



Pharmacy Quality Scheme 2026/27 Action and Evidence Portfolio Workbook

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If having read this Community Pharmacy England Pharmacy Quality Scheme 2026/27 Action and Evidence Portfolio Workbook and the information and resources on the [Community Pharmacy England website](#), you have further queries about the Pharmacy Quality Scheme (PQS) or you require more information, please email services.team@cpe.org.uk.

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Introduction

Details of the PQS 2026/27 were published on 29th May 2026, as part of the [arrangements for the Community Pharmacy Contractual Framework \(CPCF\) in 2026/27](#) and as a [Drug Tariff Update](#) on 2nd June 2026.

The 2026/27 scheme began on 2nd June 2026 and has a declaration period between **9am on 1st February 2027 and 11.59pm on 26th February 2027**. Pharmacy owners must have evidence to demonstrate meeting the domains that they have claimed for **by the end of 31st March 2027**.

The 2026/27 PQS has £20 million funding available and pharmacy owners will be able to claim an aspiration payment if they wish to **between 9am on 13th July 2026 and 11.59pm on 28th July 2026** (this will be paid to pharmacy owners on 1st September 2026).

Pharmacy owners who meet the gateway criterion will receive a PQS payment on 1st April 2027 if they meet the requirements of one or both the domains. Pharmacy owners must meet all the requirements within a domain to be eligible for a PQS payment for that domain.

Drug Tariff wording

This Workbook lists the PQS 2026/27 Drug Tariff wording for the requirements of the Scheme. It does not list the information which must be recorded on the NHS Business Services Authority (NHSBSA) Manage Your Service (MYS) portal when making the PQS declaration (this information is available in the [Drug Tariff Update](#)). However, this information is reflected in the questions posed within the Workbook.

Questions and actions

This Workbook contains questions in each section (based on what pharmacy owners are required to declare) for pharmacy teams to answer to see if they are meeting the requirements of the gateway/domains. If they meet all the requirements in a section, they can tick the gateway criterion/domain off the PQS checklist, which is included on page 7 in the Workbook. If they are not currently meeting the requirements, this can be added to an action plan, which is included on pages 17-18 in the Workbook.

Training

Pharmacy owners and pharmacy team members should note that there is a requirement in the 2026/27 Scheme that may mean that staff are required to repeat training and an e-assessment that they have completed previously, depending on the stated validity period and when staff completed the training and e-assessment.

If pharmacy owners are currently meeting some or all the training requirements, it is important that this is kept under review as this may change if new staff join the pharmacy or staff return from long term leave, for example, maternity leave, before the PQS declaration period.

Where new staff who have recently joined the pharmacy or staff returning from long term leave, for example maternity leave, have not undertaken the training and assessment by 31st March 2027, the pharmacy owner can count them as having completed the training and assessment, if the pharmacy owner has a training plan in place to ensure they satisfactorily complete the training and assessment within 30

days of the day of the declaration or by 31st March 2027, whichever is the later. This training plan and demonstrable evidence of completion of the training and assessment, within 30 days of the day of the declaration or 31st March 2027 (as appropriate), must be retained at the pharmacy to demonstrate they met this criterion.

Resources

We have produced resources to support pharmacy owners to meet the requirements of the Scheme. The relevant resources are highlighted in the gateway criterion and domain sections. Pharmacy owners are not required to use these resources; however, they are all available at cpe.org.uk/pqs should pharmacy owners choose to use them.

Evidence

This Workbook provides pharmacy owners with examples of **suggested** evidence that they can use to confirm they have the necessary evidence by 31st March 2027. If certain evidence is a requirement, it is stated as **REQUIRED** in the Workbook.

It is important that pharmacy owners have this evidence to assure themselves that they meet the domains that they intend to declare that they meet; as well as to be able to provide this evidence to the NHSBSA Provider Assurance Team (if requested) who will undertake validation checks on behalf of NHS England to ensure that these requirements are met.

Evidence should be retained for three years for post-payment verification purposes.

Pharmacy owners are required to be able to provide evidence of how they meet the criteria; if they do not have this evidence, they put themselves at risk of having the payment for one or more domains recovered. The examples provided as suggested evidence are not exhaustive; other evidence may also be suitable.

