

FORM A
for use by pharmacists
application for inclusion in the pharmaceutical list** (See Note 1)

TO THE**Grampian HEALTH BOARD**

1. I/We**Opel & Associates Limited (Reg. SC381813)**.....

of **5 Bon Accord Square, Aberdeen, UK, AB11 6XZ**.....

apply to have my/our name(s) included in the pharmaceutical list for the provision of the pharmaceutical services specified in paragraph 4 below: the application is in respect of-

~~(a) the provision of services from premises from which the pharmaceutical services specified in paragraph 4 below are already provided (complete paragraphs 2, 3, 4 and 5(a) and sign the application);~~

~~(b) the relocation of the premises from which I/we provide pharmaceutical services (complete paragraphs 2, 3, 4 and 5(b) and sign the application);~~

(c) the opening of premises for the provision of pharmaceutical services specified in paragraph 4 below (complete paragraphs 2, 3, 4 and 5(c) and sign the application);

~~(d) the provision of pharmaceutical services other than those already listed from currently listed premises (complete paragraphs 2, 3, 4, 5(c) and 5(d) and sign the application).~~

2.

(a) The premises from which I/we propose to provide pharmaceutical services are/will be at-

The Health Centre, Tarves Road, Pitmedden, Aberdeenshire, AB41 7NX

(b) the premises from which it is proposed to provide pharmaceutical services are-

(i) already constructed YES/NO

(ii) already in our possession (through lease or ownership) YES/NO

(iii) registered by the Royal Pharmaceutical Society of Great Britain in my/our name(s) YES/NO

If the answer to (ii) is no, submit such further information as will indicate that the applicant intends to commence business from the premises

.....

If the answer to (iii) is yes, state reference number

.....

If the answer to (iii) is no, give date of application for registration

1 April 2011

(c) the pharmacist in charge at the said premises will be—

Name **Nigel Vincent Morley**

Registration No . **66245.**

3. I/We undertake to provide the pharmaceutical services specified below from the said premises from (date) **20 April 2011**

and it is proposed that the premises will be open during the following hours

Monday to Friday 0830 - 1300 and 1400 - 1800 (lunch 1300-1400)
Saturday 0900 - 1300
Sunday Closed

4. I/We propose to provide the following pharmaceutical services, and undertake to provide such of these services as may be approved by the Board in accordance with the terms of service for pharmacists for the time being in operation:—

Dispensing of medicines, and supplying of drugs and of listed appliances as specified in the Drug Tariff

5. Supplying a domiciliary oxygen therapy service. YES/NO

(a) to be completed only by persons applying under paragraph (1)(a) above who are proposing to provide services at premises from which such services are already provided)

(i) the name of the person who is currently providing services from the premises named in paragraph 2(a) above is—

.....**N/A**.....

(ii) there will be no change in the pharmaceutical services provided and those services from the said premises will be continuous/interrupted for the period of (state period)—

(b) (to be completed only by persons whose names are included in the pharmaceutical list applying under paragraph 1(b) above)

(i) the premises in the Board's area from which I am/we are providing pharmaceutical services are at—

.....**N/A**.....

(ii) the relocation is for the following reasons:-

..... N/A.....

(iii) (To be completed only if the applicant considers relocation to be minor. A minor relocation is one where there will be no significant change in the neighbourhood population served, and other circumstances are such that there will be no appreciable effect on the NHS pharmaceutical services provided by the applicant or any other person on the board's list.)

I/We consider the relocation to be minor for the following reasons:-

..... N/A.....

(iv) there will be no change in the pharmaceutical services provided and the provision of services by me/us will be continuous/interrupted for the period of (state period)

(c) (to be completed only by persons applying under paragraph 1(c) or

(d) above)

In my/our view the provision of the pharmaceutical services specified above at the premises named in paragraph 2(a) above is necessary or desirable in order to secure adequate provision of pharmaceutical services in the neighbourhood of the said premises for the following reasons:-

.....Please see covering letter

(d) (to be completed only by persons proposing to provide other pharmaceutical services from premises from which some pharmaceutical services are already provided by them)

(i) my/our NHS services shall be those pharmaceutical services granted in respect of this application

(ii) the other pharmaceutical services proposed for provision are (specify)-

..... N/A.....

Signed....



Date9 August 2010

Delete the sections or words which do not apply.

