient to have a pharmacy at the proposed address which is located in Berryden Retail Park, it was not necessary due to the ease of accessing a full range of pharmaceutical services from pharmacies located in the defined neighbourhood and surrounding area.
- It was noted the lack of response from the Community Councils who had been contacted as part of the interested party consultation period which, in the opinion of the Committee was concerning.
- No inadequacy of pharmaceutical services to the neighbourhood had been proven.

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

Pharmacy Practices Committee

Ritchie Johnson	(Chair)
Elaine Neil	(Non-contractor Pharmacist)

John Fowlie	(Contractor Pharmacist)
Barbara Lamb	(Lay member)
John Ross	(Lay member)
Miles Paterson	(Lay member)

In Attendance

Steven Brodie	(Clerk to the Pharmacy Practices Committee)
Debbie Gordon	(Observing on behalf of NHS Grampian, Primary Care Contracts)
Pamela Jack	(Observing on behalf of NHS Grampian, Public Engagement Team)
Liz Robertson	(Observing on behalf of NHS Grampian, HSCP Leads)
Susie Downie	(Observing on behalf of NHS Grampian, Primary Care Leads)

1. At 11:00 hrs on Tuesday 7th October 2025 the Committee convened to consider an application for inclusion in the pharmaceutical list, dated 7th August 2025, by Berryden Healthcare Ltd in respect of the address: 6A Berryden Road, Aberdeen, AB25 3SA. A copy of the application had been circulated in advance to the Committee and the parties.

2. Written representations had been received from the Area Pharmaceutical Committee, Rowlands Pharmacy, Webster's Pharmacy and Baird's Pharmacy. The applicant and the interested parties were entitled to comment on the representations received. Copies of the written representations were circulated in advance to the Committee and the interested parties.

   The following written representations had been received and circulated with the hearing papers to the Committee. Those identified as Interested Parties who responded during the 30 day consultation had been provided with copies of written representations and a copy of the Consultation Analysis Report (CAR):

   Email - 28th August 2025 from Lynne Davidson, Chair – Area Pharmaceutical Committee
   Letter - 5th September 2025 from Lucy Corner, Professional Support Manager – Rowlands Pharmacy
   Email dated 7th September 2025 from Steven Webster – Webster's Pharmacy
   Email dated 7th September 2025 from Nicol Baird – Baird's Pharmacy
   Consultation Analysis Report (CAR)

3. The Committee had before them maps of the area surrounding the proposed premises detailing the location of the nearest pharmacies and GP surgeries, deprivation categories and population density. They had details of the numbers of prescriptions dispensed during the months 1st June 2021 – 30th November 2021 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 1st January 2025 – 30th June 2025. The Committee were also

provided with “Pharmacy Profiles” of the nearest pharmacies detailing opening hours, premises facilities and services offered.

4. Under paragraph 5(10) of the Regulations the Committee was required to decide whether “the provision of pharmaceutical services at the premises named in the application is necessary or desirable in order to secure adequate provision of pharmaceutical services in the neighbourhood in which the premises are located by persons whose names are included in the pharmaceutical list.”

5. It had been confirmed prior to the meeting that the members present did not have an interest to declare.

6. The Committee agreed to invite the applicant, **Dawn Ferguson**, **Berryden Healthcare Ltd** and those who were present who had made written representations to attend before them. They were:

Applicant

Dawn Ferguson assisted by Keiron Paterson	-	Berryden Healthcare Ltd

Interested Parties

Steven Webster	-	Webster’s Pharmacy
Nicol Baird	-	Baird’s Pharmacy
Dane Winterburn assisted by Marie Foulton	-	Rowlands Pharmacy

The Open Session Commenced at 11:10hrs

7. The Chair began by welcoming everyone to the hearing and introductions were carried out. At this time the Chair advised all present that the meeting would be digitally recorded to ensure an accurate record of the hearing was obtained for the purposes of the minute. This digital recording would be deleted once the minute had been approved by the Board. No-one present objected to the hearing being digitally recorded.

8. The procedure adopted by the Committee was that the Applicant made an opening submission to the Committee, which was followed by an opportunity for the 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 Chairman asked all parties if they felt that they had had a fair and full hearing. They confirmed that they had.

9. Prior to the hearing, 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.

   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 proposed pharmacy premises would be located.

Adequacy of Existing Pharmaceutical Services and Necessity or Desirability - Applicant

10. **Dawn Ferguson, Berryden Healthcare Ltd**

Introduction

Good Morning and thank you for the opportunity to present this application. My name is Dawn Ferguson, and I am a community pharmacist with 14 years of experience. For the past five years, I have also been practising as an independent prescriber. Today, I am here to present my proposal to establish a new community pharmacy at Unit 6a, Berryden Retail Park.

The Legal Test

As you are all aware, the committee must consider two questions today:

1. **Is the current provision of pharmaceutical services in the Berryden neighbourhood adequate?**
2. **If not, is granting this new pharmacy contract necessary, or at least desirable, in order to secure adequacy of services?**

Neighbourhood

I'd like to start by talking about the neighbourhood. As you can see in Appendix 1, the Berryden neighbourhood is bounded by Cattofield Place to the north, George Street and Great Northern Road to the east, Westburn Road and Hutcheon Street to the south, and Westburn Drive to the west. Defining neighbourhood boundaries in inner-city areas is not straightforward, especially when a retail park is involved. Berryden Retail Park is already a central hub for Aberdeen, attracting thousands of people each week for shopping and other necessary services. As a result, the catchment area served by the retail park is significantly larger than the neighbourhood I have outlined. Indeed, the PPC may decide that the 'neighbourhood' in question is much larger than that

proposed, especially in light of the intended opening hours. It is for this reason that I will not dwell too greatly on defining the neighbourhood.

Berryden is home to just over 9,000 residents (see Appendix 2). Right across from the retail park, the Westburn Gardens development has added hundreds of family homes with many now occupied. That means real, growing demand for pharmacy services. Nearby, the Berryden Mills provide homes for people over 55 and those with long-term conditions, a group who rely heavily on local pharmacies. So, Berryden doesn't just have the numbers, it has the population profile that makes a new pharmacy both necessary and sustainable.

Until 13th June 2023, a Lloyds Pharmacy operated within the Sainsburys supermarket at Berryden. It was extremely well used and valued by local residents, and since its closure, the public have repeatedly raised the absence of a pharmacy in Berryden as a real concern. The feedback from the public consultation makes it clear: this is a service gap that the community wants and needs filled. As seen in the Consultation Analysis Report (CAR), there is overwhelming support across all responses for the return of a pharmacy to the Berryden neighbourhood. To quote directly from page 6 of the report: *'The closure of the Lloyds Pharmacy within Sainsbury's, Berryden Retail Park, is repeatedly cited as a significant loss. The pharmacy is seen as essential, especially for elderly residents, families with young children, people with disabilities or mobility issues, NHS staff and shift workers. Many described the pharmacy as "much needed," "desperately needed," and "long overdue."* End quote.