This Workbook is for an individual pharmacy. It cannot be used to complete a declaration for multiple pharmacies. Each pharmacy team must complete its own individual assessment of which domains they are eligible to claim payment for.

Important dates for the diary

Below is a list of the important dates for the PQS 2026/27.

Date	Why is this date important?
2nd June 2026	<p>PQS 2026/27 officially starts.</p> <p>Pharmacy owners can update* NHS Profile Manager from this date if they are a 'Pharmacy palliative care medication stockholder'.</p> <p>*Pharmacy owners who claimed for the Medicines Optimisation domain in 2025/26 must ensure their status is correct and updated for 2026/27 by logging into NHS Profile Manager and verifying this between 2nd June 2026 and by the end of 31st March 2027.</p>
13th July 2026	Aspiration payment window opens at 9am.
28th July 2026	Aspiration payment closes at 11.59pm.
August 2026 (Dates TBC)	<p>The Palliative and End of Life Care questionnaire (PEoLC) will be published on the NHSBSA website. Pharmacy owners must complete this by the end of 31st December 2026. Since this is a requirement of the gateway criterion, if this deadline is missed, pharmacy owners will not be able to make a PQS declaration.</p> <p>The clinical services audit will be published on the NHSBSA website.</p>
1st September 2026	Aspiration payment is paid to pharmacy owners.
31st December 2026	<p>Deadline for completing and submitting the PEoLC questionnaire.</p> <p>Since this is a requirement of the gateway criterion, if this deadline is missed, pharmacy owners will not be able to make a PQS declaration.</p>
1st February 2027	Declaration window opens at 9am.
26th February 2027	Declaration window closes at 11.59pm.
31st March 2027	Deadline for ensuring the requirements of the gateway (except the PEoLC questionnaire which needed to be completed and submitted by 31st December 2026) and quality criteria have been met.
1st April 2027	Pharmacy owners will be paid their PQS payment.

PQS flow chart – How to use the Action and Evidence Portfolio Workbook

Read the [Drug Tariff update on the 2026/27 PQS](#).

Read through the content on our [PQS hub](#) on our website.

If you want to claim for an Aspiration payment, choose which domains you want to work towards meeting by the end of the scheme (31st March 2027) and then claim for this between **9am on 13th July 2026 and 11.59pm on 28th July 2026**.

Work through our PQS 2026/27 Action and Evidence Portfolio Workbook* with members of the pharmacy team to answer the questions in each section and therefore identify which requirements the pharmacy already meets; complete the tables in each section to evidence this.

When you can answer yes to all the questions in a section, tick off the gateway or quality criterion on our checklist (on page 7 of the Workbook).

If the pharmacy cannot answer yes to all the questions in a section, consider what actions need to be taken to be able to do this and add this to the PQS action plan (on pages 17-18 of the Workbook).

Decide which parts of the action plan need to be prioritised.

Work through the action plan to meet the different requirements (and therefore be able to answer yes to all the questions in a section). When a requirement is met, tick yes to the relevant question in that section, complete the section to evidence this in the Workbook and tick off the requirement on the PQS checklist (on page 7 of the Workbook).

Make your PQS declaration between **9am on 1st February 2027 and 11.59pm on 26th February 2027** and then make sure to complete all the requirements for the domains you have claimed payment for **by the end of 31st March 2027**.

*Use of the Community Pharmacy England Pharmacy Quality Scheme 2026/27 Action and Evidence Portfolio Workbook is optional; pharmacy owners can choose another option to support them to meet the requirements of the Scheme.

