

NATIONAL APPEAL PANEL

constituted under

**THE NATIONAL HEALTH SERVICE (PHARMACEUTICAL SERVICES)
(SCOTLAND) REGULATIONS 2009 (AS AMENDED)
("the Regulations")**

DECISION

of the

CHAIR

of

THE NATIONAL APPEAL PANEL

in the application relating to

165c CHAPEL STREET, AIRDRIE, ML6 6LN

Applicants and Appellants:	Healthcare Pharmacy Limited
Pharmacy Practices Committee:	NHS Lanarkshire
PPC Decision Issued:	10th October 2013
Panel Case Number:	35 (2013)

Decision of the Chairman of the National Appeal Panel

1. Background

- 1.1 Health Care Pharmacy Limited, 55a Alexander Street, Airdrie, ML6 0ED (the "Appellants" or "Applicants") made an application for inclusion on the Pharmaceutical List to the Board of NHS Lanarkshire ("the Board") to provide pharmaceutical services in respect of premises at 165c Chapel Street, Airdrie, ML6 6LN on 9th January 2013.
- 1.2 The Pharmacy Practices Committee of the Board ("the PPC") met on 23rd September 2013 in order to determine the Application following which they issued their decision refusing the Application on 10th October 2013.

2. Grounds of Appeal

- 2.1 The Appellant has appealed following upon the Decision of the Board lodging a Notice of Appeal dated 30th October 2013 on the grounds that there had been (a) a procedural defect in the way the Application had been considered by the Board (b) there had been a failure by the Board to properly narrate the facts or reasons upon which their determination of the Application was based and (c) there had been a failure to explain the application by the Board of the provisions of the Regulations to those facts. The Grounds of Appeal under these circumstances may be summarised as follows:

2.1.1 Procedural Defects.

2.1.1.1 In terms of paragraph 2 of Schedule 3, the Board is required to take reasonable steps to consult with persons to whom pharmaceutical services may be provided as a result of the Application. Either they failed to do so or alternatively failed to communicate the results of such consultation to the Applicants. Further the Appellants' view was that the Board had relied on the consultation exercise undertaken by the Applicants. In terms of that paragraph the consultation is mandatory.

2.1.1.2 On page 17 of the minutes of the Hearing the PPC considered supplementary submissions to which issue has been taken by the Appellants in relation to those enumerated (iii), (iv), (vi) and (vii). Insofar as the latter is concerned the Board was required to give notice to inter alia the "Area Pharmaceutical Committee" ("the APC") and to have regard to any representations received from them. An email bore to have been received from the "Area Pharmaceutical Advisory Committee" dated 18th February 2013 but there was nothing in the papers which bore to give representations of said APC. Insofar as this and the other matters enumerated the Appellant had no notice that these had been considered by the PPC as part of its decision making process and as such there was a breach of natural justice.

2.1.1.3 There are notes that the PPC had regard to the 2001 census whereas they ought to have used information from the 2011 census, if they were giving consideration to demographic information.

2.1.1.4 The Appellants state that the quorum for a meeting of the PPC is the Chair, two lay members (or depute members one of whom is not included in the Pharmaceutical List), and two pharmacist members. They state that at the commencement of the meeting there must be an equal number of lay and pharmacist members. In the present case there were three lay members and two pharmacist members present, but this was non-conform to guidelines and legal requirements.

2.1.2 Failure to properly narrate the facts or reasons

2.1.2.1 The PPC has not made it clear why they regarded the residents of Golfhill as not being within the Appellants' neighbourhood other than stating that Golfhill had a very different demographic to Thrashbush/Holehills and that

the Golfhill residents were unlikely to recognise themselves as living in an area of deprivation. No distinction was made about Golfhill from other areas of private housing within the neighbourhood. They did not make clear what difference it made whether the residents of Golfhill consider themselves as living in an area of deprivation.