NOTES:

(1) An application on Form A will be required by any person already included in the pharmaceutical list who wishes to undertake to supply pharmaceutical services from additional or alternative premises or to vary the pharmaceutical services provided from currently listed premises. The alternative Form A is for use by persons other than pharmacists.

(2) Please note that medicines cannot be dispensed from the premises until they are registered by the Royal Pharmaceutical Society of Great Britain under the Medicines Act 1968. Although an application to be included in the pharmaceutical list (Form A) can be considered in advance of such registration, registration details and any other information required but not given on this Form must subsequently be provided on Form B before inclusion in the list is confirmed.

(3) Payment cannot be made for NHS services provided before the date of entry in the pharmaceutical list recorded in Form C as issued by the Board.

N V Morley MRPharmS
6-8 Prospect Court
Courteenhall Road
Blisworth
Northamptonshire
NN7 3DG

Telephone: 01604 859 000
Facsimile: 01604 859 777
E-mail: victoria@surelines.com

Our Ref: NVM/VAB

21 July 2010

Mrs Sue Hay
Family Health Services
Westholme
Woodend Hospital
Aberdeen
AB15 6LS

Dear Sue

Application for inclusion in the Pharmaceutical List

I am writing in respect of an application for consent to join the pharmaceutical list at Tarves Road, Pitmedden, Aberdeenshire, AB41 7NX by Opel & Associates Ltd.

I have been appointed Superintendent Pharmacist by the Director of Opel & Associates Limited, please find attached copy letter dated 21 July 2010.

NHS patients in Pitmedden do not have a choice or access to a community pharmacy in the neighbourhood of Pitmedden and hence the grant of consent is necessary or desirable to secure the adequacy of pharmaceutical services in the neighbourhood.

The pharmacist and director confirm that on successfully opening a pharmacy, they would:

1. Make NHS pharmaceutical services available from a modern and well-constructed high standard pharmacy – with all legal compliance and following recognised guidelines at the new pharmacy address. The new facility would comply with all necessary laws, regulations and guidelines to include a suitable Consultation Room along with environmental considerations and provisions for the disabled.
2. Employ a fully qualified Superintendent Pharmacist to manage and offer necessary services to join the pharmaceutical list – to the benefit of the people of Pitmedden and surrounding districts.
3. Provide Full Dispensing Services, i.e. the provision of proper and sufficient drugs and medicines and listed appliances ordered by a duly authorised health practitioner. This is a national contract item.

4. Also to
 - a. Set aside areas for displaying health education material
 - b. Provide advice and counselling to the public on medicines and appliances
 - c. Arrange the keeping of records of medicines supplied to NHS patients
 - d. Undertake clinical audit within NHS Scotland structures
 - e. Produce a practice leaflet giving customer advice on NHS services offered
 - f. Offer a repeat prescription service, where presently there is none arranged with any pharmacy outside of the neighbourhood.

5. To Supply Pharmaceutical Services – dispensing and advisory services subject to local NHS Board negotiation known as 'directed services'
 - a. Disposal of Pharmaceutical Waste
 - b. Out of Hours Services
 - c. A robust Collection and Delivery Services

6. Ensure the adoption of the highest standards of medicines management to exercise and fulfill the contractual pharmaceutical services as detailed above -according to RSPGB rules, regulations and guidelines.

7. Ensure there is provision of further facilities and services for the infirm or disabled - to include a monitored dose medicines compliance system, the provision of Gluten-free products, supply of appliances and any other such necessary services.

In summary of the benefits to the neighbourhood, the new pharmacy as proposed would effect the following criteria.

Improve the current level of access within the neighbourhood to the NHS pharmaceutical services.

Extend the services in the neighbourhood already offered, and give a choice to patients by the improvement of the provision of the additional facilities.

Improve service provision in the neighbourhood through innovation and new directions to include a robust delivery and prescription pick-up service.

Meet the needs for specialist or other services which improve the provision of, or access to, services such as for specific populations or vulnerable groups.

Respond to the changing needs of the community it serves or to the local NHS delivery plans.

Improve local management of long term conditions and preventing inappropriate hospital admissions.

Support the effective use of medicines.

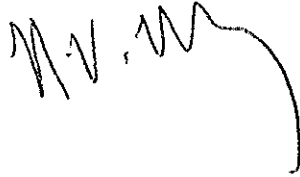
Improve access to health promotion and public health messages.