Is the current provision adequate?

To establish whether current provision is adequate, a public consultation was widely shared through local Facebook pages, at community councils, in local businesses, and to residential homes. It is important to recognise that the catchment area of Berryden Retail Park extends well beyond the neighbourhood boundary, meaning patients from further afield would also look to access pharmacy services here. The strong level of participation in the consultation suggests that respondents were genuinely motivated to take part. We are all frequently asked to complete surveys and provide feedback, but how often do we actually do so unless it relates to something we feel strongly for or against?

The answers given by the public were used to establish whether there was a genuine gap in provision left by the closure of Lloyds.

The results provide clear and compelling evidence that the current provision is not nearly adequate and there is an overwhelming need for an additional pharmacy. Individuals reported a wide range of difficulties with their current pharmacies in the area (see Appendix 3).

- 149 reported poor availability of products
- 252 reported medicines not in stock
- 152 reported that their current pharmacy was difficult to get to

- 280 reported difficulty finding parking
- 157 reported long waiting times
- 87 reported poor customer service
- 321 respondents highlighted inconvenient opening times

The responses strongly indicate that the existing provision is not meeting the needs of the local population.

A strong theme that came through in the consultation was accessibility. People repeatedly raised concerns about how difficult it is to reach existing pharmacies in the area. They highlighted the lack of parking at nearby sites, the long travel times involved, and in some cases even needing to take two buses. What patients said they really need is a pharmacy that is easy to get to, one with good parking, central access, and close to public transport links. This feedback demonstrates that existing pharmacies are not currently meeting these basic accessibility needs for the Berryden community.

The Scottish Government vision is to have a pharmacist prescriber in every pharmacy by 2030. While some pharmacies in the area have prescribers, albeit, part time, a member of staff at Rowlands, the nearest pharmacy, confirmed they do not. When contacted at 16:42 on 4th September the caller was informed that very few local pharmacies have prescribers and was advised instead to contact her GP. This example clearly demonstrates how the lack of independent prescribing services in the area directly adds to the workload of already overstretched GP practices.

The overwhelming majority of respondents highlighted specific problems that clearly show inadequacy of current provision. Some patients felt so strongly that they wrote letters (see Appendix 4 and 5) describing the difficulties they have faced **since having to change pharmacies** following the closure of Lloyds. They wrote about long waiting times and the need to make repeated visits because their prescriptions were not ready.

It is common for Interested Parties at such hearings to attempt to discredit the CAR, arguing it is irrelevant or inapplicable to the defined neighbourhood, for example because it includes responses from residents out with that area. To address this, I refer to Lord Lake's ruling in *Abbey Chemists v The National Appeal Panel* (February 2025). In that case, the PPC adopted a neighbourhood definition differing from that proposed by the applicant. The challenger**,** opposing the pharmacy application, argued that the PPC should not have relied on the findings in the CAR, as it did not align with the applicant's neighbourhood definition. The Court, however, confirmed that it was within the PPC's discretion, as the expert committee, to consider any evidence they deemed relevant. Given that the applicant had provided additional evidence consistent with the CAR's findings, the Court found it entirely reasonable for the PPC to treat the CAR as supporting evidence for their decision.

With this in mind, I'd like to bring your attention to appendices 6, 7 & 8, in which a local GP and a GP practice manager identify similar issues to that identified in the consultation analysis report.

Starting with Appendix 6, Rebecca Thomson, Practice Manager at Westburn Medical Practice, has confirmed that she does not feel the current pharmacy provision in Berryden is adequate. She has raised concerns following significant feedback from both patients and staff about certain pharmacies failing to provide an acceptable standard of service. She believes that a new pharmacy would resolve these issues.

Going onto Appendix 7, Specialist Pharmacist in Substance Use and Medicines, expressed concern regarding the lack of seven-day pharmacy provision, highlighting that this gap can pose significant risks to patient safety. She explained that individuals commencing substance misuse programmes are at particularly high risk of overdose, and it is important and much safer for them to attend a pharmacy where opioid replacement therapy can be supervised 7 days a week.

Likewise, Dr. Cooper, GP Partner at Old Machar Medical Practice, has highlighted the increasing pressure on local pharmacy services since the closure of Lloyds in 2023. He noted that many pharmacies are already working at full capacity and are unable to take on additional patients for essential services. Dr. Cooper has also received numerous reports from patients and staff expressing dissatisfaction with current pharmacies, particularly in relation to accessibility, waiting times, and restricted opening hours. He has stated that these constraints have led to delays in treatment and additional workload for the GP practice team. (See Appendix 8).

Together, the public consultation feedback, the experiences of pharmacy users, the professional evidence and support from the local MP (see Appendices 4 through to 10) point to a consistent and compelling conclusion: current pharmaceutical services in the neighbourhood are inadequate and are not meeting the needs of the community.

Provision of Emergency Hormonal Contraception (EHC), also known as the morning after pill, is one of the services most in demand by extended hours pharmacies, especially on Sundays.
This can be demonstrated with reference to the figures for the provision of EHC from pharmacies who open on Sundays, compared with those that don't. You'll find this in Appendix 12, which spans 4 pages.

Over the past year, Boots in Union Square and Boots in the Bon Accord Centre each average around 80 provisions per month. However, Superdrug, which is minutes away averaged only 3 provisions per month. This can be accounted for by the fact that these Boots pharmacies are open on Sundays and Superdrug does not.

Looking at the pharmacies closer to the proposed premises, Baird's average 8 provisions per month, Rowlands 8, Boots Forresterhill 3 and Webster's 2.
Before they closed, Lloyds at Berryden were averaging around 25 provisions per month.

What these number prove is a clear correlation between use of this vital service and extended opening hours. The lack of pharmacy within the neighbourhood catering for this demonstrates an inadequacy in this particular pharmaceutical service.

So will granting a new pharmacy contract secure pharmaceutical adequacy in the Berryden neighbourhood?

The legal test asks whether granting this contract is necessary or desirable to **secure** the adequate provision of pharmaceutical services in the Berryden neighbourhood. The word ***secure*** is important as it means adequacy must not only exist now but also be sustainable into the future. For that reason, I understand the Committee must consider whether granting this application could affect the viability of existing contractors. If another pharmacy were to close as a result, adequacy could not be considered secure. However, I would like to highlight again that there was previously a pharmacy operating in Berryden, and during that time the surrounding pharmacies remained viable. This shows that the area can sustain another pharmacy without destabilising existing contractors. Re-establishing a pharmacy here would therefore strengthen local provision, rather than undermine it, and would help to secure adequacy of services both now and in the years ahead.

Some of the Interested Parties have referred to the costs involved in the extended opening hours I have proposed. One has even gone as far as suggesting the PPC should ignore the proposed hours as I could, theoretically, apply to reduce the hours at some point in the future.