Pharmacy Quality Scheme 2026/27 checklist

Gateway criterion	Completed
Gateway criterion a) Palliative and end of life care questionnaire The questionnaire needs to be completed and submitted by 31st December 2026; the questionnaire will be published on the NHSBSA website in August 2026 (date of publication TBC)	
Gateway criterion b) Updating NHS Profile Manager if the pharmacy is a 'Pharmacy palliative care medication stockholder'	
Gateway criterion c) Palliative and end of life care action plan	
Domains	
Domain 1: Medicines optimisation and patient safety	
Quality criterion b) Respiratory: CPPE e-learning and e-assessment	
Quality criterion b) Safer management of urgent repeat medicines supply requests and referrals: Updating standard operating procedures (SOPs)	
Domain 2: Professional practice	
Quality criterion a) Clinical services audit and clinical peer review The audit will be published on the NHSBSA website in August 2026 (date of publication TBC)	

Gateway criterion

There is one gateway criterion in the 2026/27 PQS with three parts:

- a) Palliative and end of life PQS questionnaire;
- b) Updating NHS Profile Manager if the pharmacy is a 'Pharmacy palliative care medication stockholder'; and
- c) Palliative and end of life care action plan.

Pharmacy owners must meet all the requirements to qualify to claim for a PQS payment.

Gateway criterion a) Palliative and end of life PQS questionnaire

Drug Tariff wording

Pharmacy owners must complete the questionnaire to evaluate the value of the Palliative and End of Life Care criterion. The questionnaire will be accessible from the [NHSBSA website](#) from August 2026 and **must be submitted by the end of 31st December 2026** to meet the gateway criterion.

Pharmacy owners who successfully complete their questionnaire submission will receive a confirmation email as evidence that their submission has been successful. This email must be provided if a pharmacy owner needs to demonstrate that they have successfully completed their questionnaire submission. Should a pharmacy owner not receive this questionnaire confirmation email within one hour of submitting this then; after first checking their junk email folder, they should email the provider assurance team at pharmacysupport@nhsbsa.nhs.uk immediately to make them aware of the issue.

No patient identifiable data should be entered into the questionnaire.

Additional information

CPE will alert pharmacy owners through our communication channels when the questionnaire is accessible. You can sign up to the email newsletters at cpe.org.uk/enews

Q. Have you completed and submitted the Palliative and end of life PQS questionnaire by 31st December 2026?

Suggested evidence

Suggested evidence	Location of evidence in the pharmacy
Copy of the email from MYS confirming the questionnaire has been submitted (REQUIRED)	

Gateway criterion b) Updating NHS Profile Manager if the pharmacy is a 'Pharmacy palliative care medication stockholder'

Drug Tariff wording

As soon as possible after 2nd June 2026 and by the end of 31st March 2027, the pharmacy owner must have updated NHS Profile Manager to show they are a 'Pharmacy palliative care medication stockholder' if they routinely hold the 16 palliative and end of life critical medicines listed below and can support local access to parenteral haloperidol.

If NHS Profile Manager is updated centrally by head office, it will need to be confirmed that this will be done by the end of 31st March 2027. Pharmacy owners who claimed for the Medicines Optimisation domain in 2025/26 must ensure their status is correct and updated for 2026/27 by logging into NHS Profile Manager and confirming this between 2nd June 2026 and by the end of 31st March 2027 by [verifying their account](#). If this verification has not

been completed, a pharmacy owner will not have met this requirement even if their profile is still showing them as a stockholder.

Pharmacy owners with profiles that cannot currently be updated via NHS Profile Manager may still meet this criterion and update the Directory of Services (DoS) profile by [contacting their Regional DoS lead](#).

If pharmacy owners are not a stockholder of these 16 palliative and end-of-life critical medicines, they are not required to update NHS Profile Manager.

The 16 palliative and end of life critical medicines are:

- Cyclizine solution for injection ampoules 50mg/1ml
- Cyclizine tablets 50mg
- Dexamethasone solution for injection ampoules 3.3mg/1ml
- Dexamethasone tablets 2mg
- Haloperidol tablets 500mcg (or 1.5mg tablets or 5mg/5ml liquid)
- Hyoscine butylbromide solution for injection 20mg/1ml
- Levomepromazine solution for injection ampoules 25mg/1ml
- Metoclopramide solution for injection ampoules 10mg/2ml
- Midazolam solution for injection ampoules 10mg/2ml
- Morphine sulfate oral solution 10mg/5ml
- Morphine sulfate solution for injection ampoules 10mg/1ml
- Morphine sulfate solution for injection ampoules 30mg/1ml
- Oxycodone solution for injection ampoules 10mg/1ml
- Oxycodone oral solution sugar free 5mg/5ml
- Sodium chloride 0.9% solution for injection ampoules 10ml
- Water for injections 10ml

Q. If you routinely hold the 16 palliative and end of life critical medicines listed above at your pharmacy and can support local access to parenteral haloperidol, has NHS Profile Manager been updated with this information since 2nd June 2026?

