

Question:

Can you please forward a copy of the PPC minutes taken at the Coloplast PPC hearing held on 02/7/25?

Response:

Please find attached the minutes of the PPC meeting as requested. You will notice a small number of redactions have been made to the contents. The redactions have been applied via application of Section 40 of the FOI Act – Personal Information and also Section 43(2) – Commercial Interests.

Further details in respect of the exemptions and the associated Public Interest Test for Section 43 can be found in the attached appendix.

Date response issued: 2nd March 2026
Reference Number: DOH 2026-0007

Pharmacy Practices Committee
Strategic Planning & Performance Group (SPPG)

Minutes of the Meeting held on

2nd July 2025 @ 10.00hrs

5th Floor Meeting Room, 12/22 Linenhall Street, Belfast

Members in attendance	
Tracey McCaig	Chair – Interim Chief Operating Officer (DoH)
Michael Cooper	Pharmacist: Contractor Member of PPC
Peter Donaldson	Non-Pharmacist Member of PPC
Wilson Matthews	Non-Pharmacist Member of PPC
Una O’Farrell	Pharmacist: Non-Contractor Member of PPC
Peter Rice	Pharmacist: Contractor Member of PPC
SPPG Officers in attendance	
Kathryn Turner	Assistant Director, Pharmacy and Medicines Management (Interim), SPPG
██████████	Pharmacy Adviser, SPPG
██████████	Drug Tariff Co-ordinator, SPPG
██████████	Corporate Secretariat, SPPG

1. Welcome and Introduction

Mrs McCaig, Chair, commenced the meeting by welcoming all members to the Pharmacy Practices Committee and confirmed no apologies had been received for this meeting. All members introduced themselves and their role within the Committee.

2. Chair's remarks

Mrs McCaig invited [REDACTED] to provide Members with a brief summary of the training delivered in the autumn of 2024, focusing particularly on the areas relevant to the decisions that the Committee will be asked to make today in relation to the applications for a Minor Relocation of Pharmacy Premises and a New Appliance Contractor. She reminded Members that the purpose of today is to make decisions in line with the Pharmaceutical Regulations 1997. In terms of the new application the regulation is 6.9 of the Pharmaceutical Regulations 1997 and 6.6 for the Minor Relocation.

Mr Rice queried in terms of 'neighbourhood', the concept of a neighbourhood is geographical and social and cannot be varied in order of the type of merchandise sold or service provided and queried how do we qualify that the service provided by an appliance contractor is not different.

[REDACTED] advised that in terms of neighbourhood a decision had to be made by SPPG on who would be notified and who could potentially be affected by this application for a new appliance contract and hence all pharmacy contractors were notified. He confirmed that it is the Committee's decision to define what the Neighbourhood is for this new appliance contractor application.

Declarations of Interest

Mrs McCaig invited Members to declare any interests on the two applications under consideration today.

Mr Rice advised that he was one of the notified contractors for the minor relocation application.

Ms McCaig thanked Mr Rice confirming that he was not one of the voting Members of the Committee his declaration would be recorded.

Mrs Turner highlighted a potential conflict in relation to the application from Coloplast Ltd for Inclusion on the Pharmaceutical list as an Appliance Contractor, advising that for the purpose of this application the 'Neighbourhood' had been defined as the whole of Northern Ireland, and therefore both of the contractor pharmacists on the Panel were notified.

Mr Donaldson updated Members of a precedent previously set in relation to a similar application which had been received and debated at the time as to whether the Contracting Pharmacist was entitled to be in the room as the only other option was to invite every Pharmacist from across NI.

3. Minor Relocation A & FA Dundee Ltd

Before inviting the Applicant to join the meeting, Mrs McCaig asked the Committee if there were any comments they would like to make in relation to this application.