I can reassure the panel that I have no intention of reducing operating hours. I firmly believe in making pharmaceutical services as accessible as possible. There are only 4 pharmacies south of the river Don which open past 6.15pm or on Sundays (see Appendix 9). There is a huge area of the city with poor access to pharmaceutical services at these times and, while I would not be expecting to process many prescriptions on a Sunday, changes to the pharmacy contract have meant that prescriptions are no longer the primary source of profit for a pharmacy. I believe people will come to Berryden from further afield because it is accessible and my business plan takes that into account.

I have the backing of an experienced contractor, who has successfully opened new pharmacy contracts in the past and I doubt he would be putting his money into this if he was anything less than certain that the proposed pharmacy would be viable.

Responses to Interested Parties

Having read the statements submitted by the Interested Parties, I would like to address them in turn.

Rowlands Pharmacy.

There is a suggestion that I have deliberately defined the neighbourhood to exclude other pharmacies. This is not the case, but is, in any case, irrelevant as the PPC should consider pharmaceutical services from both within and *to* the neighbourhood, as determined by Lord Carloway in *Sainsburys v National Appeal Panel, (2002)*, which I'm sure the PPC will all be familiar with.

Webster's Pharmacy.

I found some of the statements made here to be contradictory.
The contractor believes the proposed pharmacy "*would have a catastrophic effect on Webster's Pharmacy Hilton",* yet previously stated that the Lloyds pharmacy which closed served a much wider population from all over Aberdeen and he did not see a significant increase in prescriptions when it closed.
In my experience, patients tend to use the same pharmacy in the way they use the same doctor or dentist or even hairdresser. They would only have reason to change this if they are unhappy about their existing provider in some way. Especially when you consider that the vast majority of patients have an arrangement where the pharmacy collects their prescription from the surgeries and dispenses them. If this contractor is so concerned that his existing patients will leave to go to a new pharmacy, this perhaps demonstrates that the existing service provided is not adequate.

Baird's Pharmacy.

The interested party highlighted some concerns regarding the viability of other pharmacies in the area, citing the average number of monthly prescriptions dispensed as 7,800. Averages are unreliable metrics, affected disproportionately by extremely high dispensing figures, such as those at Baird's. The *median* number of prescriptions dispensed is perhaps a fairer figure to use for these purposes. In March 2025, this was 6,656. However, prescription numbers have little bearing on the viability of a pharmacy, as much of the income comes from service provision. With current NHS turnovers well over £1m in the local pharmacies, the interested parties are nowhere near the level where their future viability should even be called into question in this context.

Turning to his own pharmacy, the contractor states that there was no discernible increase in prescriptions at his pharmacy following the closure of Lloyds. He claims this cannot possibly be due to poor levels of service, reasoning that his is the busiest prescription pharmacy in Aberdeen. However, this judgement is flawed: the number of prescriptions dispensed by a pharmacy says nothing about its service quality, just as the number of pupils enrolled in a school does not indicate it is the best school. In fact, the perceived busyness of this pharmacy may itself have been a reason for patients to go elsewhere. Perhaps they were already too busy to cope with additional prescriptions, or it may be that Baird's Pharmacy was not accessible for the former Lloyds patients. These reasons would imply an inadequacy of provision.

Lastly, the contractor suggests that if there is an inadequacy of pharmaceutical services

during hours not currently covered by the existing local pharmacy network, the Health Board should resolve this by introducing a rota system rather than by granting this application. However, the legislation does not permit such an approach. Where the Health Board, acting through the PPC, determines that an inadequacy exists, they must grant the application if doing so will address that inadequacy. This principle is confirmed by Lord Drummond Young in *Lloyds Pharmacy Ltd v National Appeal Panel* (2004), from which I quote: "The decision-maker must also bear in mind that the critical question at this stage of its reasoning is the adequacy of the *existing* provision, not the adequacy or desirability of some other possible configuration of pharmaceutical services in the neighbourhood". Local contractors could simply choose not to participate in any proposed rota system, therefore the contractor's suggestion should not influence the PPC's decision, as it represents merely another *possible configuration* of pharmaceutical services.

Conclusion

To conclude, I would like to circle back to the two questions we must consider under the legal test:

1. **Is current provision in Berryden adequate?**

In the 2004 case I have just mentioned, the Court advised that adequacy should be treated as a binary test: "there is no room for different degrees of adequacy, or a spectrum of adequacy. Either the pharmaceutical services available in a neighbourhood are adequate or they are not."

I believe I have provided a significant amount of evidence from a variety of sources which proves, beyond doubt that current pharmaceutical service provision is not adequate.

2. **Would granting this application secure adequacy?**

Establishing a pharmacy at Berryden will restore essential services at extended opening times, improve accessibility, relieve pressure on GP practices, and ensure sustainable provision for the future. Correctly applying the legal test, I believe the PPC should grant this contract. Thank You.

Questions

11. The Chair invited questions to the Applicant from the Committee and Interested Parties.

12. **In Answer to Questions from John Fowlie, Professional Member of the PPC**

- John Fowlie makes reference to question 9 from the CAR: "Have you experienced any of the below challenges with your current pharmacy? Select all that apply." Going on to ask the applicant if this was a question that they have

chosen to include which had multiple choice answers rather than give their own suggestions off of the top of their head?

Dawn Ferguson confirmed that yes she chose the question and it's responses which included the option to state there was no problems at all.

- John Fowlie states that he found it strange that the letters in support, (Appendix 4 and 5) were all dated from September 2025 but that the CAR finished in May 2025. Suggesting these have not come through the process of the CAR and have just been obtained at a later date.

  Dawn Ferguson replied that this is just evidence which came to light after the CAR process had been concluded. Believed it would be beneficial to include this evidence to back up the findings which the CAR highlighted already.

  John Fowlie says that again, the dates in question are 2nd September, 3rd September, 4th September, 9th September which is a very narrow window for all of this to come in. But asks the applicant if she went looking for this evidence as such?

  Dawn Ferguson says that she did go looking for evidence to back up the CAR.

  John Fowlie asks how this approach was then made to independent members of the public to put a letter in?

  Dawn Ferguson states that she heard the individuals were having issues and asked if they would be happy to put it in writing as she was currently applying to open a new pharmacy in Berryden and their concerns would be relevant to include in the application.

  John Fowlie confirms this was therefore not in the CAR and did these individuals participate in the CAR?

  Dawn Ferguson confirms this is completely separate to the CAR but that these individuals may well have completed the CAR previously but this is not identifiable.

  John Fowlie wants to pick up on the letter from Dr Cooper from Oldmachar. A couple of things, firstly, Oldmachar Medical Practice is based on King Street which would not affect the pharmacies of the defined neighbourhood? But also Oldmachar have two practices with one being in Bridge of Don as well. Would their comments reflect on the interested party pharmacies which are here? Dawn Ferguson states that Dr Cooper was made well aware of the proposed site and that it applied to the Berryden area, so he knew that his comments are not referring to services in Bridge of Don.

