



Royal College of  
General Practitioners

## Consultation Proposals - Part 1 Control of Entry (Pharmacy Applications) and Dispensing GP Practices: The stability of NHS services in remote and rural areas

### RESPONSE FROM RCGP SCOTLAND

The Royal College of General Practitioners (RCGP) is the academic organisation in the UK for general practitioners. Its aim is to encourage and maintain the highest standards of general medical practice and act as the 'voice' of general practitioners on education, training and issues around standards of care for patients.

The College in Scotland came into existence in 1953 (one year after the UK College), when a Scottish Council was created to take forward the College's interests within the Scottish Health Service. We currently represent over 5000 GP members and Associates in Training throughout Scotland. In addition to a base in Edinburgh, the College in Scotland is represented through five regional faculty offices in Edinburgh, Aberdeen, Inverness, Dundee and Glasgow.

#### Comments

#### **Proposal 1:**

The Scottish Government proposes amending legislation that will introduce the designation of '*controlled remote, rural and island localities*' for the purposes of considering pharmacy applications in these areas of Scotland and introducing a 'Prejudice Test' in addition to the test of 'necessary or desirable' (the adequacy test).

Do you agree with this proposal?

Yes

No

Please tell us the reason for your answer in the box below

The designation of 'controlled remote and rural and isolated localities' will be a significant step forward in health service planning for these areas. It supports the concept of 'rural proofing policy'. Health care delivery in remote, rural and island locality can conceptually be considered a 'fragile health ecosystem'. Many professional services are provided by small groups of generalist professionals with multiple roles which is in contrast to urban delivery of health care. The balance of interdependent professions and roles can easily be upset and destroyed by poor service planning or commercial development. Threats to business viability and security can destabilize services and cause poor recruitment and retention in professions other than 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 agreed that NHS Boards should have an active role in planning pharmaceutical support in primary care. A three year review is a good balance between keeping current and avoiding unnecessary reviews.

**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.

Do you agree with this proposal?

Yes

No

Please tell us the reason for your answer in the box below

Pharmacist support and team working with GP Practices has been shown to improve pharmaceutical governance, patient care and patient safety in urban practice.

## Consultation Proposals - Part 2 Wider 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

Our members report having no voice in pharmacy applications, even when important issues are considered that are presently undertaken by dispensing practices. This step does not address the issues as to whether the views of community representatives can be taken into consideration, unless under the headings of pharmacy being necessary or desirable.

**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.

Do you agree with this proposal? Yes  No

Please tell us the reason for your answer in the box below

Our members report having no voice in matters of direct import to their patients, community and colleagues. At present they require to through third party representatives who are less able to put the case directly.

**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

It would speed up the process if they could answer directly when invited to do so, avoiding misrepresentation and misunderstanding.

**Proposal 7:**

The Scottish Government proposes that going forward those applying to open a pharmacy, for the purpose of providing NHS pharmaceutical services, should first enter into a pre-application stage with the NHS Board to determine whether there is an identified unmet need in the provision of NHS pharmaceutical services.

This would assist NHS Boards in determining the urgency of the demand for NHS pharmaceutical services identified by the applicant. NHS Boards Pharmaceutical Care Services Plans would need to reflect an assessment of service gaps and where need is most urgent.

Where an application proceeds, the applicant must be able to provide evidence to the NHS Board and the affected communities that every effort has been made to publicise the intention to open a community pharmacy and to consult and obtain responses from residents in the associated neighbourhood. Also, the notice must be advertised in a newspaper and all circulating local news free-sheets and newsletters in the neighbourhood in order to reach the vast majority of residents.

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 below

This proposal would make sense of the above changes were made. The NHS Boards would need to have a pharmaceutical services plan to allow applications to be assessed.

**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 below

This needs to be explicit. Current procedures are unaccountable.

**Securing NHS pharmaceutical services**

**Proposal 9:**

The Scottish Government considers that NHS Boards should be able to take into account how NHS pharmaceutical services would be delivered in practice in the long term after an application has been received. This includes taking into account the financial viability of the pharmacy business proposed. This is an important factor in securing these services in the long term.

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” and includes the concept of secure and sustainable provision in the future.

## **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

Reduced time frame reduces unnecessary prolonged uncertainty.

## **Expert advice and support to PPCs during deliberations**

### **Proposal 11:**

The Scottish Government proposes that going forward the regulatory framework would make provisions for the appropriate role of an independent legal assessor acting in a supporting and advisory capacity, including providing advice and guidance on technical and legal aspects of the application process during PPC deliberations.

Do you agree with this proposal? Yes  No

Please tell us the reason for your answer in the box below

Essential in a complex legal environment of policy application, when there is a heavy responsibility on Boards to interpret the law correctly.