Suggested evidence

Suggested evidence	Location of evidence in the pharmacy
If you are a stockholder of these 16 palliative and end of life critical medicines – a screen shot from NHS Profile Manager showing that the pharmacy profile has been updated since 2nd June 2026 to show this information	

Gateway criterion c) Palliative and end of life care action plan

Drug Tariff wording

By the end of 31st March 2027, pharmacy owners must have an action plan in place to use when they do not have the required stock of the 16 palliative and end of life critical medicines and/or parenteral haloperidol available for a patient. This must include collated information from pharmacies in their area to be able to aid a patient, relative/carer in obtaining medication as swiftly as possible by redirecting them to the nearest open community pharmacy that stocks the 16 palliative and end of life critical medicines and/or parenteral haloperidol.

To meet the gateway criterion, all pharmacy owners must have this action plan irrespective of whether they do or do not routinely stock the 16 palliative and end-of-life critical medicines listed above.

The action plan must include:

- *An awareness of any locally commissioned services for palliative care including any on call and delivery arrangements;*
- *A list of community pharmacies stocking the 16 palliative and end of life critical medicines for palliative/end of life care in their area and noting the ability to check the DoS to find pharmacies stocking these medicines;*
- *Details of where parenteral haloperidol can be accessed locally, e.g. through any local commissioning arrangements; and*
- *Awareness of other support services that may be useful for patients/relatives/*

The action plan for 2026/27 must be available for inspection from the end of 31st March 2027 at premises level and must be retained for 3 years for PPV purposes.

Resources

The following resource is available at cpe.org.uk/pgs to support pharmacy owners meet this part of the quality criterion:

- Template action plan.

Q. Do you have a new or updated action plan to use when you do not have the required stock of the 16 critical medicines or parenteral haloperidol available for a patient as detailed in the Drug Tariff wording above?

Suggested evidence

Suggested evidence	Location of evidence in the pharmacy
A copy of a new or updated action plan to use when the pharmacy does not have the required stock of the 16 critical medicines or parenteral haloperidol available for a patient (REQUIRED)	

Domains

There are two domains in the 2026/27 PQS:

- a) Medicines optimisation and patient safety; and
- b) Professional practice

Pharmacy owners must meet all the requirements in a domain to be eligible for a PQS payment for that domain.

Domain 1: Medicines optimisation and patient safety

There are **two** quality criteria in Domain 1 – Medicines optimisation and patient safety. Both the quality criteria need to be met to be eligible to claim payment for the domain. The quality criteria are:

- a) Respiratory
- b) Safer management of urgent repeat medicines supply requests and referrals

Domain 1: Medicines optimisation and patient safety

Quality criterion a) Respiratory

Drug Tariff wording

*By the end of 31st March 2027, all pharmacists working at the pharmacy on the day of the declaration must have completed **EITHER** the [CPPE Asthma for Pharmacy Quality Scheme 2026/27 e-learning programme](#) **OR** unit 4 of the CPPE Fundamentals of respiratory therapeutics e-learning since 19th February 2025 (when the e-learning was updated in line with the new clinical guideline) **AND** passed the [Asthma e-assessment](#) (between 19th February 2025 and 31st March 2027) to update their knowledge in line with the [new BTS/NICE/SIGN Joint Guideline on Asthma](#).*

*Pharmacy owners will need to have evidence to demonstrate that all pharmacists working at the pharmacy on the day of the declaration have satisfactorily completed **EITHER** of the above e-learning **AND** have passed the Asthma e-assessment. This evidence must be available for inspection from the end of 31st March 2027 at premises level and must be retained for 3 years for PPV purposes.*

Additional information

The below table highlights who needs to complete the different training and assessment requirements of the quality criterion.

