

# Briefing 007/26: Summary of April 2026 Committee Meeting

Community Pharmacy England met in London on 22nd and 23rd April 2026. Committee discussions were largely focused on the ongoing CPCF negotiations, reviewing the progress made to date and the latest position. Subcommittees also met to consider topics including medicines supply, LPC support and the upcoming [Regional Roadshows](#) which we hope pharmacy owners will attend.

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## Overview of the Committee Meeting

The full Committee considered the following topics at the April meeting.

### Negotiations for 2026/27

Despite significant efforts by all parties, negotiations on the arrangements for the Community Pharmacy Contractual Framework (CPCF) in 2026/27 have not yet concluded. Government requirements dictate that negotiations must remain confidential but, as pharmacy owners themselves, Committee Members know how incredibly frustrating the lack of certainty is. It makes managing finances all the more difficult, and planning for the future almost impossible.

The Committee's top priority is negotiating a more sustainable CPCF – including improving margin delivery, fees, and reimbursement – and making the case for a multi-year roadmap to give pharmacies long-term certainty. Key negotiating positions on funding, services, regulatory reform and more were confirmed at [our February meeting](#), following input from across the sector.

Community Pharmacy England's Negotiating Team (NT) leads the in-depth negotiations and includes Committee members who are independent pharmacy owners, representatives of the Company Chemists' Association (CCA) and non-CCA multiples as well as members of CPE's leadership team. The NT reports back to the full Committee on a regular basis throughout the process: the Committee has met online twice since February's in-person meeting to discuss progress updates on the negotiations. Subcommittees have also met several times to review proposals and asks in detail.

At the April meeting, the Committee received an update on key discussion points with the Department and Health and Social Care (DHSC) and NHS England, and considered how these align with CPE's negotiating principles and objectives.



The Committee received an in-depth briefing on the detail of the latest offer from Government and the NHS – highlighting where progress has been made in response to the NT’s arguments. They were brought up to speed on amendments to the original proposals for funding, service development and regulatory changes, with detail on how the NT had negotiated these changes. In-depth discussions enabled further exploration of the proposals and related issues in more detail, helping Members to consider together what is, or isn’t, favourable to the sector.

Consideration was also given to the plan of action post-negotiations, and the work programme that will be needed to resolve key challenges with DHSC/NHSE before the next round of negotiations and in the longer term. The Committee also discussed the need for careful positioning of CPE and sector bodies at the outcome of the negotiations, with the aim to amplify messaging and increase the likelihood of achieving shared future goals for the sector.

We hope to be able to say more on these important outcomes in the coming weeks. While we continue to work toward that, you might be interested to learn more about the negotiating process itself through the information and infographics on our website:

[Explore the Negotiating Process webpage and infographics](#)

These materials take you behind the scenes of the discussions with DHSC and NHS England, as well as explaining the work we are continually doing to influence the future of the community pharmacy sector.

Alongside the negotiations, other core functions are continuing – including monitoring funding, making medicines supply representations, and strengthening our evidence base – and updates on these workstreams can be seen in the summaries of the subcommittee meetings.

**Janet Morrison, Chief Executive of Community Pharmacy England, said:**

“This was an incredibly important Committee Meeting as we make progress through complex CPCF negotiations, allowing all Committee Members to understand in-depth the details of the current offer and their implications, to reflect on where we are relative to our negotiating positions, and to reaffirm our priorities. Pharmacy owners are rightly very anxious for news about their futures, and we hope that CPCF news will be available in the coming weeks. Committee Members also looked at wide ranging topics such as the support we offer to LPCs, medicines supply, and our upcoming Regional Roadshows which we hope many pharmacy owners will attend.”



## Engaging with Pharmacy Owners

Pharmacy owner views have been gathered throughout March and the first half of April via the 2026 Pharmacy Pressures Survey, which replaced the usual pre-Committee polling this time. This year's Survey had responses from owners representing around 3,000 pharmacy premises.

Data is now being analysed and community pharmacy owners and LPCs will be asked to support promotion of the results in the coming weeks and months via media interviews, talking to MPs, and social media work. Further information will be coming on this soon.

As in previous years, pharmacy owners report sharply rising costs and they are increasingly having to consider cost-cutting measures that would impact patients. Finances and supply problems are the most dominant concerns. Meanwhile, pharmacy team members report frequent medicines supply issues, which are increasing workload and stress for staff. Workloads have risen sharply, impacting on staff mental health.