- 2.1.2.2 The PPC extended the southern boundary of the neighbourhood "to the far side of Chapel Street" and gave as the only reason for doing so that this was where the Community Centre was located. No explanation as to the relevance of this was given. In addition, the meaning was unclear, standing the boundary to the "far side of Chapel Street" without including the buildings sitting to the south of the far side of the street itself would include no buildings. It was necessary to accept that the decision must be meant to include the Community Centre and must be thought sits south of "the far side of the street". This is unclear and inadequately narrated and explained.
- 2.1.2.3 The PPC ought to have explained what weight it has attached to the factors that it had considered relevant. It is not clear what weight was given to individual representations as well as the local MSP and Member of Parliament. This was relevant to the issue of whether it was "desirable" to grant the Application.
- 2.1.2.4 The PPC did not explain what, if any, weight, it gave to the consideration of the material identified at paragraph (i) to (ix) on page 17 of the Decision.
- 2.1.3 Failure to explain the application of the Regulations to the facts and erring in law.
 - 2.1.3.1 The Appellants referred to Regulation 5(10) that refer to services in the neighbourhood and not "for" or "to" the neighbourhood. The PPC had taken the view that provision of Pharmaceutical Services by several other pharmacies outwith the neighbourhood satisfies the requirement of this Regulation. This is a failure to apply the statutory test. The PPC (on page 19 of the Minutes of the Hearing) suggests there to be no evidence of inadequacy of services provided "into" the neighbourhood.
 - 2.1.3.2 The Board is a public authority for the purposes of Section 6 of the Human Rights Act 1998 and it is accordingly unlawful for the Board to act in a way that is incompatible with a Convention Right in terms of the Act. Amongst those rights enshrined in Article 6 is that in a determination of a party's civil rights and obligations, everyone is entitled to a fair and public hearing. The Appellants aver that the Human Rights Act makes it clear that on providing a fair hearing the tenets of natural justice have to be adhered to and there is a prohibition in acting in a manner that is discriminatory or suggests a lack of impartiality. The PPC determined the Golfhill area was excluded from the neighbourhood as it had a different demographic to Thrashbush/Holehills and that Golfhill residents were unlikely to recognise themselves as living in an area of deprivation. On that basis they decided that the northern boundary of the neighbourhood would be Dykehead Road. Golfhill is a uniquely owner/occupied private housing area. Excluding Golfhill was discriminatory in relation to either and/or residents of private housing on the one hand and residents of public housing on the other. The PPC has not been impartial. It has excluded Golfhill leaving it a distinct neighbourhood on its own. A public authority should not on grounds of affluence act against the needs of any particular population in relation to the provision of pharmaceutical services.
 - 2.1.3.4 The Appellants referred to the decision of Lord Nimmo Smith in the Judicial Review petition by Boots Chemist (3rd December 1999) wherein it was stated that neighbourhood was not defined by the Regulations and must therefore be given the meaning which would normally be attributed to it as an ordinary word of the English language. "It has connotations of vicinity or

nearness... the word neighbourhood in Regulation 5(10) of the 1995 Regulations means an area which is relatively near to the premises in question which need not have any residents and which can be regarded as a neighbourhood for all purposes". The Appellants have argued that the proper interpretation of neighbourhood in terms of Lords Nimmo Smith's opinion is that it remains constant regardless of the context in which it has been defined. For example, the neighbourhood in which a Tesco superstore is located would be identical to the neighbourhood with a small corner shop on the same site as the neighbourhood. It is not the same as "catchment area". The Appellants have argued that the PPC have picked at random, schools, businesses, churches and residential areas and that these were not features which necessarily defined a neighbourhood. A decision to extend the southern boundary was arbitrary and irrational and accordingly an error in law.

2.1.3.5 The test in Regulation 5 involves the Board in determining whether or not it is satisfied that the provision of pharmaceutical services is necessary or desirable. The Appellants have argued that this is a two part test and that the PPC requires first to determine whether provision of pharmaceutical services is necessary. If so, there is no need to consider desirability. If, however, it considers that the provision is not necessary then the PPC requires separately to consider whether it is desirable. The PPC has further not given weight to the representations submitted by the local MP, MSP and various councillors all of whom suggested that the Application was desirable.

2.1.3.6 In accordance with Government guidelines Health Boards should do everything in their power to ensure that PPC Decisions are reached quickly. In terms of Article 6 and that the Applicants are entitled to a decision within a reasonable time. It is submitted that the time lapse between the Application being received on 9th January and the Hearing taking place on 23rd September was unreasonably long, unexplained and disconform to the requirements of Article 6.

