

Briefing 013/26: Summary of June 2026 Committee Meeting

Community Pharmacy England met on 24th and 25th June 2026. Committee discussions were largely focused on the reforms work programme and longer-term future thinking. Subcommittees also met to consider topics including work to implement changes agreed in the recent Community Pharmacy Contractual Framework (CPCF) negotiations and ongoing areas of concern such as rising generics prices and medicines supply issues. Other discussions included [reflecting on the regional roadshows held so far](#) and planning for 2027 elections.

The Committee were joined by LPC leaders from the South West region for part of the meeting. LPC attendees had the chance to talk with Committee Members, observe subcommittee meetings, and provide feedback from their local pharmacy owners and localities.

Overview of the Committee Meeting

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

The reform agenda

The Committee considered early engagement with the Department of Health and Social Care (DHSC) on the reforms work programme agreed as part of the 2026/27 CPCF settlement. They reviewed the emerging scope and looked at potential priorities of strategic importance to pharmacy owners for inclusion within the agenda. This included, for example, opportunities for further regulatory reform to support system-wide objectives.

Members considered the extent to which the current early direction of travel aligns with our strategic priorities, highlighting areas where greater emphasis or recalibration may be required from the DHSC. The discussion also focused on key risks associated with advancing this agenda, alongside the most effective approaches to influencing and shaping the programme as it develops.

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

“We are still working with the DHSC to shape a forward-looking programme of community pharmacy contractual reform, centred on strengthening the sustainability of the sector. This will require a more effective medicines margin framework in the short term, alongside a fundamental review of the current reimbursement model against alternative approaches. It will also involve re-examining the clinical services offered across the network, with a clearer steer on national and local commissioning and funding architecture that supports greater clinical contribution.

In parallel, we will reassess how dispensing works within a modern medicines optimisation model, and pursue regulatory reform that removes barriers, enables innovation, and supports effective patient access. Constructive engagement with the sector is essential for this reform agenda, which is why we will be inviting all sector bodies to put forward their ideas and have already begun collating pharmacy owners’ views.”

Vision for the future

The Committee reviewed a horizon-scanning presentation exploring a range of plausible future scenarios shaped by emerging political, healthcare, and societal trends.

Members engaged in a structured discussion to assess the potential implications of these scenarios, including the opportunities they may present, associated risks, and key factors that will require mitigation. This included consideration of the relative likelihood of different scenarios and their potential impact on the sector.

The Committee also considered possible future contract principles, sharing initial perspectives on their potential benefits and risks, and reflecting on how different approaches could support or hinder progress towards long-term sector sustainability.

A further discussion focused on the critical components required to ensure network viability, including the Committee’s potential role in supporting equitable access to pharmacy services in a way that is both sustainable and deliverable.

These insights will play an important role in shaping and informing the ongoing reform agenda.



Committee Composition

The Committee agreed a proposal to make the current interim composition permanent subject to minor modifications to ensure continued representation of the sector. This followed a meeting of the pharmacy bodies on 19th June 2026 and work during the preceding 9 months by the Governance and People Subcommittee.

Accordingly, the composition of the Committee from 1st April 2027, will be:

Multiple side

- 2 nominated/appointed by IPA: from 10+ Multiple (non-CCA) and IPA members 2-9
- 3 elected 10+ Multiples (non-CCA)
- 8 appointed CCA

Independent side

- 10 Independent regional representatives
- 2 appointed NPA Independents
- 1 Community Pharmacy England appointed Independent, from Independents who took part in the elections and were not elected.

Risk Register and Risk Appetite Introduction

The Audit and Risk Subcommittee (A&RS) conducted its annual review of Community Pharmacy England's risk register and recommended approval subject to some necessary updates.

Members then considered Community Pharmacy England's underlying risk appetite – i.e. the amount of risk the organisation is willing to take for a particular activity. The Committee accepted the concept and agreed it would be applied on a trial basis.