John Fowlie says that even the Oldmachar practice on King Street, their day to day dealings would not necessarily be with pharmacies which are interested parties in this case.

Dawn Ferguson states that Dr Cooper got feedback from the members of the public and own staff who are seeing instances on a day to day basis which apply to interested parties present.

John Fowlie says that he would not consider a pharmacy such as Websters would be one that would deal with Oldmachar to a large extent.

Dawn Ferguson says that if you look at the distribution of pharmacies where patients obtain their prescriptions from, it is all over Aberdeen. Not necessarily just pharmacies which are next to their GP practice. Adding that NHS Grampian included the practice in the process.

13. **In Answer to Questions from Miles Paterson, Lay Member of the PPC**

- Miles Paterson points out that one or two of the submissions which do not appear to have any date on them at all. Which concerns him slightly.

  Dawn Ferguson states that this information can be found out for the committee.

  Miles Paterson question is then is why the dates are not included in the first place? Not trying to be difficult it is just a question.

  Dawn Ferguson asks which submission is being referred to.

  Miles Paterson states that the submission from the Westburn Medical Practice manager, Appendix 6, has no data at all.

  Dawn Ferguson explains that it is from an email and when extracting the screenshot for the appendix, she has clipped off the email header which included the practice managers email address which would have shown the date it was sent.

  Miles Paterson refers to another submission where the same has happened and that this could have included critical information the PPC may look for.

14. **In Answer to Questions from Elaine Neil, Non-Contractor Member of the PPC**

- Elaine Neil refers to the earlier comment that people have repeatedly raised the need for a new pharmacy, had any of that happened prior to the CAR process or was this all raised as part of the CAR survey?

  Dawn Ferguson replies saying that she works quite locally to the area and when Lloyds first closed she noticed a few prescriptions coming in that had Lloyds as the preferred pharmacy. By means of conversation, patients had raised concerns about Lloyds closing and that this was not their usual pharmacy. Which is how this has application has all come about.

15. **In Answer to Questions from Dane Winterburn, Rowlands Pharmacy**

- Dane Winterburn asks where the suggested population of 9,000 is from? As this is not the figure he has got.

  Dawn Ferguson advises that she has used a population mapping tool. And was based on the roads that have been defined as the neighbourhood boundaries.

  Dane Winterburn asks if that is specific to the neighbourhood because according to the government website source he has a population of 3,451 but acknowledges this is not exact but highlights a big difference in the figures.

  Dawn Ferguson explains how the 9,000 was put together using the mapping tool using streets and not postcodes.

  Dane Winterburn asks how the applicant came to obtain the letter in her Appendix which is dated outwith the 90 day CAR period. Was is offered or was it canvassed?

  Dawn Ferguson states that the support was offered and these are not people she knows personally so there was no canvassing of support. These were patients who used Lloyds Pharmacy who have since been forced to find a new pharmacy and are passionate about it.

  Dane Winterburn refers to Appendix 5 and the reference to prescriptions not being ready to collect. Does the applicant know why that is?

  Dawn Ferguson says that the patient in this example was really frustrated by this point and believes this is what fuelled her to put it in writing. She has had to return to the pharmacy or send someone else on her behalf three times for a repeat prescription that should be kept in stock.

  Dane Winterburn asks what the medication was that was out of stock and Dawn Ferguson reiterates it was a common CMS repeat prescription and was not appropriate to discuss a patients medication further.

Dane Winterburn in relation to Westburn Medical Practice asks which pharmacy has the market share there? Dane has put Boots of Westburn Road at 26% so it is ashame they are not here today.
Dane Winterburn asks if the concerns which have been raised from patients and staff have been raised with the Health Board or if it is just general chit chats?

Dawn Ferguson says that she thinks patients would very rarely raise their concerns to the health board. They would more likely raise that in a pharmacy, questioning if patients would know how to raise concerns with the health board.

Dane Winterburn goes on to state that the pharmacy market share in relation to Oldmachar Medical Practice is Asda and Portlethen, however, the board have later identified that this would be relevant to the Bridge of Don branch as both pharmacies referred to are in Bridge of Don and therefore not the defined area nor considered to be interested parties, thus irrelevant.

Dane Winterburn refers to several pharmacies being said to be at full capacity. Has this concern been raised to the health board as a complaint or a concern?

Dawn Ferguson says that as far as she is aware it has just been the practices who have raised their concern.

Dane Winterburn highlights that in appendix 12 relating to EHC's not all of the pharmacies referenced are here today as interested parties so what is the purpose of including these figures?

Dawn Ferguson states that interested parties are identified by the health board. The purpose of including the information was to show that 7 day pharmacies have a much higher provision of EHC than those pharmacies who do not open on a Sunday.

Dane Winterburn asks if the EHC figures are an average number because earlier in the applicants presentation she states that averages are an unreliable metric.

Dawn Ferguson explains that when referring to averages over different pharmacies that can be affected by extreme highs and extreme lows, but this was in relation to an average within the same service.

Dane Winterburn refers to a statement made in the appendices from a Matthew Carter referring to the fact it would be great for families with kids. What evidence is there that those with kids are having difficulties accessing pharmacy services?

Dawn Ferguson advises that she believes Matthew was one of those who attended a community council meet and that was feedback which had been provided. There is no evidence as such but I would assume having car parking, mother and child spaces for example, would be a lot easier for families with

children I do not think that any other nearby pharmacy have that car parking facility.

Dane Winterburn refers to the existing business within the premises address.

Dawn Ferguson states that the current business is awaiting the results of the hearing before the business closes down. The application states that the pharmacy business would begin within 6 months of the hearing result and so the existing occupiers would exit within 2 months which would allow time for a shop refit to occur.

Dane Winterburn asks what the dimensions of the premises are.

Dawn Ferguson provides the dimensions and states that it is 101 square meters on the ground floor and then 49 square meters in the basement.

Dane Winterburn questions is there was a more suitable location or was the location chosen as a result of patient footfall or patient demand?

Dawn Ferguson states that the main factor was that there has been a pharmacy in the retail park previously so that is where she chose. The premises is only a few doors up from where the previous pharmacy was. That is why it was chosen.

Dane Winterburn asks how many prescription items does the applicant predict will need to be dispensed to ensure viability?

Dawn Ferguson refers to the presentation where it was stated prescriptions are not the main profit for a pharmacy anymore, it is service provision.

Dane Winterburn asks how many pharmacists will be employed?

Dawn Ferguson advises that there will be 2 pharmacists. The applicant herself, and another pharmacist who has a young family who finds it difficult to work during the normal 9 to 5 working week. So evening and weekend shifts are actually ideal for her. So there will be 2 pharmacists to start with.

Dane Winterburn asks how the applicant plans to invest in the staff and services provided?