3. The Evidence of the Parties

3.1 The evidence of Mr Asif Majid on behalf of Health Pharmacy Limited may be summarised as follows:-

3.1.1 Mr Majid, appearing on behalf of the Applicants, indicated that the boundary of the neighbourhood as determined by him would be the Airdrie Golf Club and Roughcraig Glen to the north, the A73 Stirling Road to the east, Chapel Street/Aitken Street and Black Street to the south at Commonsides Street and Glenmavis Road to the west. This was otherwise known as Thrashbush and Holehills, a distinct area surrounded by open land and main roads. It was a neighbourhood for all purposes and included two primary schools, a high school, convenience stores, places of worship and others. There was a shopping parade. Within the neighbourhood there was a community facility which provides for various community projects and had a population of around 6,500. This is one of the most deprived areas in both Airdrie and Scotland. He disagreed with the neighbourhood as defined by the Area Pharmaceutical Committee in relation to the northern boundary. The APC defined the northern boundary as Dykehead Road.

3.1.2 He stated that the nearest pharmacy is Boots in the town centre and which was closed at lunch time between 2pm-2.30pm. There being no pharmacy within his defined neighbourhood, the Applicants view was that the provision must be considered perforce inadequate. There was one controlled crossing point located approximately one third of a mile from the access to Boots Pharmacy which would be difficult for elderly or those less mobile, disabled and those mothers with young children in prams or pushchairs. Those driving a car would find the parking facilities at Boots to be limited. He stated that there were five pharmacies in Airdrie town centre and access had been denied to individuals who do not need to travel to the town centre.

- 3.1.3 Mr Majid argued that the current provision is inadequate on the basis that the neighbourhood is highly populated, the public transport provision is insufficient to meet the residents' needs and that there is only one bus route that takes residents into the town centre. Access in terms of distance to other pharmacies is unreasonable, especially so if proceeding on foot or by bus. Further, there are no general medical services within the area and it was reasonable to offer the population of Thrashbush/Holehills access to health services in their area by way of a pharmacy.
- 3.1.4 Mr Majid acknowledged that his consultation process secured a poor response in that it was conducted over Christmas and New Year. As a result his company instructed canvassers to seek responses to a questionnaire and as a result of which there was overwhelming support for the proposed pharmacy. Mr Majid stated that it would take approximately 15 minutes to walk from his proposed premises to Boots Pharmacy at Bridge Street although that would depend upon the age and mobility of the individual. Mr Majid expressed the opinion that Golfhill was on the boundary and that only part of the Golfhill area would be in the Thrashbush/Holehills neighbourhood. He stated that, in response to a question from a member of the PPC, that the three questions asked on the questionnaire were framed to simplify the response process but did not respond to the comment that they were leading questions.
- 3.2 The evidence of Mr Arnott of Lloyds Pharmacy Limited may be summarised as follow:-
- 3.2.1 Mr Arnott was of the view that the Applicants had defined his neighbourhood with the sole intention of excluding existing pharmacies by taking in Chapel Street, Aitken Street, and Black Street as southern boundary. That being the case there would be four pharmacies providing services to that neighbourhood. Taking other boundaries as described by Mr Majid he argued that the neighbourhood would have six pharmacies adequately serving the population. The National Appeal Panel has, in any event, in the past determined that adequate pharmaceutical services may be provided to a neighbourhood from pharmacies situated outwith that neighbourhood. Mr Arnott reported that he had walked from the Boots Pharmacy to the proposed premises. There were no barriers and no issues with gradients and the walk took five minutes and the distance involved less than 800 yards. There was a further two minute walk to the Lloyds Pharmacy. All residents currently access their daily needs in the town centre which include banks, supermarkets and the Airdrie Community Health Centre. He was of the view that the Applicants did not establish that the existing provision was inadequate.
- 3.3 The evidence of Mr Tait representing Boots UK Limited may be summarised as follow:-
- 3.3.1 Mr Tait stated that the application related to a site 480 metres from the current Boots Pharmacy in Bridge Street and which was only a 6/7 minutes walk away.