Engaging with Pharmacy Owners

Pharmacy owners are currently being asked to take part in an [opinion poll on the 2026/27 CPCF settlement](#). The survey is a temperature check on whether the settlement eases financial pressure, what challenges remain, and how it affects the outlook for pharmacy business. It also seeks to explore the sector reaction to the planned introduction of prescribing into community pharmacy.

Early findings were considered by the Committee alongside reflections from the first set of regional roadshow events. Full feedback from both the poll and roadshows – augmented with input from



Regional Representatives and LPCs – will inform Community Pharmacy England’s approach and strategy for the future of the sector.

The short poll will remain open until 11.59pm on 12th July, so there’s still time to have your say on the 2026/27 CCPF. [Share your views on the new funding settlement, independent prescribing and future reforms here](#) (note, CCA multiples are being surveyed via their head offices).

Pressures Survey findings

With findings from the Pharmacy Pressures Survey 2026 due to be released shortly, we will be asking the sector to help raise awareness of the issues with MPs and the media.

We will use the findings to help highlight the systemic pressures community pharmacies are facing, and encourage everyone working in the sector to get involved.

We’ll be working with journalists and LPCs to secure media coverage and are developing a toolkit of resources for everyone in the sector to continue to engage over the summer.

Subcommittee Meetings

Discussions from Governance Subcommittees

Audit and Risk Subcommittee (A&RS)

A&RS met before the main Committee meeting. The subcommittee reviewed the annual management accounts and arrangements for the audit were discussed. An updated paper on reserves was considered in light of the forthcoming refinancing of premises loans. A valuation will be undertaken as part of this process.

The Committee Members’ expenses policy is to be reviewed by Autumn. The subcommittee considered and recommended the implementation of a salary sacrifice scheme for employee pensions – this was subsequently approved by the full Committee.

The subcommittee conducted its annual review of Community Pharmacy England’s risk register and the introduction of risk appetite statements (see above).

Governance and People (G&P) Subcommittee

G&P recommended some minor changes to subcommittees following the change in regional representative for the East and North Midlands. This included Stephen Thomas rising from Vice–Chair to



Chair of the Legislation and Regulatory Subcommittee (LRS), and new Committee Member Rahul Sharda filing vacancies on LRS and the Communications and Public Affairs Subcommittee.

Members also considered the latest developments on the committee composition question, which was then picked up by full Committee at plenary session (see above).

Updates from Advisory and Policy Subcommittees

Service Development Subcommittee (SDS)

SDS reviewed progress being made with implementing the remaining service changes agreed in 2025/26 (changes to the Hypertension Case-Finding Service and the Smoking Cessation Service) and those agreed for 2026/27 in the recent CPCF negotiations. This included discussions underway with NHS England and DHSC on the implementation of prescribing within the CPCF, including the choice of up to five prescriber-only clinical pathways planned to be added to the Pharmacy First service. An update on NHS England governance documents related to prescribing was also provided, with the Legislation and Regulatory Subcommittee also considering one of these documents in detail.

Work to implement the new Pharmacy Quality Scheme (PQS) was also considered, including work to finalise the Pharmacy First clinical audit and the feedback survey on the Palliative and End of Life Care element of the scheme.

The subcommittee then went on to discuss updates on the various vaccination programmes provided by pharmacy owners, including the agreement, since the last subcommittee meeting, of the recommissioning of the childhood flu vaccination service and the commissioning of the Meningococcal B (MenB) vaccination service.

Finally, ongoing support provided to pharmacy owners and LPCs related to neighbourhood health and local commissioning was reviewed by the subcommittee.

Funding and Contract (FunCon) Subcommittee

The subcommittee discussed concerns that cashflow issues are being exacerbated by rising generics prices and supported the office in its efforts to ensure advance payments are as accurate as possible.

Following on from a pledge given during the 2026/27 CPCF negotiations, the team reported working with NHS England to draft communications on branded generics to be sent out to ICBs. It was suggested that Community Pharmacy England will need to help raise awareness of this and communications will be provided to assist the sector to push on this new national policy in their



localities.