Dawn Ferguson states that all staff in a pharmacy need to be trained to a certain level, so would receive training as they would in any other pharmacy.

Dane Winterburn asks if there will be a delivery service offered and will it be limited to the defined area and how will delivery patients be sought?

Dawn Ferguson confirms there will be a delivery service which will not be limited to defined area. If a patient enquires within the pharmacy.

Dane Winterburn asks how the applicant would circumvent medication shortages.

Dawn Ferguson says that every pharmacy would be in same boat when it comes to medication shortages and does not see relevance to the hearing.

16. **In Answer to Questions from Steven Webster, Websters Pharmacy**

- Steven Webster highlights that he can find 6 late night pharmacies within a 3 mile radius of a very dense area, 2 of which are within 1 mile. On a Monday to Saturday afternoon there is no services on offer which differ from what is already on offer other than inhaler and insulin.

  Dawn Ferguson asks which 2 pharmacies are within a 1 mile radius?

  Steven Webster confirms these are Morrisons and Boots.

  Dawn Ferguson asks if he knows if either pharmacy have a prescribing pharmacist?

  Steven Webster says he does not know but there is no requirement for them to do so and next year it will be in place due to requirement so it is a short window of opportunity to be above what these pharmacies already offer.

  Steven Webster makes reference to the population being described as 9,000 and how it will not impact other pharmacies in the area. But if the population is closer to 3,000 as suggested by Dane Winterburn earlier, would that still be the case?

  Dawn Ferguson points to the response letter from Websters suggesting that a lot of the footfall may come from further afield and have previouslt stated that prescription levels did not increase following closure of Lloyds. So does not imagine Websters or other surrounding pharmacies would see a massive decrease in prescription service.

  Steven Webster asks how it was validated that those responding to the CAR live in the defined neighbourhood. Steven Webster states that he was aware of a number of people who replied to the CAR off the back of Facebook posts from areas as far as Peterhead, so how is it validated?

  Dawn Ferguson advises that it was shared through Facebook groups to raise awareness of the consultation. It was made very clear, when you clicked on the consultation survey what it was about and that participation was voluntary. If

people did not find it relevant to them they would not spend their time completing it and providing comments.

Steven Webster asks which Facebook groups the consultation was shared in and were they within the neighbourhood or were they from random people or to the applicants friends?

Dawn Ferguson says that it was shared in surrounding areas of the Berryden neighbourhood which she felt were relevant. The PPC need to consider resident population and transient population so it is important to capture all views.

Steven Webster asks if people in Peterhead should have an opinion?

Dawn Ferguson states that she did not share this with anyone in Peterhead. Since it was a joint consultation with the health board, these questions may be more appropriate to be brought up with them if there are concerns.

Steven Webster asks if the support which is dated after the CAR process was canvassed or if they were offered? Did applicant approach them or did they approach applicant?

Dawn Ferguson advises that she was aware these people had strong views and those with such views were willing to put it in writing but not directly asked.

Steven Webster refers to Appendix 9 which he states applies to one of his pharmacies and asks how that has come to the applicant via email?

Dawn Ferguson states that it originates from a Facebook post where 4 other people have commented on similar experiences from this pharmacy.

Steven Webster highlights that Appendix 9 contains an “alleged” error and is limited on what can be disclosed for patient confidentiality. The patient appears to have contacted the applicant directly on her NHS email account and it appears therefore that the applicant has made an approach to a member of the public to discuss what appeared on a private Facebook post. Was this in relation to patient safety or in the interest of promoting the application?

Dawn Ferguson felt that it was additional evidence which supported the application. It was made clear that it was completely optional and they did not need to put anything in writing if they did not want to, but they opted to.

Steven Webster states that an assumption has been made that a dispensing error was made.

Dawn Ferguson says that it was just off the back of the Facebook post content along with the 4 other comments of similar nature.

Steven Webster asks if it would be fair for the applicant to share what was asked in the email reply. Since the incident has been shared with the PPC to their detriment and the pharmacy was not asked for their version of events. The applicant has only taken the word of a Facebook post.

Dawn Ferguson states that thy don't want to dwell too much on one case, it was more to back up findings from the CAR, supporting the idea that existing pharmacies are overworked, with mistakes being made as a result of this and that is why it was included.

17. **In Answer to Questions from Nicol Baird, Baird's Pharmacy**

- Nicol Baird points out that it states on page 1 of the CAR that the applicant had a responsibility to work with the health board to undertake the CAR process. Is it fair to say that the applicant would have wished to undertake the CAR in a way that met its aims?

  Dawn Ferguson says that she undertook the CAR to the best of her abilities, gain insights from the public to see if this was going to be a viable opportunity for her. The applicant is in a good job at present and did not want to risk that if this was to be a pointless exercise and if the public did not want to see a new pharmacy.

  Nicol Baird states that the first aim of the consultation was to assess the views of local people as to whether they believe there was an adequate access to pharmacy service within the neighbourhood identified. With that in mind, does the applicant regret going onto Facebook and posting "Can you give this QR code a scan and fill in the survey please? Would mean a lot to me."
  Use of the QR code then bypassed the NHS Grampian information page which states that the consultation survey is to establish the views of local people. Maybe the applicant should have made reference to the NHS Grampian information so that they realised the specifics of what was being established. For all we know, everyone who filled in the survey via the QR code were ineligible, all of them.

  Dawn Ferguson reiterated that she did deliver flyers to all homes in the neighbourhood and is confident the majority of responses to the CAR did come from the defined neighbourhood. Even with the QR code, one of the very first sentences in the CAR states that the survey applies to the defined area.

  Nicol Baird asks if the data around EHC was obtained from Pharmdata as the figure was found to be 17 rather than the 25 mentioned.

Adequacy of Existing Pharmaceutical Services and Necessity or Desirability – Interested Parties

The Chair invited Steven Brodie to make the representation on behalf of the Chair of the Area Pharmaceutical Committee (APC), Lynne Davidson.

18. **APC**

Steven Brodie on behalf of Lynne Davidson.

- Apologies that I am unable to attend the hearing due to annual leave.I wish to be clear that the although the applicant is a current member of the APC, she was excluded for comment on the application and there have been no discussions involving the application at any APC meeting in her presence (other than to share the group feedback on the application which she already had received from PCCT by this point in time).
  The application was shared with all APC members [excluding the applicant] for email (rather than in meeting discussion) consultation due to the fact that the date at which the application was shared and feedback required fell out with our normal meeting schedule. Members then fed back to myself to collate the responses and allow group feedback to the PCCT.
  I received no negative responses from APC members in regards to overall support for the application. Members specifically commented on the longer weekday and weekend opening hours, and welcomed this addition to pharmacy services within the city as a whole (although it is not clear from the application how long a prescribing pharmacist would be available/exact available hours of the defined pharmacy services. We would welcome confirmation from the applicant whether these enhanced services would be available out-of-hours).
  There was also comment on the accessibility for delivery out-of-hours services, which could, of course, be accessed from across the city.
  Given that the above bucked a recent trend of pharmacies applying to reduce their hours, particularly at weekends, there was some concern amongst the group regarding sustainability, and we would welcome confirmation from the applicant that this has been carefully considered. Staff availability has been often cited as a reason for these hours requiring to be reduced, and so it would be helpful to have confirmation that appropriate staffing is available and can be sustained.
  The only other concern which was raised was around the availability of premises, which was not clear from the application itself. This concern has already been addressed by the PCCT (our submitted feedback received email confirmation of this).

