

Hopes for the high street

Boots The Chemists has developed a private patient group direction for the supply of sildenafil through three of its stores in Manchester — the fourth private PGD that the company has established. Although this one is a major advance in the provision of community clinical pharmacy services, together these PGDs raise an issue that the profession may wish to consider for the future. Should a high street pharmacy continue to be a retail outlet with clinical services on offer?

Jesse Boot, from the moment he started work in his family's herbal medicine shop in Nottingham in the 1860s, sent British pharmacy down a strong retail route. So, perhaps,

Might more small operators be financially better able to leave behind hair products and tights?

the profession should not be surprised that in 2007 Boots remains true to its roots: the company continues to look for every competitive advantage (p179). Boots launched its new service direct to the consumer as an addition to its clinical services portfolio, an advantage of which might be to increase the numbers of men who might visit these pharmacies.

The health departments of Britain are pushing for community pharmacy to be fully integrated into the NHS and the developments that they are supporting

further confirm the role of the pharmacist as a provider of clinical services. All this reflects the Government's decision to put patient choice near the top of its health agenda and its encouragement of private health service providers, despite the dismay of Old Labour.

Boots and other major retailers with a lot of floor space have a built-in advantage: they can easily accommodate the consultation areas and other facilities that are necessary for providing a wide range of clinical services and still satisfy the shopper. They also have the infrastructure to enable them to go through the regulatory hoops, unlike smaller businesses (p179). In a sense larger operations can have it both ways: clinic and shop in one. They are private providers extending access and choice to patients: all Government boxes ticked.

For smaller businesses, the challenges are considerable. How to accommodate the new agenda and yet, at some level, still compete with the multiples? *The Journal* looks forward to hearing how pharmacies on the high street will rise to this challenge.

Not this year, next year or even in five years' time but at some stage in the future, might more small operators be financially better able to leave behind hair products and tights, as well as sandwiches and photographic services? Will we see many more adopt the style of pharmacies in France and Spain, among other countries, which are much less retail-oriented and more clinical in style. Although this is not a simple transformation and will depend on a radical overhaul of the way clinical pharmacy services are financed, just think what that might do to their reputation.

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