Training and assessment	Who needs to complete it?	Pharmacists	Trainee pharmacists
CPPE asthma e-learning and e-assessment	Pharmacists	✓	Recommended but not required

<p>Q. Have all pharmacists who work at your pharmacy satisfactorily completed EITHER the CPPE Asthma for Pharmacy Quality Scheme 2026/27 e-learning OR unit 4 of the CPPE Fundamentals of respiratory therapeutics e-learning since 19th February 2025 AND passed the e-assessment since 19th February 2025?</p>	<input type="checkbox"/>
<p>Do you have personalised certificates to demonstrate that all pharmacists who work at your pharmacy have satisfactorily completed EITHER the CPPE Asthma for Pharmacy Quality Scheme 2026/27 e-learning OR unit 4 of the CPPE Fundamentals of respiratory therapeutics e-learning since 19th February 2025 AND passed the e-assessment since 19th February 2025?</p>	<input type="checkbox"/>

Record below the details of all pharmacists who have either completed **EITHER** the CPPE Asthma for Pharmacy Quality Scheme 2026/27 e-learning **OR** unit 4 of the CPPE Fundamentals of respiratory therapeutics e-learning since 19th February 2025 **AND** passed the e-assessment since 19th February 2025 and those that have not, but who will undertake this requirement by 31st March 2027 (on the day of the PQS declaration, pharmacy owners will be required to enter the total number of pharmacists working at the pharmacy who have completed this requirement and those that have not but who will undertake this requirement by 31st March 2027).

Pharmacist's name	Completed by day of the declaration	Will complete by 31st March 2027	Date completed
	<input type="checkbox"/>	<input type="checkbox"/>	
	<input type="checkbox"/>	<input type="checkbox"/>	
	<input type="checkbox"/>	<input type="checkbox"/>	
	<input type="checkbox"/>	<input type="checkbox"/>	
	<input type="checkbox"/>	<input type="checkbox"/>	
	<input type="checkbox"/>	<input type="checkbox"/>	
	<input type="checkbox"/>	<input type="checkbox"/>	
	<input type="checkbox"/>	<input type="checkbox"/>	
Total			

Domain 1: Medicines optimisation and patient safety

Quality criterion b) Safer management of urgent repeat medicines supply requests and referrals

Drug Tariff wording

Following the '[Charlie Marriage: Prevention of Future Deaths Report](#)' and following feedback from Controlled Drug Accountable Officers (CDAOs) on the inappropriate supply of controlled drugs, this criterion focuses on the safe management of urgent repeat medicines supply requests.

Pharmacy owners must ensure they have appropriate procedures to follow if the pharmacy is unable to respond to requests and/or referrals for urgent supplies of time critical medicines and with specific guidance about the supply of Controlled Drugs in line with regulations.

By the end of 31st March 2027, pharmacy owners must have updated all relevant standard operating procedures (SOPs) to include specific guidance to follow in the event they are unable to respond to requests and/or referrals for urgent supplies of medicines. The updated SOPs must contain guidance on:

- How urgent requests for time-critical medicines are dealt with; and
- How urgent requests for Controlled Drugs are managed in line with regulations.

Pharmacy owners must ensure that all pharmacy staff are familiar with the updated SOPs. The SOPs for 2026/27 must be available for inspection from 31st March 2027 at premises level and must be retained for 3 years for PPV purposes.

Resources

The following resource is available at cpe.org.uk/pgs to support pharmacy owners to meet this quality criterion:

- **Briefing on the Urgent supply of medicines and appliances strand of Pharmacy First** – this briefing provides detailed information on the Urgent supply of medicines and appliances strand of Pharmacy First and includes information on medicines liable to misuse and Controlled Drugs. It may be a helpful reference for updating SOPs.

Q. Does the pharmacy have new or updated SOPs in place on the premises, available for inspection, which includes guidance to staff on how urgent requests for time critical medicines are dealt with, and how urgent requests for Controlled Drugs are managed in line with regulations?

Suggested evidence

Suggested evidence	Location of evidence in the pharmacy
Copy of updated and/or new SOP	
Copy of a team review documenting the reflections and actions following the updating of the SOP	
Record of interventions on the PMR or other appropriate patient record	

Record below details of any additional evidence that you have to demonstrate that the pharmacy meets the above requirements and where this evidence is located within the pharmacy.