  I have included some specific comments received from APC members regarding the application below:

- *[I] feel the services and hours proposed meets local needs and gives patients/people a choice, particularly with evening/OOH GMED prescriptions and also access to IP prescribing in line with the intended provision of pharmacy first plus*
- *The public consultation shows a need for the pharmacy, and the extended opening hours would be welcome*
- *Berryden was a busy pharmacy and very accessible out of hours - I like that [the applicant] is looking for late night and weekend opening.*
- *While the late opening and weekend opening are desirable, my question to the applicant would be is it sustainable? When we are seeing trends towards weekend closures and requests for reduced hours, with staffing often cited as a reason, it is great to see a pharmacy try to buck the trend, but will the request for extended opening be a strong reason it gets approved only for us to receive a request for reduced opening times after opening?*

19. **In Answer to Questions from Lynne Davidson, APC Chair**

- Dawn Ferguson reiterated that it is not the intention at all to apply to reduce opening times. Applicant wants to make access to pharmaceutical services accessible and believes that is where there is a gap in extended opening hours. Have already identified another pharmacist who would join and is also a prescriber. Services would be available throughout the opening hours. Concerns relating to the premises have been addressed as a letter from landlord and leaseholder has been provided stating approval for the use of the unit for a pharmacy.

The Chair invited Dane Winterburn to make the representation on behalf of Rowlands Pharmacy

20. **Rowlands Pharmacy**

- Thank you for allowing me to represent Rowlands Pharmacy today. I would like to make the following comments on the application.

  We do not believe a gap was created when Lloyds in Sainsburys closed. For the last two years ourselves and other local contractors have been collectively supporting patient's both inside the small defined neighbourhood and the much wider area of Aberdeen who travel to Berryden Retail Park for shopping and leisure.
  There are 18 pharmacies within 1 mile according to NHSinform.scot. Offering a variety of opening hours, We believe more of these contractors should have been included in this application as interested parties. We also believe the long proposed opening hours for 71 per week to be unsustainable, and suggest these would later be reduced in line with Grampian’s model hours scheme. And have just been proposed in order to attempt to secure the application.

We disagree with the small neighbourhood which has been proposed. Obviously, the neighbourhood has been deliberately designed to remove other local pharmacies from it. Also we notice that a large proportion to the south east is park land. And another significant area to the south is taken up by Royal Cornhill Hospital footprint. We also do not see within the defined neighbourhood where any additional housing would be able to be developed as stated as part of the application. We believe the population the Berryden Retail Park serves to be much larger, and therefore by default any retail outlet operating in this area would cover the same broad population. We have many observations regarding the CAR. The information has only been provided in summary, which makes review difficult as full comments are not provided. Only complete responses should be counted a total of 708. No data is collected about if the person is responding lives within the neighbourhood. Concerns regarding the distribution outside of the proposed catchment area, meaning that response rate is further drawn into question. And is not representative of the views of the proposed neighbourhood. CAR mentions proposed location praised for being close to residential areas, including Rosemount and Northfield, which are outwith the area, agreeing with our statement regarding the 'neighbourhood' of the retail park. Comments relating to the loss of Lloyds, which we would like to remind the committee was over 2 years ago. Ease of accessing pharmacy services suggests a convenience not necessity. The Berryden Retail Park described as a "Well connected hub", again implying that service would encroach on patients who reside in other neighbourhoods. Not all services advertised were NHS services. Which was not fully explained during the application and could be misleading. The committee must consider provision of NHS services when considering necessity and desirability. Boots were mentioned by name, but not included as an IP. (Confirmed by Boots) We also note the applicants' comments relating to the services that the new pharmacy is proposing. Most, if not all of these are available locally and, if patients are not aware that this is the case, then we would suggest that the Health Board and Scottish Government have a role here (alongside contractors) in promoting what patients and customers can expect from their pharmacy. Rowlands Pharmacy would be willing to pick up any additional services if commissioned by the local Health Board. Given the number of pharmacies surrounding the proposed location, and the lack of evidence included in the application information we have received so far, we find it difficult to conceive that a new pharmacy is necessary or desirable in Berryden Retail Park.

21. **In Answer to Questions from the Committee**

- John Fowlie refers to the statement that there is 18 pharmacies within 1 mile according to NHSinform.scot and asks if that is a distance "as the crow flies"?

  Dane Winterburn confirms this is just the information available on the NHSinform.scot website.

John Fowlie states that this is not how NHS Grampian identifies interested parties and so not a fair reflection on possible interested parties, with the defined distance being 2km reachable by road or by foot.

22. **In Answer to Questions from Dawn Ferguson of Berryden Healthcare Ltd (applicant)**

- Dawn Ferguson highlights that the Rowlands representation letter to NHS Grampian states that Rowlands would be willing to pick up any additional services so why do they not have a prescriber?

  A short response from Dane Winterburn to this question was inaudible at the meeting and not picked up on the audio recording.

The Chair invited Steven Webster to make the representation on behalf of Websters Pharmacy

23. **Websters Pharmacy**

- Thanks for letting me address my issues. So as an existing pharmacy contractor in the locality, for the last 25 years, I've attended many such applications, and I formally wish to object to the use of unverified social media commentary as evidence in support of the proposed new pharmacy application during the process, it was evidence that the applicant conducted a targeted search of social media to identify negative commentary about existing pharmacies and presented a complaint as evidence of alleged service shortcomings. We submit that this approach is wholly inappropriate. Social media posts are anecdotal, unverified and not subject to formal complaints or regulatory scrutiny. They do not constitute reliable or representative evidence regarding the quality or adequacy of existing pharmaceutical services. NHS pharmaceutical and local pharmaceutical services regulations. 2013 provides a clear evidential framework for assessing new applications. Reliance on isolated social media commentary falls outside this framework and undermines the fairness and integrity of the decision making process. Genuine concerns about service quality should be raised through established mechanisms such as NHS complaints procedures or regulatory inspections, not through selective online commentary. For these reasons, as an existing contractor directly affected by the outcome, we request that the panel give no weight to this material in its consideration of the application, while every professional has a right to voice concerns, I've never before seen an unverified Facebook page being shared with the panel to paint an existing pharmacy in a bad light, purely in an attempt to pave the way for opening a new pharmacy, using a complaint About another pharmacy as leverage in one's own contract. Application shifts the focus from patient care to personal gain, and suggests there may be insufficient constructive grounds to justify the new venture independently.