The director of Opel & Associates Ltd, subject to approval, is fully committed to facilitating the development of a pharmacist-led pharmaceutical service that more than adequately meets the pharmaceutical needs of the local population. It can be seen as a most favourable additional pharmaceutical service provision complementing the existing services, and without prejudice to any of them and allowing competition and greater choice of pharmaceutical services to the community.

The Director of Opel & Associates Ltd is Anne Baird Anderson.

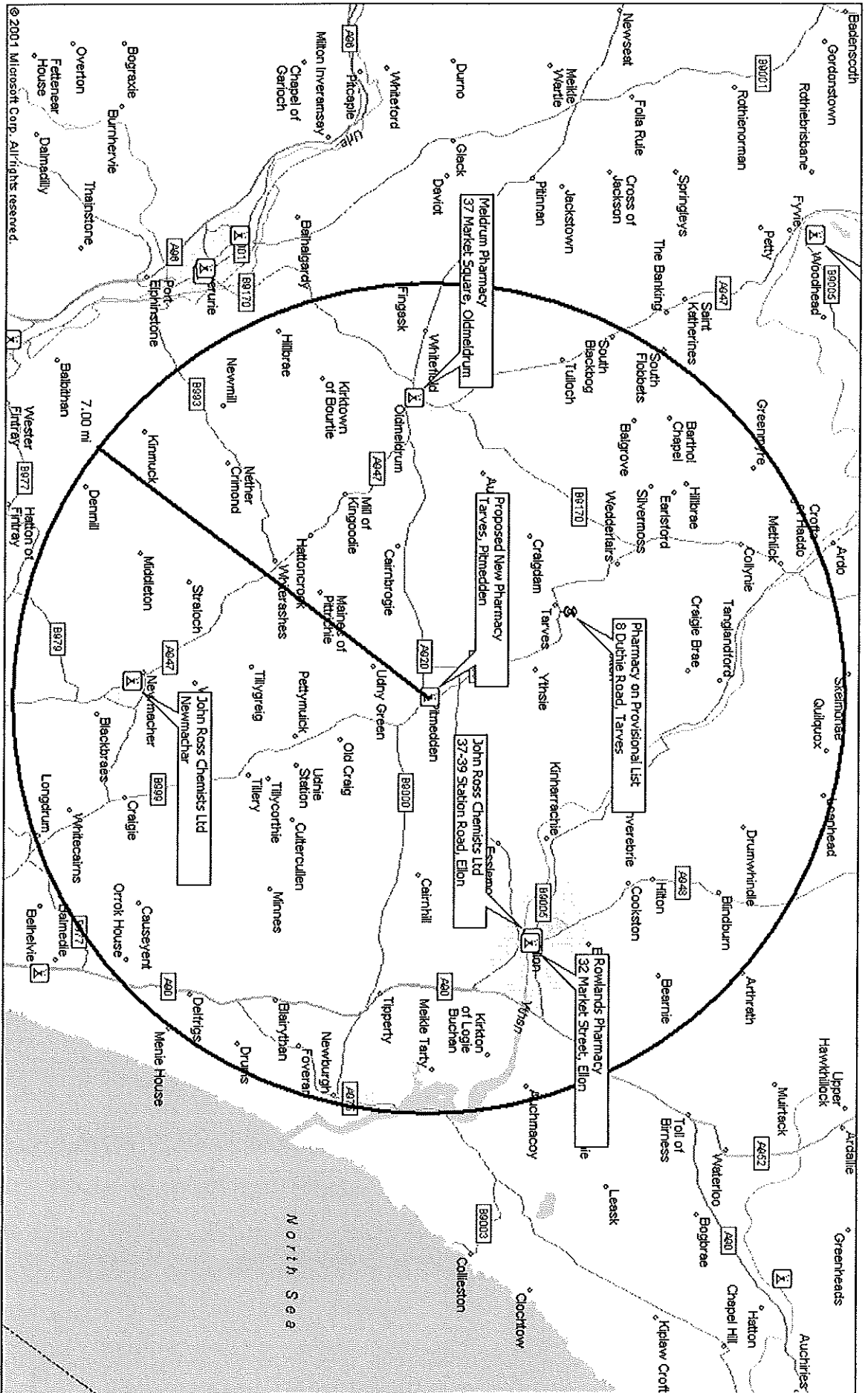
Could you please address all correspondence directly to me at the above address?
I will take the responsibility of copying the director. Thank you.