FunCon members discussed period of treatment variability and its impact on pharmacy finances, establishing criteria for exploratory modelling of potential fee changes to try to minimise this effect.

The subcommittee also had initial discussions on some potential funding and reimbursement topics for consideration under the shared reform programme, including low priced lines in Category M reimbursement, dispensing at a loss, and approaches to pricing and capping of services. These will be considered in more depth at an additional FunCon meeting.

Legislation and Regulatory Subcommittee (LRS)

The subcommittee considered the ways to implement NHS regulatory changes around pharmacist- authorised pharmacy technician dispensing and considered issues around Responsible Pharmacist (RP) absence in NHS pharmacies.

LRS explored some potential regulatory topics for consideration under the shared reform programme under the broad headings of 'efficiencies for pharmacy owners' and 'streamlining market entry'. Several proposals made by the team were discussed, and members were invited to put forward their proposals. It was suggested that the proposals are divided into different levels of priority.

The subcommittee considered potential updates to DHSC's best practice guidance for medicines supply and also NHS England's proposed assurance framework for clinical pharmacy services. Concerns were expressed about the draft framework and the extent to which pharmacy owners might be expected to provide clinical oversight to prescribing pharmacists and investigate concerns raised against them.

LRS confirmed that when an NHS vaccination service is agreed with Community Pharmacy England, a vaccine supplied from NHS central stock should be included automatically in the NHS (Pharmaceutical and Local Pharmaceutical Services) Regulations for supply with no or nominal margin.

Members also discussed: the Committee's key asks on the Health Bill; adverts that might be viewed as inducements for the provision of a service; potential provision of services remotely from non-listed premises; and protecting patient choice in pharmacy owned or third-party apps.

LPC and Contractor Support (LCS) Subcommittee

The subcommittee reviewed election guidance and the support programme for LPCs.



LCS reflected on a review of the work to implement the RSG/TAPR changes, which included a survey of LPCs and feedback from Professor Wright. It was noted that there is variability in progress across LPCs and an ongoing need to demonstrate the value and impact of the changes. Members suggested we publish the findings of the review which the full Committee agreed to in the plenary session.

The subcommittee considered some proposed changes to the model LPC constitution and rules. The constitution is not mandatory but is intended to provide some consistency across the LPC network. LPCs will have several months to meet, discuss and decide whether to adopt before the election process begins at the end of October.

The team gave an interim report on the [regional roadshow events](#) and associated LPC meetings that have taken place so far, reflecting on a positive reception from attendees as well as considering learnings for the second set of events and early planning for next year.

LCS also discussed a report on the [Forum of LPC Chairs meeting](#) earlier this month, and follow-up actions on our poll findings on patient violence and abuse, which included meetings with DHSC, NHS England and the National Police Chiefs Council.

Communications and Public Affairs (CPA) Subcommittee

Since the April meeting, a [wide range of materials](#) has been provided to announce and explain the CPCF settlement to the sector, alongside a [webinar](#) and the [regional roadshows](#). There has also been a programme of stakeholder outreach, including [briefing over 200 MPs](#) and a network of wider stakeholders about what the settlement means, and the remaining funding gap.

A [Parliamentary Reception](#) was held with MPs and patient groups on community pharmacy's role in neighbourhood health, supported by LPC Chairs. [Minister Kinnock had addressed Chairs](#) earlier in the day.

The subcommittee is continuing to oversee a communications review with early outputs under consideration including changes to the newsletter and website homepage, and development of a new social media strategy. Further improvements are being investigated.

CPA is due to meet soon to consider key upcoming communications topics, including work towards updating the Communications and Engagement Strategy, plans for political engagement over the summer and autumn period, and development of Community Pharmacy England's annual report for 2025/26. Preparations will also be made to ensure the team is ready to re-establish key political and



influencing connections given the changes expected to follow on from the Prime Minister's resignation.

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