Domain 2: Professional practice

There is **one** quality criterion in Domain 2 – Patient safety that needs to be met to be eligible to claim payment for the domain. The quality criterion is:

- a) Clinical services audit and clinical peer review

Domain 2: Professional practice

Quality criterion a) Clinical services audit and clinical peer review

Drug Tariff wording

Pharmacy owners must complete a clinical audit, which will be on the quality of Pharmacy First clinical pathways consultations to develop an action plan for improving practice. In addition to a pharmacist completing the audit, pharmacy owners will be expected to ensure the pharmacist completes a peer discussion (approximately 1 to 2 hours) focused on reviewing the findings of the audit and the action plan, with a 'buddy' pharmacist.

The audit must be carried out with a minimum of 10 patients. Pharmacy owners should make a record of the start and end date of the audit as they will be required to enter this information into the MYS application when they make their declaration. Pharmacy owners should choose a period in 2026/27 that achieves the minimum number of patients with sufficient time to complete the audit and peer discussion and their declaration from 1st February 2027.

Pharmacy owners must complete the audit, action plan and peer discussion no later than 31st March 2027.

Further details of the 2026/27 clinical audit will be published and reported on the MYS data collection tool, which will be accessible from the [NHSBSA website](#) from August 2026.

The pharmacy must have completed the audit, sharing their anonymised data with NHS England, and incorporating any learnings from the audit into future practice by the end of 31st March 2027.

Completing the audit data submission is an essential requirement for meeting the audit criterion. Undertaking the audit without submitting the data will mean the pharmacy owner will not have met the requirements of this domain. MYS allows a pharmacy owner to start their data collection and then return to it later should this be necessary. Where a data collection has been started but not submitted, it will not be eligible for payment.

Pharmacy owners who successfully complete their data collection submission will receive a data collection submission confirmation email as evidence that their submission has been successful. This email must be provided if a pharmacy owner needs to demonstrate that they have successfully completed their data collection submission. Should a pharmacy owner not receive this data submission confirmation email within one hour of submitting their declaration then, after first checking their junk email folder, they should email the provider assurance team at pharmacysupport@nhsbsa.nhs.uk immediately to make them aware of the issue.

No patient identifiable data should be entered onto the MYS data collection tool.

Additional information

CPE will alert pharmacy owners through our communication channels when the audit is accessible. You can sign up to the email newsletters at cpe.org.uk/enews

It is important to make a record of the start and end date of the clinical audit as pharmacy owners will be required to enter these dates on the MYS portal when they complete their PQS declaration.

CPPE has optional learning that pharmacists can choose to undertake if they want support in improving how to reflect on their clinical practice – **completion of these CPPE programmes is not a PQS requirement:**

- [CPPE Reflection e-learning](#)
- [CPPE Reflective practice online workshop](#)

Q. Have you completed the clinical audit in line with the above Drug Tariff requirements?	<input type="checkbox"/>
Q. What date did you start the clinical audit?	/ /
Q. What date did you finish the clinical audit?	/ /

Q. Have you submitted the clinical audit data on the MYS data collection tool on MYS?	<input type="checkbox"/>
Q. Have you incorporated any learnings from the clinical audit into your practice?	<input type="checkbox"/>
Q. Have you had a peer discussion focused on reviewing the findings of the audit and the action plan, with a 'buddy' pharmacist?	<input type="checkbox"/>

Suggested evidence

Suggested evidence	Location of evidence in the pharmacy
Completed clinical audit paperwork	
Record of a peer discussion between the pharmacist conducting the audit and a buddy pharmacist, documenting the review of the findings of the audit and the action plan	
Updated SOP reflecting any findings of the audit that necessitate changes to the SOP	
Copy of the email from MYS confirming the patient data from the clinical audit has been submitted on the MYS data collection tool	

Record below details of any additional evidence that you have to demonstrate that the pharmacy meets the above requirements and where this evidence is located within the pharmacy.

Pharmacy Quality Scheme 2026/27 action plan

Gateway criterion/ Domain (quality criterion)	Action to be completed	Lead person	Timescale	Completed

Gateway criterion/ Domain (quality criterion)	Action to be completed	Lead person	Timescale	Completed