4. The PPC's Decision

- 4.1 In coming to his decision, the PPC considered inter alia the oral evidence of the parties, the papers submitted by them or on their behalf the location of the proposed pharmacy, prescribing statistics of doctors and dispensing statistics of pharmacies within the town of Airdrie, demographic information and others all as referred to on page 17 of the Minutes of the Hearing of the PPC.
- 4.2 In connection with the definition of **neighbourhood**, whilst noting it was difficult to define in a sprawling conurbation of Airdrie it considered the area of Golfhill should not be included as it had a different demographic to Thrashbush/Holehills and that those residents of Golfhill were unlikely to recognise themselves as living in an area of deprivation. The PPC considered Dykehead Road as being a more appropriate northern boundary. As to the western boundary they considered Commonsides Street/Glenmavis Road to be appropriate as it was a natural boundary and contained housing of a similar type and for the same reasons Chapel Street/Aitken Street/Black Street and Stirling Road were the south east boundaries respectively of the proposed neighbourhood. The southern boundary extended to the far side of Chapel Street as this was where the Community Centre was located.
- 4.3 The Committee thereafter considered the question of **adequacy** and noted that there were no

pharmacies within the neighbourhood as defined although one did share its southern boundary. The PPC accepted that for many residents especially those in Holehills that the location of the proposed pharmacy would be convenient and that the survey submitted by the Applicants supported that view, but did not consider that the other shops in the parade offered the standard needs for goods and services and for which the residents would travel outwith the neighbourhood. Five pharmacies could be accessed reasonably easily on foot, by public transport or by car or bus or otherwise into the town centre and that the existing pharmaceutical services to the defined neighbourhood provided satisfactory access for those residents in the neighbourhood. The PPC was of the view that no evidence had been produced by the Applicants or had been made available to it demonstrating that the services currently provided in the neighbourhood were inadequate.

- 4.4 The Committee having decided that the provision of Pharmaceutical Services within the neighbourhood in which the premises were adequate decided that it was neither necessary nor desirable to grant the Application.

5. Discussion and Reasons for Decision

- 5.1 The Regulations require to be looked at in light of the object of the Scheme set out under the National Health Service (Scotland) Act 1978 and in particular Section 27 in that it shall be the duty of every Health Board to make, and in accordance with the Regulations, arrangements as to its area for the supply to persons who are in that area of:-

5.1.1 (1) proper and sufficient drugs and medicines...which are ordered for those persons by a medical practitioner in pursuance of his functions in the health service...

5.1.2 (2)(10) an application made in any case... should be granted by the Board after procedures set out in Schedule 3 have been followed, only if it is satisfied that the provision of pharmaceutical services at 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 by a person whose name is included in the Pharmaceutical List...

5.1.3 Schedule 3 2(1) ...in considering an application to which Regulation 5(10) applies, the Board shall have regard to (a) the pharmaceutical services already provided in the neighbourhood of the premises named in the application by persons whose names are included in a Pharmaceutical List...(b) any information available to the Board which, in its opinion, is relevant to the consideration of the Application.

5.1.4 (2) The Board may determine any application in such manner as it thinks fit and may, if it considers that oral representations are necessary determine the Application for a Hearing of any oral representations.

- 5.2 The provisions of the Act are largely replicated in the Regulations and in particular, Schedule 3 thereof. Part 1 provides that the Board shall give notice of the Application to various parties who particularly may have an interest in the Application and insofar as Part 2 is concerned, take reasonable steps to consult with persons to whom pharmaceutical services may be provided as a result of the Application by way of public consultation.

- 5.3 In Paragraph 3 the Board shall have regard to the Pharmaceutical Services already provided in the neighbourhood, any representations received by the Board (under Paragraph 1) and any information available to the Board which in its opinion is relevant to the consideration of the Application. It is important to note that the Board may, in accordance with this Schedule, determine any application in such a manner as it thinks fit

- 5.4 The Grounds of Appeal are limited to areas where the PPC has erred in law in its application of the provisions of the Regulations, that there has been a procedural defect or been a failure by the Board to properly narrate the facts and reasons upon which the determination of the Application was based or have failed to explain its application to the facts.

