CONSULTATION RESPONSE FORM

Consultation Proposals - Part 1Control of Entry (Pharmacy Applications) and Dispensing GP Practices

The stability of NHS services in remote and rural areas

Proposal 1:

The Scottish Government proposes amending the designation of 'controlled remote, rural are purposes of considering pharmacy application introducing a 'Prejudice Test' in addition to the adequacy test).	nd island localities' for ons in these areas of Sc	the otland and
Do you agree with this proposal?	Yes ⊠	No 🗌
Please tell us the reason for your answer in the	he box below	
We agree with the proposal, on the basis that it a to consider the consequences on the planning a services in the area of a proposed pharmacy.		
Proposal 2:		
The Scottish Government proposes that the designation of an area as a 'controlled remote, rural and island locality' should be reviewed periodically by NHS Boards so that NHS provided or contracted services are responsive to population changes, and changing healthcare needs and priorities both locally and nationally. It is proposed that the review should be carried out at a minimum of every three years.		
Do you agree with this proposal?	Yes ⊠	No 🗌
Please tell us the reason for your answer in the box below		
We agree that NHS boards should have an active pharmaceutical support in primary care, and that documentation should be up-to-date. A three year balance between keeping plans current, whilst a	t their planning ar review seems a good	quent

review.

Proposal 3:

The Scottish Government is of the view that people living in remote, rural and island areas should have access to NHS pharmaceutical services and NHS primary medical services that are no less adequate than would be the case in other parts of Scotland.

Where the dispensing by a GP practice is necessary, it should be supplemented with pharmaceutical care provided by a qualified clinical pharmacist sourced by the NHS Board to ensure the person-centred, safe and effective use of the medicines. NHS Boards would be required to develop local plans sensitive to local circumstances to achieve this.

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Do you agree with this proposal?	Yes 🖂	No 🗌
Please tell us the reason for your answer in the b	ox below	
Yes; the planning of the provision of pharmaceutical should be proactively managed by NHS boards.	support to primary	care

Consultation Proposals - Part 2Wider Pharmacy Application Processes

The proposals discussed in Part 2 apply to all applications to open a community pharmacy whether in a remote, rural or island area, or in other parts of Scotland.

Public consultation and the community voice

Proposal 4:

The Scottish Government proposes that the regulatory framework going forward will look to include a community representative among those who should be notified, as an 'interested party or persons', of any application to open a community pharmacy in the locality. The community would therefore in statute be considered as a body or party whose interests may be significantly affected by the pharmacy application.

This would be a nominated representative from, for example, the local Community Council or the local Residents Association or another appropriate local community representative body recognised by the NHS Board.

As an 'interested party' the community representative would be entitled to make written representations about the application to the Board to which the application is made within 30 days of receipt of the Board's notification of the application.

In addition, where the NHS Board PPC decides to hear oral representations, the community representative will be entitled to take part, together with the applicant and the other interested parties, and would be given reasonable notice of the meeting where those oral representations are to be heard. Once each interested party, including the community representative, has presented their evidence in turn they would then leave the hearing leaving the PPC to consider all the evidence presented.

As an 'interested party' the community representative will also have a right of appeal against the decision of the NHS Board PPC to represent the views of the local community.

Do you agree with this proposal?

Yes
No
Please tell us the reason for your answer in the box below

We agree in part; this step still does not address the issue as to whether the views of the community representative can be taken into consideration, unless under the headings of the pharmacy being necessary or desirable. We do not believe that the changes in the law are clear enough about what other issues that the community representation can make that are valid for consideration.

Proposal 5:

The Scottish Government is of the view that in the future PPC hearings should be handled in such a way so that no one person or organisation is able to dominate the entire hearing. This might include options such as limiting the time allocated to give oral representations or the issuing of guidance to PPCs. The Scottish Government thinks that all PPC meetings in future should follow a standard process in the management of PPC Hearings.