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## Dispensing at a Loss: Legal Advice

All the sector bodies were consulted last summer on their proposals for negotiation objectives. We recently received an additional brief proposal from the IPA on seeking legal advice and IPA representatives raised this at the CPE meeting. The specific questions on which legal advice would be sought have not been shared with us, and as with seeking any legal advice, the need for these questions to be very carefully considered and drafted is key to maximising both the usefulness of the advice and the value from any spend. The IPA's proposal was discussed at the Committee meeting and the Committee's view was that it would be inappropriate for CPE to be involved at this time. This view was supported by the Chair, Professor Dame Jenny Harries.

Community Pharmacy England's position on dispensing at a loss is very clear – community pharmacies must be put on a sustainable footing, including how they are recompensed for dispensing medicines. These are central to our negotiating objectives and we have long argued for a complete reset and reform of the margin system. It's clear that it is unsustainable. We have taken appropriate independent and legal advice on how to re-shape the system over several years. We continue to make representations to Government in this, and previous negotiations, on how to avoid dispensing at a loss, ensure a complete reset of margin and deliver reimbursement reform.



## Subcommittee Meetings

### Discussions from Governance Subcommittees

#### Audit and Risk Subcommittee (A&RS)

A&RS met before the main Committee meeting. Members reviewed previous tax advice on incorporation of CPE and requested more up-to-date information. They reviewed the latest management accounts and highlighted their intention to review the Committee Member expenses policy. They noted that updated KPIs are to be set shortly and recommended the auditors be re-appointed for 2026/27. This was subsequently approved by the full Committee.

#### Governance and People (G&P) Subcommittee

G&P has not met since the last Committee meeting; however, discussions continue with the Company Chemists' Association (CCA), the Independent Pharmacies Association (IPA) and the National Pharmacy Association (NPA) on the composition of the CPE Committee for the next committee term, which begins on 1st April 2027. Further updates will be provided in due course.

### Updates from Advisory and Policy Subcommittees

#### Service Development Subcommittee (SDS)

Since the last Committee meetings in February, SDS had held two extra subcommittee meetings to undertake detailed reviews of proposals within the ongoing CPCF negotiations. At the April subcommittee meeting, there was more focus on 'business-as-usual' topics, as the negotiations were discussed by the whole committee in plenary sessions.

Revisions to the Hypertension Case-Finding Service specification have continued to be discussed with NHS England, following in principle agreement to make changes to the specification in the 2025/26 CPCF negotiations. The subcommittee reviewed the latest iteration of the document, containing NHS England's responses to CPE's previously expressed concerns about proposed amendments to the wording of the specification. The subcommittee concluded the wording in the latest draft was finally acceptable and it is expected that the new service specification will be published by NHS England shortly.

The updates to the service specification include changes to further align the service to National Institute for Health and Care Excellence (NICE) guidelines; placing explicit restrictions on the number of clinic check consultations a patient can have within a specified time period; and clarifying when it is



appropriate for general practices to refer patients to the service for a clinic check consultation.

The subcommittee also spent time reviewing recent Government and NHS documents relating to neighbourhood health, with members providing feedback on progress being made with local community pharmacy engagement in neighbourhood health. The support that CPE has been providing to LPC leaders to help them engage with neighbourhood developments at a local level was reviewed. This support includes regular meetings for LPCs on the topic, with a community of practice having been formed to provide peer support for this local work, alongside a range of resources for LPCs to use locally to highlight the role of community pharmacies within neighbourhood working.

### [Read more about Neighbourhood health](#)

Some learnings shared by NHS England from the process used for the 2025 Community Pharmacy Workforce Survey were reviewed, with further feedback being sought from multiple pharmacy groups that used the bulk data submission approach within the survey.

An update on CPE's programme of ongoing support for LPCs in relation to local commissioning of services was provided. This work includes a series of webinars (LPC Learning Sessions) for LPC staff and members featuring innovative community pharmacy service developments.

### **Funding and Contract (FunCon) Subcommittee**

The subcommittee reviewed analysis of Period of Treatment variation across the country, considering the impact this is having on pharmacy funding distribution and individual pharmacy sustainability, cost to the NHS, and patient safety. Further analysis to explore other trends and related factors will be conducted to work towards determining a clear position on this topic.

FunCon members discussed potential high-level principles that could be used to guide caps for pharmacy services, which would aim to curb outliers and better manage the distribution of funding across the sector. Consideration was also given to CPE's response to a series of [proposed amendments to the Information Regulations](#), paying particular attention to the potential knock-on effects on medicines margin.

