

To: APTUK Members

David Webb
Chief Pharmaceutical Officer

NHS England
Medical Directorate
Office of the Chief Professional Officers
(Pharmacy)

NHS England
Wellington House
133-155 Waterloo Road
London
SE1 8UG

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Dear colleague,

Consultation on Pharmacy Supervision

We are writing to draw your attention to the [Pharmacy Supervision consultation](#), which was published by the Department of Health and Social Care (DHSC) in December. I would encourage you to read and respond to the consultation proposals, which contain important developments for hospital and community pharmacy teams. The consultation closes on **29 February 2024**.

Overview

1. The pharmacy professions are playing increasingly important roles in the NHS as a result of the impact of developments in medicines, data and technology on the delivery of healthcare.
2. To enable these developments to benefit patient care as effectively as possible, the NHS is expanding the clinical roles of and providing greater professional autonomy for pharmacists and pharmacy technicians in all parts of the NHS.



3. This consultation seeks views on proposals to modernise medicines legislation governing the preparation, assembly, dispensing, sale and supply of pharmacy only (P) medicines and prescription only medicines (POMs), which are required currently to be undertaken or supervised by a pharmacist. This work is part of a series of reforms to improve patient care by making appropriate, safe and productive use of pharmacy technicians' knowledge and skills while at the same time enabling pharmacists to deliver a wider range of clinical services to support patients in hospitals and community pharmacy.
4. The consultation sets out proposals to:
 - Enable pharmacists to authorise (not directly supervise) pharmacy technicians to carry out (or supervise others carrying out) the preparation, assembly, dispensing, sale and supply of medicines.
 - Enable pharmacists to authorise any member of the pharmacy team to hand out checked and bagged prescriptions in the absence of a pharmacist.
 - Allow pharmacy technicians to take primary responsibility for the preparation, assembly and dispensing of medicinal products in hospital aseptic facilities.
5. Recognising and more effectively using the skills of pharmacy technicians will enable pharmacists to spend a greater proportion of their time delivering patient-facing clinical services – using their training and expertise, including prescribing, to improve healthcare outcomes for patients and local communities. This will create a more rewarding career and improve job satisfaction for pharmacists and pharmacy technicians and ensure they are contributing to the best of their professional ability as part of the NHS team.
6. Increasing the clinical contributions of pharmacy technicians will also enable pharmacists across all settings to move further into a mainstream prescribing role and help meet other workforce and access challenges.

Hospital aseptic facilities

7. In hospitals, under these proposals, pharmacy technicians would be able to supervise the preparation, assembly and dispensing of medicines in hospital aseptic facilities. This would enable suitably trained, qualified and experienced pharmacy technicians to



be responsible for a hospital aseptic facility without having to act under the supervision (or authorisation) of a pharmacist. To benefit from this provision, the pharmacy service must still be overseen by a chief pharmacist (or someone with those statutory functions in their job responsibilities) who is responsible for ensuring the safe and effective running of the pharmacy service.

8. The roles of pharmacists in hospitals are changing with more time spent in patient-facing clinical roles, across a wide range of specialties, and this is expected to accelerate following the changes to pharmacist initial education and training which mean all newly qualified pharmacists will register as prescribers from 2026. Pharmacy technicians are increasingly the most experienced professionals working in aseptic units with many suitably qualified and experienced to oversee aseptic production. Enabling pharmacy technicians, in addition to pharmacists, to supervise aseptic preparation activity, will allow optimal deployment of both professions and improve service delivery for patients. Robust governance arrangements would be put in place to support the safe implementation of these proposals into practice.

Other proposals

9. The consultation also sets out proposals to enable pharmacists to authorise (not directly supervise) pharmacy technicians (and in specific and limited circumstances related to checked and bagged medicines, other non-regulated members of the pharmacy team) to perform tasks that would otherwise need to be performed by or under the supervision of pharmacists.
10. These proposals are designed to allow pharmacists to spend less time on tasks that can be safely delegated to pharmacy technicians, who are registered and regulated health professionals in Great Britain – capable of working more autonomously, referring to a pharmacist only where necessary.
11. It is important to note that these proposals are not a move towards allowing pharmacists to remotely supervise a community pharmacy. Physical presence of the Responsible Pharmacist in a retail pharmacy business as the default is enshrined in primary legislation that is not being changed as part of this reform.



Next steps

12. Changing the relevant legislation is the important first step in creating an appropriate and workable framework for supervision and this will be underpinned by further work, including regulatory rules and standards and professional guidance, to ensure good governance safely supports the implementation of the legislation into practice for the benefit of patients.
13. DHSC is committed to continued working with the pharmacy sector to identify and remove legislative barriers to more modern and flexible ways of working – to this end the consultation also asks for feedback on any other legislative barriers to modern pharmacy practice.

Action

14. Clearly, we will need the active support of pharmacy technicians for these important developments, to bring them to fruition as quickly and safely as possible.
15. Pharmacists and pharmacy technicians have a shared ambition to develop their careers and continue to maximise the contribution they make to excellence in patient care. Please consider the proposals in the context of the ambition for, and changing nature of, pharmacy practice, and the aspirations of current and future pharmacists and pharmacy technicians.

Best regards



David Webb
Chief Pharmaceutical Officer
NHS England



Liz Fidler
Senior Professional Advisor Pharmacy
Technician Practice
NHS England