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Do you agree with this proposal?	Yes ⊠	No 🗌
Please tell us the reason for your answer in the box belo	W	
Yes; the length of the presentation of the interested parties soutlined, and the guidance to the PPC should be standardise		

Proposal 6:

The Scottish Government proposes that going forward those assisting in oral representations by the applicant, the community and other interested parties in attendance are able to speak on behalf of those they are assisting.

Do you agree with this proposal?	Yes ⊠	No 🗌	
Please tell us the reason for your answer in the box below			
At present, those assisting the oral presentations cannot a directly. Questions are therefore channelled to them, answer answer relayed to the PPC. It would speed the process if the directly when invited to do so, and avoid misrepresentation misunderstandings.	ered, and then ey could answ	the	
Proposal 7:			
The Scottish Government proposes that going forward a pharmacy, for the purpose of providing NHS pharmac should first enter into a pre-application stage with the I whether there is an identified unmet need in the provisipharmaceutical services.	ceutical servi NHS Board to	ces,	
This would assist NHS Boards in determining the urger NHS pharmaceutical services identified by the applicar Pharmaceutical Care Services Plans would need to refl service gaps and where need is most urgent.	nt. NHS Boar	ds	
Where an application proceeds, the applicant must be to the NHS Board and the affected communities that ever made to publicise the intention to open a community pland obtain responses from residents in the associated the notice must be advertised in a newspaper and all cifree-sheets and newsletters in the neighbourhood in or majority of residents.	ery effort has harmacy and neighbourho irculating loca	s been to consult ood. Also, al news	
NHS Boards will also be required to do the same level of advertising in relation to its consultation activities.			
Do you agree with this proposal?	Yes ⊠	No 🗌	
Please tell us the reason for your answer in the box bel	ow		
This proposal can only make sense if the changes above a NHS boards need to have a pharmaceutical services plan in applications to be evaluated as against assessed need.	· ·	the	

Proposal 8:

The Scottish Government proposes that going forward NHS Boards specify to what extent the views of the community have or have not been taken into account in their published decisions on the outcome of a pharmacy application.

Do you agree with this proposal?	Yes ⊠	No 🗌		
Please tell us the reason for your answer in the box belo	Please tell us the reason for your answer in the box below			
This would be recorded in the minutes of the PPC.				
Securing NHS pharmaceutical services				
Proposal 9:				
The Scottish Government considers that NHS Boards slinto account how NHS pharmaceutical services would be in the long term after an application has been received. Into account the financial viability of the pharmacy busing an important factor in securing these services in the long	e delivered in This include ness proposo	n practice s taking		
Do you agree with this proposal?	Yes 🖂	No 🗌		
Please tell us the reason for your answer in the box below				
This clarifies the current regulations as to 'securing provision the concept of secure and sustainable provision into the fut		es		

Timeframes for reaching decisions

Proposal 10:

The Scottish Government proposes that going forward the regulatory framework would require NHS Board PPCs to make a decision within 6 weeks of the end of the public consultation process and the NAP to make a decision within 3 months upon receipt of an appeal (or appeals) being lodged.

In more complex cases the timeframe would be made extendable where there is a good cause for delay.

Do you agree with this proposal?	Yes ⊠	No 🗌
Please tell us the reason for your answer in the box below		
The whole process still takes a very long time, from the date advertisement appearing to the publication of a response ca 6months, even with these time scales being applied.		
Expert advice and support to PPCs during deliberations	<u>i</u>	
Proposal 11:		
The Scottish Government proposes that going forward framework would make provisions for the appropriate relegal assessor acting in a supporting and advisory capa providing advice and guidance on technical and legal as application process during PPC deliberations.	ole of an inde acity, includir	ependent ng
Do you agree with this proposal?	Yes ⊠	No 🗌
Please tell us the reason for your answer in the box belo	ow	
The current process puts a heavy responsibility on boathe law correctly, with the additional risk of costly and appeals as a consequence. In addition, the minuting arlay members of the PPC should be impartial and consist the whole hearing.	time-consum	ning the