
Lothian Area Pharmaceutical Committee

NHS Lothian, Deaconess House, 148 Pleasance, Edinburgh EH8 9RS

Chairman: Mr Harry McQuillan

From:-

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Mr Chris Naldret
Scottish Executive Health Department
Primary Care Department
Scottish Executive Health Department
St Andrew's House
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21st February 2003

Dear Mr Naldret

Re: Response of the Lothian Area Pharmaceutical Committee to the report of the Office of Fair Trading, " The Control of Entry Regulations and Retail Pharmacy Services in the UK"

The Lothian Area Pharmaceutical Committee (LAPC), the statutory professional advisory committee on pharmaceutical matters to NHS Lothian, welcomes the long awaited publication of the above report.

- The Committee supports initiatives that will increase the availability of, and access to pharmaceutical services but wishes to emphasize that pharmacy, and community pharmacy in particular, is more than selling medicines, whether they be 'Pharmacy Only' or 'General Sales List', and that medicines are not normal items of trade and commerce. Modern medicines are potent substances and it is essential that patients receive the most appropriate medicines for their particular medical condition. This ensures that they receive the optimal therapeutic effect with the minimum of side and adverse effects, reducing the incidence of preventable drug related morbidity, and improving the overall outcome and health of the individual patient. For patients to be provided with the most appropriate medicine when purchased over the counter there is a need for adequate supervision – the Pharmacist's professional advice may be that no medicine is the most appropriate course of action.
- The OFT report refers only to the retail aspect of community pharmacy practice. The current Scottish Executive Health Department strategy is that Community Pharmacies be an integral part of the Primary Care network, designating them as a first port of call on

the NHS. It is questionable as to whether GPs would be expected to deal with market forces for the professional services they provide and therefore appropriate to ask why Community Pharmacy should be regarded in this way.

- "The Right Medicine", the Scottish strategy on pharmaceutical care, published in February 2002 by the Scottish Executive Health Department, recognises the pivotal role undertaken by pharmacists in the community in providing a gateway to the NHS – access to the NHS in the High Street, readily available, without appointment and for some sectors of the population especially those in deprived areas, or the homeless, often their only point of contact with the NHS.
- It should also be noted that in Scotland, Pharmacies are being promoted as walk in health care centres, whereas in England a separate network has been established.
- LAPC is concerned that if the OFT Report is adopted in its present form many of the developments and the impressive work that have already been undertaken in the first year of "The Right Medicine" may be negated. Pharmacies will tend to be established only where there are substantive business opportunities. LAPC consider that while the present system for the licensing of Pharmacy Contracts needs to be improved with some degree of relaxation, a laissez - faire approach, as envisaged in the report is likely to deny, or restrict, pharmaceutical services to some of the most needy and deprived sectors of the population, as well as to those who live in rural areas and areas of low population density.
- Although the OFT report refers to improved access for patients, it should be noted that "The Right Medicine" looks towards extended hours of opening of Pharmacies within localities. Local evidence at present is that pharmacies in some of the larger shopping complexes are currently submitting applications to the Primary Care Trust for a reduction in their hours of opening. It should also be noted that Pharmacies in Scotland have played a key role in public health initiatives such as provision of supervised self administration of methadone programmes as well as the provision of needles and syringe exchange services for addicts. While independent and free standing pharmacies and pharmacists have provided such services, it is noted that pharmacies in establishments which exist primarily to provide retail services, are reluctant to become involved in providing such services.
- LAPC considers, in particular that the OFT report requires to be considered in terms of the bigger picture of healthcare provision, as envisaged in "The Right Medicine".
- We are also not convinced that the implementation of the Report will necessarily lead to savings as envisaged. Following the abolition of Resale Price Maintenance, which was thought would have a similar effect, it is noted that some prices have actually increased and that the effect has been the opposite of what was anticipated.
- We also note that throughout the report frequent reference is made to the word 'consumer', as opposed to 'patient'. "The Right Medicine" refers to patient care and improvements in the patient's journey in relation to use of NHS facilities and improved outcomes in healthcare for individual patients, a view that is very much supported by LAPC.
- LAPC also notes the development of best practice initiatives and devolution of healthcare provision to the LHCCs, with pharmacies as a gateway to NHS sources for individual patients. It is essential that the facility to plan NHS services in Scotland be retained.

- Equity of access by all sectors of the population to pharmaceutical, as well as all other health care services, is a cornerstone of Government policy, in particular mothers with young children, the elderly and those who are socio-economically disadvantaged.
- We have indicated above that the OFT report looks only at retail pharmacy, but that the Pharmaceutical Care Strategy for Scotland, "The Right Medicine" is concerned with all aspects of pharmaceutical care. LAPC is concerned that especially in the short term, implementation of the OFT report is likely to result in a manpower shortage, with subsequent pressure on the hospital services where recruitment and retention of staff is currently a key issue. A consequence of implementing the OFT report in its present form is that many of the newer services recently implemented in hospitals which are resulting in a reduction in patient re-admissions and drug related morbidity, and therefore assisting with earlier discharge, and reduction of waiting lists and bed blocking, are unlikely to be unsustainable.
- LAPC, however, considers that some element of overhaul of the current regulations in relation to the control of entry to the pharmaceutical list would be desirable. In particular we would like to see opportunities for new pharmacies to open in defined areas of pharmaceutical need, and in locations where innovation and initiative will lead to the development of new services that meet the needs of the locality and the patients living therein. This may be further facilitated by the new Community Pharmacy Contract.

In conclusion LAPC is very supportive of initiatives that increase and improve access to pharmaceutical services. We consider, however that the Office of Fair Trading has been very restrictive/limited in its assessment of pharmaceutical services, has considered the needs of consumers in relation to the purchasing of medicines but has not related to consumers as patients in need of professional pharmaceutical advice. LAPC also considers that implementation of the OFT report in its present form goes very much against the spirit of "The Right Medicine".

Yours sincerely

Peter Jones
Professional Secretary
Lothian Area Pharmaceutical Committee

NB: The Lothian Area Pharmaceutical Committee is pleased to make the contents of this letter available to all interested and relevant parties as part of the consultation process.