Mr Donaldson noted that he had been involved in a similar minor relocation application in the past which was initially approved by the Pharmacy Practices Committee, the decision was then appealed and the decision was reviewed by the National Appeals Panel (NAP), who endorsed the decision of the Pharmacy Practices Committee. Subsequently, the decision proceeded to Judicial Review. The outcome of the Judicial Review was that the decision of both the PPC and NAP was over-ruled, and the application was rejected. The reason for this was the proposed new pharmacy site was intending to provide additional services. The Contractor had claimed that the services offered would be identical in the new location, which was later found not to be the case and Mr Donaldson emphasised the importance of ensuring that any proposed services are truly identical to existing ones.

Mrs McCaig welcomed [REDACTED] and [REDACTED] to the meeting and confirmed that the Pharmacy for review involved a change of location from premises at 42 Main Street, Crumlin, BT29 4UR to 27 Main Street, Crumlin, BT29 4UR. It was noted that no objections had been received in relation to this application.

[REDACTED] was invited to present on his application for a minor relocation.

[REDACTED] began by thanking the Committee for the opportunity to present. He then outlined the definition of 'neighbourhood' as it pertains to the current application, noting that A&FA Dundee Ltd had previously been involved in a similar application in Crumlin. At that time there was general agreement between the parties regarding the definition of neighbourhood and after reviewing the evidence, the Committee determined that the appropriate definition of neighbourhood for the application was the settlement development limit as detailed in the Antrim Area Plan and for the purpose of the application being considered today, they would not defer from this definition.

He outlined the typical characteristics of the neighbourhood which includes housing developments, shopping facilities, places of worship for all denominations and schools. In Crumlin in particular, these features are evident with the housing developments primarily located in and around the town centre.

Specifically, in relation to healthcare, Crumlin is served by a single medical facility, Crumlin Medical Practice and one Pharmacy. A&FA Dundee Ltd (T/A Medicare) collects prescriptions from both the Glenavy Practice and Crumlin Practice, dispensing them for patient collection. The Pharmacy operates 6 days a week with a second pharmacist available onsite 4 days per week. In addition to standard dispensing services, the Pharmacy also offers Minor

Ailments services and undertakes smoking cessation services and Opioid Substitution Therapy.

He further stated that, irrespective of how the neighbourhood is defined, this application possesses all the characteristics of a minor relocation and should be assessed accordingly. He confirmed that the proposed relocation is within the same neighbourhood and logically follows that the population served will remain unchanged.

Currently the Medicare Pharmacy is located in a high profile, highly accessible location and benefits from layby parking, is within easy walking distance from a number of free parking facilities and this position would remain the same in the new relocation. There will be no change to the pharmacy provision provided by Medicare and the retail offering in terms of merchandising and product offering will remain the same. Finally, and most importantly there is no appreciable effect to Medicare or any other contractor on the Pharmaceutical List as there are no other pharmacies in the neighbourhood.

In summary, ██████ stated that their position is that the proposed relocation remains within the same neighbourhood, serves the same population and will continue to offer the same services and retail provision. He further noted his understanding that no objections have been received in relation to the application. If approved, the relocation would enable Medicare to enhance and expand its services for the benefit of patients in the local area. On this basis, they respectfully encouraged the Committee to approve this application.

Mrs McCaig thanked ██████ and ██████ for their presentation and requested any feedback or opinions from the Panel.

Mr Matthews asked a question in relation to location, as in the former Ulster Bank building and asked that from the patient point of view how they intended to change the building to make the building more inviting.

██████, advised that they wanted to maintain the character of the building, and advised that when the shutters are up and windows are opened it will be open and prominent and will be an attractive space.

Mr Donaldson raised a query on a previous application that had proceeded to judicial review, during which the decision made by the Pharmacy Practices Committee, and endorsed by NAP, was overturned. He noted that, during the presentation of the application it was stated that the services would remain the same, however, there was a reference to improved services toward the end of the presentation. ██████ clarified that the reference to improvement pertained to the delivery of services, rather than a change in the nature or scope of the services themselves.

Ms O'Farrell asked if there will be disabled access to the new premises. ██████ confirmed there will be level access and an automatic door which will make access easier for clients with a disability.