Several reports providing information to assist with monitoring delivery of core funding were presented, noting that [DHSC applied a margin uplift to the April Drug Tariff](#) whilst negotiations on the CPCF for 2026/27 continue. Once the outcome of negotiations is determined, further fine tuning of the Drug Tariff may be required. The subcommittee also reflected on growing number of price concessions in recent



months and expected increased turbulence in the medicines market due to instability in the Middle East.

### Legislation and Regulatory Subcommittee (LRS)

The subcommittee considered the regulatory aspects of the [proposed amendments to the Information Regulations](#), discussing concerns about data collection from hubs and retail OTC products, and on defining invoices requested for the Margin Survey. It was also noted that there were some welcome proposals, such as changes seeking to improve the accuracy of price data in the Dictionary of Medicines and Devices (dm+d).

LRS members agreed to NHS England's plans for this year's Community Pharmacy Assurance Framework (CPAF) compliance monitoring process, which includes completing 10 screening questions, and for some, a full questionnaire and potentially a visit. The screening questions should be available during July this year.

The subcommittee gave initial consideration to the introduction of pharmacist-authorized pharmacy technician dispensing and considered the changes to the NHS (Pharmaceutical and Local Pharmaceutical Services) Regulations needed to enable this in NHS community pharmacies. Initial consideration was also given to whether the absence of a Responsible Pharmacist (RP) from the pharmacy, permitted under the RP Rules, should apply in NHS community pharmacies. Discussions will be sought with DHSC and NHS England to consider the issues further.

Matters of report included current and proposed NHS England post-payment verification activity and the MHRA's project to improve patient information, which includes consideration of the patient information leaflets (PILs).

The subcommittee also met in March to discuss the regulatory aspects of the ongoing negotiations, and the General Pharmaceutical Council's (GPhC's) proposals for revised RP Rules and standards for RPs and superintendent pharmacists.

### LPC and Contractor Support (LCS) Subcommittee

The subcommittee met to review current pressures facing LPCs and pharmacy owners and to consider how support can continue to evolve over the coming months.

Members received an update on progress following the [patient violence and abuse survey findings](#) shared earlier this year. A coordinated programme of work is now underway with LPC involvement,



focused on five priority areas: raising public awareness, pursuing regulatory and policy change, working with NHS England professional leadership, national engagement with policing, and supporting LPC local action and wellbeing support for pharmacy teams.

Engagement with the National Police Chiefs' Council is ongoing to improve understanding of risks in pharmacies and try to secure more consistent responses to incidents. Work with NHS England, including discussions with the Chief Pharmaceutical Officer, is helping position patient abuse as a system wide issue and explore approaches to managing violent patients through Integrated Care Boards (ICBs). LPCs are also being supported through practical engagement resources and wellbeing support delivered in partnership with Pharmacist Support.

The Subcommittee reviewed early intelligence on the impact of ICB mergers and clustering, with LPCs reporting concerns around reduced capacity, loss of commissioning expertise and reduced access to senior NHS local leadership. Members agreed this should continue to be monitored.

Planning is also progressing for the 2027 LPC elections, informed by lessons from the last cycle, with a focus on clearer guidance, training, digital tools and succession planning. Finally, members reviewed plans for the [regional roadshow events](#) taking place in June and July for pharmacy owners and teams.

### **Communications and Public Affairs (CPA) Subcommittee**

CPA met shortly after the main meeting to consider key upcoming communications topics, including:

**Pressures Survey:** as in previous years, plans are being developed to highlight the findings of the Pressures Survey, combining national and regional media work with Parliamentary tactics and social media/public facing campaigning work. Community pharmacy owners and LPCs will be asked to support this including via media interviews, talking to MPs, and social media work.

**Regional roadshows:** a significant communications campaign to encourage attendance at these events is being planned, with regional resources to be made available to LPCs very soon.

The subcommittee also considered progress on the ongoing communications review which is seeking to ensure that the website and other communications meet the needs of pharmacy owners and LPCs as closely as possible. The results of the LPC survey were considered, with work continuing to seek pharmacy owner views.

The subcommittee also considered the recent tender process for our public affairs support, which led to the appointment of Lexington Communications. The decision panel had included the Chief Executive



and CPA Members Tricia Kennerley and Lindsey Fairbrother. The subcommittee discussed the priorities for the work with Lexington, including tactics, insight and strategy. Further information on our public affairs programme will be shared with LPCs and also with the wider sector in the coming weeks and months.

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If you have any questions or require more information, please contact: [comms.team@cpe.org.uk](mailto:comms.team@cpe.org.uk)