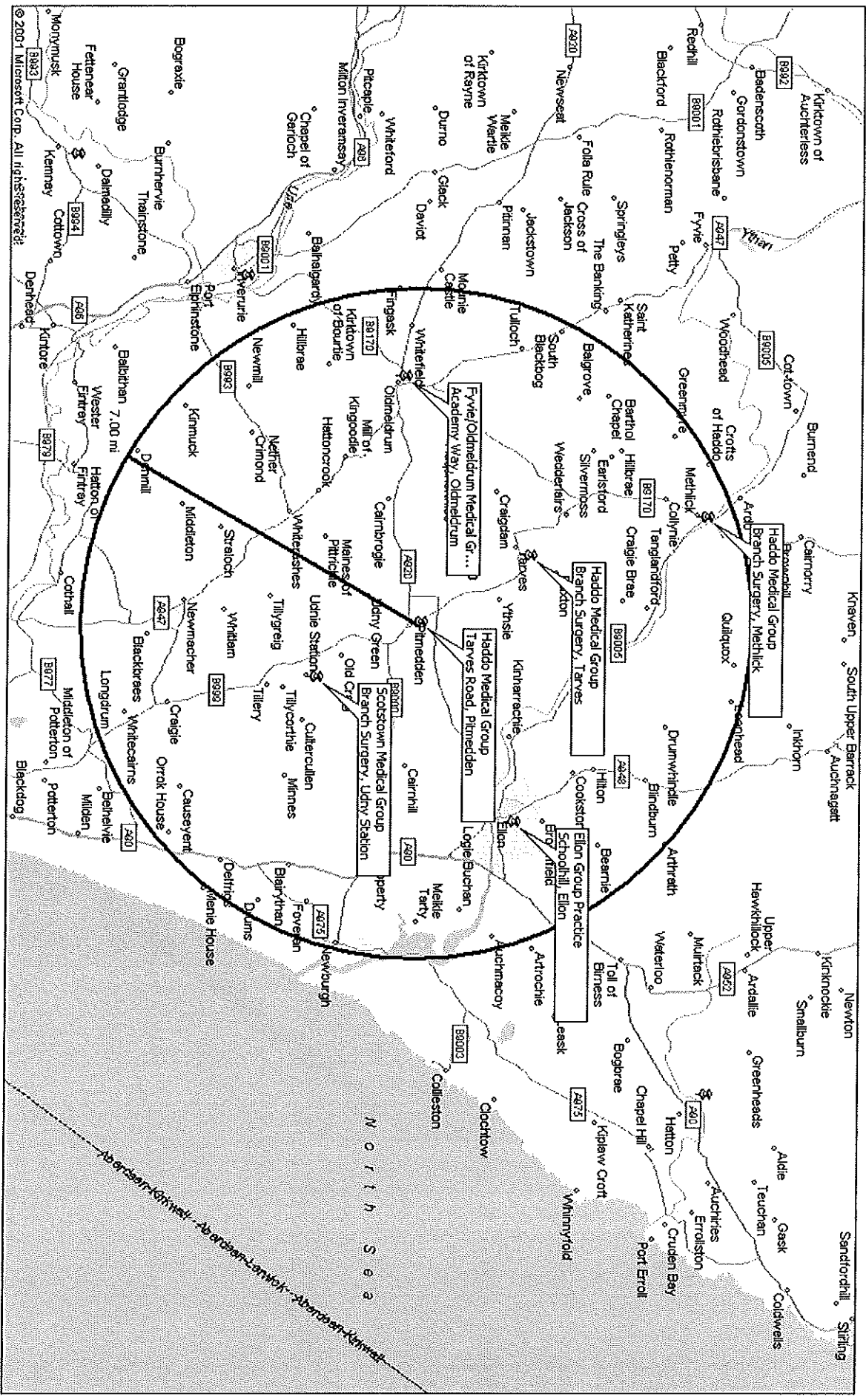
Yours faithfully

A handwritten signature in black ink, appearing to read 'Nigel Morley', with a long, sweeping underline that extends to the right.

Nigel Morley, MRPharmS

Enc: Covering Letter from Director
Form A
Letter of Appointment as Superintendent Pharmacist





Pitmedden GP Map

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