I see the neighbourhood has well served by community pharmacy. It has great coverage and access to late night and weekend opening pharmacies. There are two late night and Sunday opening pharmacies within 1 mile and another 1.3 miles from Berryden. There is yet another one in Garthdee and another two in Bridge of Don, 3 miles away.

If it is necessary or desirable to have yet another pharmacy in Berryden then surely the rest of Aberdeenshire will also need pharmacies. People who live in Peterhead are entitled to the same service. If I live in Peterhead and require a pharmacy in the evening or on a Sunday, I would have to drive for 45 minutes to reach a suitable pharmacy. And this is not a population of 3,000 or 9,000 it is a population of 20,000. So if we are looking at service provision across Grampian there are far more pressing cases in my opinion. I live outside of the city so I am a little biased.

When the Lloyds Pharmacy in Sainsburys Berryden closed down no one offered to buy it or relocate it and NHS Grampian rececived no complaints about a lack of pharmacy provision because there is no lack of pharmacy provision. Every single service the applicant is proposing, Websters Pharmacy on Hilton Drive already provides and we are 0.7 miles away. We are not at capacity and are not turning away dossette boxes. We are not turning away substance use patients. We are doing as many as anywhere else on Buvidal also. Websters Pharmacy offer ground level accessible doorstep parking. As well as this we have unlimited parking on Hilton Drive. Prams can get out very easily. We have a slip road which is only used by ourselves and a florist, so access is super easy. We also it's called the six roads roundabout because it is a hub for busses and public transport.

We are a small pharmacy, but we are now professional looking. We have stopped selling toiletries and provide a more professional image. We have private consultation facilities for our two prescribing pharmacists. We have a dedicated room for opioid replacement therapy, a hearing loop system for the hard of hearing, fully trained staff. We have a prescribing pharmacist, actually two now, just in the last month, we have a pre reg pharmacist, accredited check in technician, dispensing assistants and medicine counter assistance. We offer free prescription collection and delivery. We offer a travel health clinic. We offer private services such as weight loss injections. We offer ear wax removal.

We will have within the next six months, a med point secure 24 hour prescription locker. After reading the CAR we have decided to install this. I would describe pharmacy cover in the Berryden neighbourhood as excellent. I do not think another pharmacy is necessary. I see the letters of support. I have doubts whether they were canvassed or willingly offered by members of the public. I am not that clear from listening to what's been said about that situation. I think all the questionnaires potentially could be taken with a pinch of salt. Am I convinced all the responses were from people in that neighbourhood? Maybe, maybe not.

I think that with enough marketing which the applicant has done an excellent intensive job of doing would produce similar results in Aberdeen. I did not see anything in the CAR demonstrating a grave lack of service.

24. **In Answer to Questions from John Ross, PPC Lay Member**

- John Ross asks if there are parking spaces outside the pharmacy and if so how many?

  Steven Webster advises there is space for 5 cars as well as the use of street parking on Hilton Drive.

25. **In Answer to Questions from Dawn Ferguson of Berryden Healthcare Ltd (applicant)**

- Dawn Ferguson asks if Steven Webster is aware that the Lloyds Pharmacy at Berryden was never put up for sale? Since it was mentioned no one offered to buy or relocate it.

  Steven Webster was not aware.

  Dawn Ferguson asks if Steven Webster has evidence to back up the doubts around sources of information?

  Steven Webster says this is just from what has been told at the hearing

The Chair invited Nicol Baird to make the representation on behalf of Baird's Pharmacy

26. **Baird's Pharmacy**

- Nothing more to add in addition to the submissions to the panel already but will answer any questions.

27. **In Answer to Questions from John Fowlie, Contractor Member, PPC**

- John Fowlie asks if Baird's Pharmacy has prescriber pharmacists?

  Nicol Bairds states that as per his written submission, they have had this since the service began in 2020 with no breaks in service. Also a Gold Standard pharmacy which means they aspire to offer the independent prescriber service for 80% of the opening hours.

<u>Summing Up</u>

After the Chairman had confirmed that there were no further questions or comments from those present and participating in the hearing, the various parties were asked to sum up their arguments.

The Chair invited summing up from Nicol Baird, Baird's Pharmacy

28. Nicol Baird representing Baird's Pharmacy summed up by making the following points:

- Just to sum up what I have already submitted in writing, and I can touch on the question regarding Lloyds in Berryden. I was actually offered that pharmacy, not for sale but for free. I could see it was a very low dispensing pharmacy. It was failing and that is why it was closed. We are also aware it would need to be relocated. Patients using that pharmacy were shopping at Sainburys and it was a convenience.
  I would remind the PPC there is a cost to the NHS for every pharmacy that opens. Anyone would want a pharmacy open long hours as close as possible. Previous example in Lothian in the last year where extended pharmacies have reduced their hours and the health board looked to new pharmacies to bridge the gap but were reminded that anyone can just reduce their hours at a later date.

The Chair then invited summing up from Steven Webster, Websters Pharmacy

29. Steven Webster representing Websters Pharmacy summed up by making the following points:

- Nothing to add.

The Chair then invited summing up from Dane Winterburn, Rowlands Pharmacy

30. Dane Winterburn representing Rowlands Pharmacy summed up by making the following points:

- We have heard no evidence for demand from what we heard today and the existing service provision is more than adequate to the local neighbourhood. We respectfully ask the committee does not grant this application.

The Chair then invited summing up from the applicant Dawn Ferguson, Berryden Healthcare Ltd

- Dawn Ferguson the applicant summed up by making the following closing statement:
- After considering the information presented today, I am not merely requesting the PPC accept my assertions. Instead, I urge you to examine the compelling evidence I have provided, which clearly demonstrates an inadequacy in the

provision of pharmaceutical services. While other contractors have sought to discredit the findings of the consultation analysis report, I have supported these conclusions with additional evidence from by local healthcare professionals, who are perhaps best placed to identify shortcomings in service provision. These practitioners encounter the challenges on a daily basis, and their perspectives strongly align with the conclusions of the consultation analysis report. This is not about replicating existing services. It is about restoring a vital service lost with the closure of Lloyds, and ensuring that the growing community has safe, accessible, and reliable pharmacy provision for the foreseeable future and beyond.

The summing up is now concluded.

The chair asked the applicant and interested parties if they had received a full and fair hearing. They all agreed verbally that they had.

The applicant, interested parties and observers left the proceedings.

The Committee deliberations on the Application, Presentations and all Supporting Documentation Commenced.

Decision

31. The Committee undertook a full and wide ranging discussion regarding the Application, taking account of the presentations from the applicant, the interested parties who attended and the written submissions received, all of the supporting documentation available to it and relevant to the Application, which included: Application Form and supporting documentation provided by the Applicant, the Consultation Analysis Report, the Oral Submissions made by the Interested Parties.