There were no further questions from the Panel. The Chair thanked [REDACTED] and [REDACTED] for their presentation, advising that the Committee will undertake to make a decision today in respect of their application and they will be formally advised according to the Regulations. The applicants left the meeting.

The Chair commented on a very clear presentation from her point of view and sought views from Members.

During discussion the following points were noted:

- Members were happy the building would be modernised.
- In terms of appreciable affect there are no other pharmacies in neighbourhood
- A straightforward, text book case of a minor relocation.

Mrs McCaig formally invited the Contractor Pharmacists, Mr Cooper and Mr Rice to withdraw from the meeting to allow the Panel to make the decision

4. Discussion and Recommendation

The Panel agreed unanimously to **APPROVE** the application under Regulation 6.6.

The Chair invited Mr Cooper and Mr Rice to re-join the meeting. Both were advised of the decision.

7. Application for inclusion in the Pharmaceutical List as an Appliance Contractor

Mrs McCaig progressed the meeting to discuss the Application for Inclusion in the Pharmaceutical List as an Appliance Contractor from Coloplast Ltd.

Prior to the applicants and objectors joining the meeting the Panel discussed the nature of the application. [REDACTED] advised the Committee that it may be helpful to know that there are currently only two Appliance Contractors on the Pharmaceutical List in Northern Ireland, Sangers Surgical and Respond. Sangers Surgical will be represented by [REDACTED] today, however, it was also noted that there are patients in Northern Ireland currently receiving supplies from Coloplast and whether or not this application is approved, this will continue.

The applicant [REDACTED], Vice President for Commercial Operations accompanied by [REDACTED], Country Manager for Ireland and [REDACTED], Nurse, Coloplast were invited into the meeting along with the

objectors nominated to speak, [REDACTED], Head of Professional Services, Gordons Chemist and [REDACTED], Head of Sangers NI Ltd.

[REDACTED], Business Manager (Sangers NI Ltd) was also in attendance but did not speak.

Mrs McCaig introduced herself and the other Committee Members and invited Coloplast to present.

Commencing [REDACTED] provided Members with a brief history of the Coloplast Charter, a Home Delivery Service in Northern Ireland. Coloplast Charter started in 1994 during which time they have been servicing patients in Northern Ireland (NI). Historically, NI patients have been supported from the Head Office in Peterborough. In 2015 the Shore Road location was opened to include office space and a stock room and product was brought to NI to enable quicker delivery to customers. In 2021, the space was expanded to include a Clinic Room and again in 2022 to include a Contact Centre to support the Coloplast Charter.

Following market research and views received from Health Care Professionals (HCPs) and customers in NI it was decided to localise all Charter NI services in the Shore Road location to provide a local service for local people.

Continuing, [REDACTED] advised that all Northern Ireland Hospitals are supported by Charter NI, 20-30 patients are seen per week in clinic and approximately 400 prescriptions are collected weekly from GP Practices. In addition, they run one Educational Day per month for HCPs.

Furthermore, [REDACTED] explained that Coloplast are approximately 23% of the market, but not in a dominant position.

[REDACTED] provided further evidence of how Coloplast support the Health Service and patients in NI explaining that they have a sponsorship agreement with Belfast Health and Social Care Trust (BHSCT) where they have provided sponsorship to the stoma care services for over 25 years to date and some of the patients which are seen in the clinic in Shore Road are patients who have been discharged by BHSCT post surgery and are cared for by three Coloplast Nurses who operate either a home visit model or the patients come to the premises on Shore Road.

Continuing, [REDACTED] went on to explain that customer satisfaction is taken very seriously and outlined some of the key statistics adding that Coloplast are the only Care Quality Commission (CQC) outstanding DAC in the whole of the UK.