- 5.5 The issue of adequacy of services within an area or "neighbourhood" is primarily a question of fact. Their Lordships in *Lloyds Pharmacy Limited v National Appeal Panel* (2004) SC703 quoted with approval case of *R v Yorkshire Regional Health Authority*, 1996 (35BMLR 118) on similar English provisions that the Regulations with regard to adequacy involved a value judgement on the part of the Decision Maker.... "...value judgements of their nature are intuitive rather than made according to fixed standards and accordingly they might range from the seriously inadequate to the entirely adequate... it is no doubt true to say that the question or whether the existing pharmaceutical services are adequate involves a value judgement". Whilst agreeing with the judges' view on the matter of value judgement their Lordships did not agree on the spectrum of adequacy as suggested by the English case. The first step in the process is to determine neighbourhood and thereafter, in their Lordship's view there was a two stage approach, i.e. whether the existing provision is adequate. If so, that is the end of the matter and the Application must fail. If inadequate the PPC must go on to consider whether it is necessary or desirable to secure adequate provision. Inefficiency in the services must exist before an application may be granted.
- 5.6 The determination of neighbourhood is equally a matter of fact. The PPC requires to take into account relevant considerations and give sufficient reasons for it and define the boundaries of the neighbourhood in a manner which reflects the submissions made. Socioeconomic factors may play a part and they may take into account obvious differences in housing types and standards between certain neighbourhoods. In this case, the members of the Panel individually went upon a site visit. The different natures of the component parts of the ultimate neighbourhood area would have been clear to them. They considered the evidence. They came to a clear conclusion and were entitled to consider the demographics within the neighbourhood determined by them.
- 5.7 Insofar as any question of errors of law are concerned, these may be considered in the context of Paragraph 36 of the speech of Lord Brown in *South Bucks District Council v Porter* (Number 2) [2004] 1WLR 1953 "the reasons for a decision must be intelligible and they must be adequate. They must enable the reader to understand why the matter was decided as it was and what conclusions were reached on the 'principal important controversial issues' disclosing how any issue of law or fact was resolved. Reasons can be briefly stated, the degree of particularity required depending entirely on the nature of the issues falling for decision. The reasons must not give rise to a substantial doubt as to whether the Decision Maker erred in law, for example, by misunderstanding some relevant policy or some other important matter or by failing to reach a rational decision on relevant grounds. But such adverse inference will not readily be drawn. The reasons need refer only to the main issues in the dispute, not to every material consideration.... "Decision letters must be read in a straightforward manner, recognising they are addressed to parties well aware of the issues involved and the arguments advanced. A reasons challenge will only succeed if the party aggrieved can satisfy the Court that he has genuinely been substantially prejudiced by a failure to provide an adequately reasoned decision." The Appellants complain that the PPC failed to specify what adverse inferences they drew from various adminicle of evidence. I do not see that it requires to. The Decision is clear enough.
- 5.8 Turning now to the particular points raised by the Appellants the following must be read in conjunction with the general comments as stated above.
- 5.8.1 It is accepted that in terms of the Board's public consultation it "*shall* on receipt of an application to which Regulation 5(10) applies, take reasonable steps to consult with persons to whom pharmaceutical services may be provided as a result of that application". I understand that the Health Board contacted the Chief Executive of North Lanarkshire Council on 22nd January 2013 seeking the Council's views. I assume no response was received in the time limit although this has not been recorded in the papers. It would have been helpful had it been so. The Board also notified PFPI of NHS Lanarkshire who apparently did respond by letter dated 28th February 2013 indicating general approval with some reservation regarding the premises proximity to a local primary school. There is an obligation on the Board to consult. It has done so. There is no obligation upon it to inform and, in any event, I do not consider that the Appellants have been thereby prejudiced. The Appellants do not indicate in what other respects the Board has failed to consult in terms of Schedule 3 Paragraph 2.