    In addition, the following information was considered: general information in relation to the Application, details of individuals invited to comment and the representations received, responses in relation to the public consultation by the Health Board and a guide map of the area showing the premises, local pharmacies and GP Practices. The Committee noted during their discussions, that no submissions or responses had been received from some of the interested parties who were contacted as part of the 30 day consultation period after the application had been received by Primary Care Contracts (this included the Community Councils and Health and Social Care Partnerships).

    The Committee also took into consideration its obligations in terms of the Equality Act 2010, including the requirement to eliminate unlawful discrimination, harassment, victimisation and other conduct prohibited by the said Act, as well as to advance equality of opportunity between people who share protected characteristics and those who do not and to foster good relations between people who share protected characteristics and those who do not.

Adequacy of Existing Provision of Pharmaceutical Services and Necessity or Desirability

Neighbourhood

32. The Committee in considering the evidence submitted during the period of consultation, presented by the applicant and interested parties in attendance at the hearing and recalling observations from the site visit, first had to decide the question of the neighbourhood in which the premises, to which the application related, were located. The Committee first discussed the neighbourhood.

33. The Committee agreed that the neighbourhood was that as defined by the applicant in the application and hearing presentation. As seen in Appendix 1, the Berryden neighbourhood is bounded by Cattofield Place to the north, George Street and Great Northern Road to the east, Westburn Road and Hutcheon Street to the south, and Westburn Drive to the west.

34. The Committee took into account that a full range of pharmaceutical services are available from those pharmacies located in the surrounding area, those of which were present as interested parties, Baird's Pharmacy x2, Webster Pharmacy and Rowlands Pharmacy all within a 2km distance.

    A full range of pharmaceutical services as required in the Pharmacy Contract are accessible to those residents of Berryden. It was also noted by the Committee that a collection and delivery service if required for those residents who are unable to collect their prescriptions from their pharmacies in person.

    It was noted by the Committee that since the loss of a previous pharmacy within Berryden Retail Park two years ago, there has been little to suggest there has been a gap in service since, not least until the beginning of the CAR and messages of support the applicant has received since.

35. The Committee considered if pharmaceutical services were readily accessible and adequate out with the neighbourhood. They considered whether the full range of pharmaceutical services were available and accessible to the residents of Berryden and if these were adequate to meet their needs from the existing pharmacies in are surrounding area. The Committee agreed that the full range of pharmaceutical services were easily accessible by car or if required via public transport.

Consultation Analysis Report

36. As part of the discussion, the Committee took into consideration the information contained within the Consultation Analysis Report and took the information detailed in the Consultation Analysis Report into account when making their decision. Specifically:

- The aim of the public consultation was to assess the views of local people as to whether they believe there was adequate access to pharmacy services within the neighbourhood identified by the Intended applicant/s for premises proposed at Berryden, Aberdeen and measure the level of public support for a new pharmacy in this area.

- It was agreed to utilise NHS Grampian's existing networks, which included the NHS Grampian Public Involvement Network. In addition, communication with the wider community took place via NHS Grampian's social media accounts, a press release and NHS Grampian's website where there was a link to the questionnaire. The local office of Health Improvement Scotland (Engagement) was also informed of the consultation.

  Respondents could either respond electronically using the survey link provided (an online survey facility replicating the agreed consultation questionnaire), by e-mail, or by hard copy using the Public Involvement Team's Freepost service. A press release was issued by NHS Grampian's Media Team. Supporting material such as consultation flyers and posters were also developed. The consultation ran for a total of 90 working days.

  The questionnaire had a total number of 708 complete responses from individuals and a further 383 responses which were incomplete. The Committee took these responses into consideration and acknowledged concerns about how the questionnaire had been shared out with the intended neighbourhood, as referenced with evidence during the hearing.

Any reference to concerns over the viability of surrounding pharmacies or the applicant's proposed pharmacy if a new contract was to be granted, was dismissed by the committee.

In accordance with the statutory procedures, the Chair asked the non-voting members to leave the meeting to allow voting to take place.

Decision

37. For the reasons set out above, the Committee considered that the provision of pharmaceutical services for the neighbourhood was **adequate** and that following from this and took into account the Legal Test when making their decision, the granting of the application was **neither necessary nor desirable** in order to secure adequate provision of pharmaceutical services in the neighbourhood in which the proposed premises were located.

The Chair invited the non-voting Committee members to re-join the meeting

38. The Chair confirmed the decision had been reached on the Application. The reason for the decision was based on the following:

- **Access to Services:** Residents of Berryden currently have access to a comprehensive range of pharmaceutical services from surrounding pharmacies, which are readily accessible by both car and public transport.
- **Impact of Lloyds Pharmacy Closure:** Since the closure of the Lloyds Pharmacy approximately two years ago, the local population has successfully sourced pharmaceutical services elsewhere. There is no substantive evidence to suggest ongoing difficulty in accessing services.
- **Population Dynamics:** The Committee noted that a significant portion of the previous Lloyds Pharmacy's customer base may have been transient, likely drawn from the retail park footfall. These individuals appear to have transitioned to other conveniently located pharmacies, while permanent residents are likely using nearby services or relying on collection and delivery options.
- **Capacity of Existing Pharmacies:** Interested parties from neighbouring pharmacies confirmed that, following the Lloyds closure, there was no notable increase in prescription volumes and that they remain well within capacity. This further supports the view that demand from the area is being adequately met.
- **Convenience vs. Necessity:** While the presence of a pharmacy within Berryden Retail Park may offer convenience, the Committee concluded that it is not necessary given the ease of access to existing services in the vicinity.
- **Community Engagement:** The Committee observed a lack of response from Community Councils during the consultation period, suggesting limited community concern or demand for additional pharmaceutical provision in the area.
- **Concerns Regarding the CAR:** Doubts were raised about the validity of the Consultation Analysis Report (CAR), particularly due to the manner in which it was disseminated and the timing of supplementary evidence, which undermined the desirability aspect of the application.
- **Quality of Supporting Documents:** Certain appendix materials submitted by the applicant were considered unhelpful or irrelevant, further weakening the case for desirability.
- **Conclusion on Adequacy:** Based on the evidence presented, the Committee found no demonstrable inadequacy in the pharmaceutical services available to the Berryden neighbourhood.

39. Accordingly, the Committee agreed that the provision of pharmaceutical services at the premises **was neither necessary nor desirable** in order to secure adequate provision of pharmaceutical services in the neighbourhood in which the premises were located by persons whose names are included in the pharmaceutical list.

40. In these circumstances, it was the Committee's unanimous decision that the application **should not be** granted.

The Hearing concluded and the Chair thanked the Committee members.

Signed:  Date: 15th October 2025

Ritchie Johnson
Chair, Pharmacy Practices Committee