[REDACTED] then handed over to [REDACTED] who began by explaining that she is one of the Nurses working with Coloplast and has a long history in Stoma Care. She described a pathway in place for approximately 11 years, whereby in the first 6 weeks of a patients discharge from Hospital they are seen in the Shore

Road Clinic. Contact is made with the patients in the first 48hrs after discharge. Three full day clinics are run which see up to 8 patients per day. They also do ostomy, Intermittent Self Catherisation (ISC) and Band Management Clinics. A telephone service also operated.

Adding to this [REDACTED] advised that they provide free sample stock to all Hospitals in NI. There are currently 5 whole time equivalent Prescription Collection Drivers collecting prescriptions from GP Surgeries. She advised these staff were brought on board 10 years prior as a direct result of guidance received from Medicines Management on non-retrospective prescribing advising that they adhere strictly to medicines management guidance to ensure that they do not send any stock until prescription is physically collected.

In terms of commitment to patients, [REDACTED] advised that there has been significant investment in technology and streamlining of processes over the last number of years to make sure patients can order in a simple reliable way and also receive notifications in regards to their orders and when they can expect to receive. There is also an interpreter service for patients.

Mrs McCaig queried if the site where they see patients 6 weeks post surgery is a separate service with BHSCT or is this from a product only perspective.

[REDACTED] advised that they have a contract specifically with BHSCT.

Mrs McCaig invited comments/queries or further points of clarification from Members and the following points were noted.

Mr Matthews asked that if he was a patient in Hospital, how would he know whether to go to Coloplast or another Pharmacy.

[REDACTED] advised that when a patient is being prepared for discharge from Hospital, Nurses will go through the offering with patients and it is up to the patient to make the decision, if they chose to go with Charter the Nurse will register the patient. They will only dispense if a prescription is received from a GP.

Mr Donaldson, stated that the fundamental question he had considering how well Coloplast were doing with 23% of the market share was why do they need to be included on the Pharmaceutical List?

[REDACTED] advised that they want to continue to invest in NI and they have other commercially sensitive plans which cannot be shared at this time.

Mr Donaldson further queried that as they currently supply the whole of Northern Ireland did they define the 'Neighbourhood' as Northern Ireland and in this Neighbourhood would they say the existing services is adequate or inadequate?

and patient service at the forefront. There are approximately 50 staff directly employed by Sangers NI and a further 120 jobs across NI supported indirectly through their own internal supply chain.

[REDACTED]

[REDACTED]

Product availability index in June 2025 was 98.2% across a range of 9,000 products. Of this 9,000, Sangers actively hold 4,000 products in stock in NI with a prompt delivery service within 24hrs and their systems and processes reflect the highest standards of safety and accountability.

He further stated that he is not aware of complaints, access issues or performance concerns raised with the Strategic Planning and Performance Group (SPPG) regarding the current DAC service available to patients in Northern Ireland. He also referenced a recent new appliance contractor application that was rejected in September 2023, noting that to his knowledge there has been no material change in patient need, service provision or clinical access since that decision and believes this reinforces the position that the current service is sufficient.

Concluding, [REDACTED] stated in Sangers NI Ltd view, the application under review does not meet the required threshold to demonstrate unmet patient need, service inadequacy or access limitations, clinical or geographical. The current DAC Model continues to deliver safe, high quality, patient centred care across NI and is fully compliant, logistically sound and clinically integrated, supported by over 30 years of local experience delivering specialist appliance services.

There is no evidence of service deficiency and no material change in circumstance since the rejection and appeal dismissal of a previous application. Therefore, it is neither necessary nor desirable to approve the application given there is an adequate provision of appliance services in the Neighbourhood which has been defined as Northern Ireland.

[REDACTED] was invited to present on behalf of Gordons Chemist.

[REDACTED] commenced by outlining Gordons have 55 Pharmacies across Northern Ireland in the area in which the applicant proposes to provide services. In terms of the Neighbourhood, he said the Panel may wish to consider previous decisions in respect of applications for DAC Licences, the most recent of which was made by LC Healthcare in September 2023 and represented the second application by LC Healthcare which was declined.