- 5.8.2 It is understood that the Area Pharmaceutical Advisory Committee is one and the same body as the Area Pharmaceutical Committee – a nomenclature that would have been clarified had the Applicant raised the issue at the commencement of the Hearing.
- 5.8.3 The PPC considered the prescribing and dispensing statistics of the doctors and pharmacies within the town of Airdrie and which figures were neither provided to the Applicant nor the other Interested Parties. Historically, these have been withheld from parties on the basis that this information is regarded as commercially sensitive. The Board does not require to hear submissions on all the evidence. It may decide to hear submissions to assist but does not require to hear submissions on all aspects of the case. It may have regard to all information available to it which in its opinion is relevant.
- 5.8.4 The Appellants state that the quorum for a meeting at the PPC is the Chair, two lay members and two pharmacist members and that at the commencement of the meeting, there requires to be an equal number of lay and pharmacist members. In this case, there were three lay members and two pharmacist members present, which the Appellants' aver was disconform to guidelines/requirements. The Regulations do not state that. In terms of Paragraph 3(1) of Schedule 4, the PPC shall comprise seven members of whom one shall be a Chair, three shall be pharmacists, one shall be a non-contractor pharmacist and two shall be contractor pharmacists. Three are appointed by the Board otherwise from members of the Board i.e. lay members. As I see it that is the maximum number that may sit on a PPC. In terms of Paragraph 5 of Schedule 4, no business shall be transacted at the meeting of the PPC unless the Chair (or Deputy) is present together with one member appointed from each of Paragraph 3(1)(b)(i) and (ii) (i.e. one non-contractor and one contractor pharmacist) and two other members appointed under Paragraph 3(1)(c) (i.e. two lay members). This is the quorum i.e. the minimum that may sit as members of the PPC at a Hearing. I do not read that there requires to be an equality of members under Paragraph 3(1)(b) and 3(1)(c). The Guidance Notes are in my view a misinterpretation of the Regulations. I am bound to follow the latter.
- 5.8.5 The Appellants have taken issue with the PPC's use of the 2001 census figures and not that of 2011. The latter census was not published until December 2013, some three months after the PPC hearing. Accordingly they could not have referred to it. They were entitled to consider 2001 census demographic figures.
- 5.8.6 The PPC has given sufficient reasons as to why it has excluded Golfhill on the basis that Golfhill residents were unlikely to recognise themselves as living in an area of deprivation and that those residents would not regard themselves as being in the same neighbourhood as Thrashbush/Holehills. Golfhills is clearly an affluent area and in the words of the PPC had a very different demographic to Thrashbush/Holehills. The Appellants are wrong to so narrowly define the neighbourhood on simple proximity grounds. Issues such as socio-economic, demographic, topography and distribution are clearly factors to be taken into account in determining neighbourhood. As to extending the southern boundary of the neighbourhood to the far side of Chapel Street to include the community centre in order to accommodate the Community Centre this seems to be consistent with the determination that the neighbourhood was otherwise deprived. Adopting the far side of Chapel Street is adequately clear in the circumstances.
- 5.8.7 I do not consider it necessary that the PPC ought to go through every adminicle of evidence to decide what weight it gave to each. It had clearly noted and considered each and gave its decision on the papers submitted and the oral representations given. It may be desirable, where the PPC has not taken account of certain submissions or piece of evidence on specific grounds. However, that is not the case here. The PPC need to consider what evidence it finds persuasive. Clearly, the PPC have given more weight to some evidence than others. For example, they did not give sufficient weight to the views of MPs or MSPs whose opinions may be relevant but not determinative.
- 5.8.8 It is a matter of fact for the PPC to determine the neighbourhood. There is nothing of

real contention other than the northern and southern boundaries which in the circumstances of the PPC's discretion is regarded as of little moment. It is not irrational nor is it an error in law; it is a factual determination having taken into account reasonable and relevant factors.

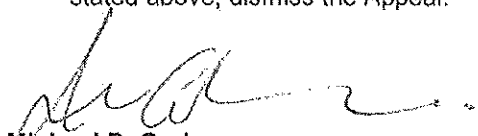
5.8.9 As mentioned above, once the PPC have decided on the issue of adequacy, if the provision of services in the neighbourhood is inadequate then it is a matter for the PPC to proceed through necessity or desirability. In this case, however, the PPC determined that the provision of pharmaceutical services in (and to) the neighbourhood is adequate and therefore it is not required to consider the issues of necessity or desirability. Whether or not MPs or others regard the provision as desirable is irrelevant. It is a matter for the PPC.

5.8.10 The Appellants have challenged the Board's interpretation of Regulation 5(10) and in particular the provision of pharmaceutical services 'in' the neighbourhood. I do not regard the Regulations as meaning that if there were no pharmacies in the neighbourhood that perforce means that the neighbourhood has thereby inadequate provision. It is the provision of services in the neighbourhood that is in issue and that such provision may be satisfied by pharmacies outwith the neighbourhood. That the PPC used the word 'into' is not relevant and is not an error in law.

5.8.11 As to the delay in the Boards' proceeding to a hearing some months after the date of the application, whilst unfortunate but I do not believe it has been prejudicial nor would it have had a bearing on the ultimate decision.

6. Decision

6.1 I consider that the Notice of Appeal discloses no reasonable grounds and that, for the reasons stated above, dismiss the Appeal.



J. Michael D. Graham
Interim Chairman
National Appeal Panel
10th March 2014