In the case of the Application from LC Healthcare, the Committee accepted the applicants view that neighbourhood should be defined as NI. The decision was subsequently reviewed by the Chair of the NAP further to the applicant appealing the refusal of the application and the Chair did not challenge this definition of Neighbourhood and it was his view that the widest possible definition of neighbourhood presents the applicant with an insurmountable challenge of demonstrating the inadequacy of service provision across NI.

With regard to location within the Neighbourhood whilst the basis of the application appears to be a mail order service, it is understood the site must be accessible and should be able to avail of face to face services and the availability of a clinic at the Shore Road location is mentioned in the applicants presentation, however it was noted that the site does not appear to be one which would lend itself to being accessible to patients from the majority of NI as the premises are situated in Belfast and only accessible to a portion of those living in NI. ██████ referred to 2017 statistics provided by the Northern Ireland Statistics and Research Agency (NISRA) figures showing the average travel time to a Pharmacy from all designated small areas in NI to be 3.2 minutes.

He added that it is therefore, for the Panel to decide as detailed in Regulation 6.9 of the Pharmaceutical Services Regulations NI if its is satisfied that the provision of Pharmaceutical Services and 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.

Adding to this, ██████ said that with regard to necessary and desirable, Gordon's Chemist provide all available SPPG commissioned services from each of their branches and most Pharmacies use Sangers Surgical for the supply of appliances with no gaps in services provision and whilst there is the option for patients to obtain appliances directly from existing Appliance Contractors in Northern Ireland or GB, they would contend that Community Pharmacy in NI offers an excellent service in this regard and providing local services to local people is something Community Pharmacy do each day within their local neighbourhoods throughout NI.

In summary, he noted there has been no significant changes in appliance supply services since the last application, and granting this application is neither necessary nor desirable as patients in NI are already well provided for in relation to the appliance supply and the existing network of community pharmacies across the area. To this end, ██████ respectfully requested the Committee refuse this application.

Mrs McCaig thanked both the Applicant and Objectors for their time explaining that the Panel will consider both representations and advise accordingly.

The Applicant and Objectors were asked to leave room.

The Committee discussed a previous case cited by the Objectors, noting that it involved a very similar proposal. The neighbourhood was also considered, particularly in relation to the adequacy of existing services. At the time, there had been no complaints or evidence to suggest inadequate provision by the Community Pharmacists and as such there was no identified need to alter the current system. The application was rejected by the PPC; the applicant appealed, but further to review by the Chair of the National Appeal Panel (NAP), the appeal was dismissed.

The Chair noted that a decision regarding this application will be based on regulatory considerations. Additionally, it was noted that the applicant is already present in the area and their proposal could impact market share, local dynamics and service offering.

The Chair concluded that opposing the application on these grounds may seem counter intuitive.

There was also some discussion on the Regulations set in 1997 being out of date and in many respects they create as many problems as they solve and often stifle rather than support innovation.

The Committee agreed that everyone is trying to work together to improve and commission additional services and updated Regulations would support a more modern offering and a new way of working.

It was also noted that despite the decision made today, no patient will be worse off. Coloplast currently have 23% of the market share and this service will continue.

8. Discussion and Recommendation

Mrs McCaig asked Mr Cooper and Mr Rice to leave the meeting to allow for a decision to be made.

It was unanimously agreed that from the evidence presented there was no evidence of inadequacy in the current provision and on that basis, it was neither necessary or desirable to allow this application.

However, Ms O'Farrell caveated this with her thoughts that it may be desirable to have a different nature of service, not convinced commercial cost savings are not being hidden.

The Committee formally agreed that the Neighbourhood was NI.

The Panel agreed unanimously to **NOT APPROVE** this application based on 6.9 of the Regulations.

The Chair invited Mr Cooper and Mr Rice to re-join the meeting who were then informed of the Committee's decision.

9. **AOB**

The Panel engaged in further discussion regarding concerns about the overall adequacy of existing regulations in addressing current and future practices.

There being no further business the Chair thanked the Panel for their time and input to the meeting today and the meeting was then closed.