

Community pharmacy IT progress update: Autumn 2026

This briefing sets out updates about community pharmacy IT and progress with Community Pharmacy IT Group's (CP ITG's) [workstreams](#) since the last bulletin.

The updates are categorised into the work plan areas below.

- [Community pharmacy IT developments: overview](#)
- [Establishing data flows & IT standards](#);
- [Developing robust services IT & systems](#);
- [Digital prescriptions & services](#);
- [Electronic health records usage](#);
- [Straightforward security & connectivity](#);
- [Policy and general updates](#);
- [Seamless referrals & appointments](#); and
- [Optimal principles across all pharmacy IT](#).

Note: You can click or select a category heading (left) to automatically scroll down to that section of the document.

Comments or feedback that support progress on the priority areas, can be provided by emailing da@cpe.org.uk. These updates are also available within html format at: cpe.org.uk/itupdate.

Community pharmacy IT developments: overview

Connected care through the Single Patient Record

The [SPR](#) is planned and intended to combine important health information – such as test results, hospital letters, and summaries from GP and hospital care – into a single, easy-to-access place. Patients will be able to view this information themselves through the NHS App.

The SPR is designed to:

- give patients more control over their health information;
- reduce the need to repeat information at appointments;
- help healthcare professionals see the bigger picture of a patient's health; and
- support better coordination between care settings.

It's part of the NHS's 10-Year Health Plan, which sets out three major shifts in healthcare: from analogue to digital, hospital to community and from treating illness to preventing it.

SPR community pharmacy research interviews (Sept-Oct 2026)

The SPR project team continue to seek inputs as the project develops. Pharmacy team members and pharmacy representatives may register their interest in reviewing and providing feedback on an SPR prototype, please complete the [SPR expression of interest form](#). Research calls are expected to begin during the week commencing 21st September 2026. The researchers are seeking input from individuals with a range of digital skills and experiences, including those with diverse needs, to help ensure the SPR is accessible and works well for everyone.

Other SPR developments and communications

Supplier Roundtables

The industry body techUK collaborated with the NHS England SPR team to host extensive workshops, bringing digital health suppliers together to establish how existing IT infrastructure will link up.

SPR updates

- The [NHS SPR Public Engagement Portal](#) was updated.
- HTN reported that the [Parliamentary and Health Service Ombudsman report has focused on the SPR, with recommendations for end-of-life care as an initial use case](#).
- DHSC published the [SPR factsheet](#).
- The King's Fund published, [SPR explained](#)
- Public Policy Projects published a report, [Delivering the SPR](#).

NHS App improvements to support patient repeat medicine ordering

The NHS App team are developing new functionality to support medicines management, including patient reminders for repeat prescription requests. They presented this to the IT group. These developments aim to support medicines adherence, improve patient experience, and reduce avoidable reliance on emergency supply routes.

NHS App roadmap

EPS enhancements - supplier onboarding

NHS England's Transformation Directorate has been streamlining the process for IT suppliers that pursue prescribing / dispensing onboarding steps.

This is expected to become relevant to IT suppliers that progress through pharmacy prescribing IT assurance.

The improvements to the process are also associated with the publication of the [EPS Assist Me tool](#) to support IT suppliers.

Data security, DPIAs and assurance case studies

NHS England and DHSC are seeking examples of good practice to support development of the Innovator Passport programme, which aims to reduce duplication in technology assurance and accelerate adoption of innovation across the NHS.

A current workstream is exploring how Data Protection Impact Assessments (DPIAs) can be undertaken more consistently and efficiently, whilst still supporting appropriate local risk management. The group has previously referred to unnecessary DPIA duplication creating burden for pharmacies, suppliers and NHS teams.

The programme team is looking for examples of:

- Effective use of the national DPIA template;
- Shared assurance or joint procurement approaches;
- Reduced DPIA turnaround times;
- IG communities of practice and knowledge sharing;
- Approaches that reduce repeated requests for the same information; and
- Tools supporting information sharing between NHS organisations and suppliers.

The findings will inform delivery of a minimum viable Innovator Passport product for digital technologies by the end of 2026. Relevant feedback can be shared with the [secretariat](#).

Potential community pharmacy examples

- Re-use of assurance evidence across multiple NHS organisations
- National or local deployment of pharmacy technology using a common DPIA approach.
- Collaboration amongst suppliers, NHS teams and pharmacies to streamline IG.
- Examples where duplicated DPIA activity delayed implementation and where a more standardised approach could have helped.

Emerging AI technologies: pharmacy sector research

Community Pharmacy England has updated its [artificial intelligence \(AI\)](#) guidance. Pharmacy team members are invited to take part in AI community pharmacy research. To take part in the research, register your interest [using the IT feedback form](#) (input 'AI research' into question 6). Pharmacy team members taking part will be able to hear more about the research as well as share their views via a short five to ten minute survey. This enables research participants to share their views on the opportunities, challenges, safety and governance considerations, and areas where AI-enabled tools could support work and patient care.

Clinical safety standards and digital assurance

NHS digital clinical safety standards (DCB0129 and DCB0160)

NHS England has consulted on proposed changes to the DCB0129 and DCB0160 clinical risk management standards. CP ITG previously gathered feedback from suppliers and other stakeholders on the proposals, and NHS England has since published supporting guidance.

An update on this work was highlighted in previous bulletins and was circulated amongst IT suppliers in July. Some pharmacy owners report that suppliers provide summary templates and supporting documentation to help pharmacies meet local compliance requirements. This can help reduce duplication of effort and avoid pharmacies having to develop supporting materials independently.

Assessing IT solutions checklist

The "[Template 23: Assessing IT solutions checklist](#)" hosted on Community Pharmacy England's [data and security templates page](#) incorporates the DCB0129 and DCB0160 considerations, as well as other elements.

Shaping the future of the NHS medicines database (dm+d)

NHS England has launched its first annual NHS dictionary of medicines and devices (dm+d) user survey. The survey seeks feedback on how dm+d is used, challenges experienced by users, and priorities for future development.

Whilst the survey is expected to be most relevant to NHS organisations, system suppliers, informatics specialists and others working directly with medicines data standards, pharmacy professionals and pharmacy IT stakeholders may also wish to contribute. Responses are requested by 2nd October 2026.

The NHS dictionary of medicines and devices is a core national standard used across prescribing, dispensing and medicines management systems.

Community pharmacy systems rely on dm+d to support interoperability between NHS services and pharmacy IT systems. Improvements to dm+d can therefore support safer medicines use, better data quality and more effective digital integration.

The survey provides an opportunity for stakeholders to influence the future development of a key element of NHS medicines infrastructure.

Group actions:

- consider responding individually or on behalf of their organisation. [Take part in the NHS England dm+d survey](#);
- share the survey with relevant medicines data, informatics and technical colleagues;
- highlight any issues affecting interoperability, medicines data quality or pharmacy workflows; and
- complete and promote the survey within relevant professional networks (estimated completion time: 10 to 15 minutes).

Changes to EPS-related data publications

As part of wider organisational changes across NHS England and the Department of Health and Social Care, the NHS Digital Medicines team is reviewing its [EPS statistics publications](#).

The review will consider the value, usage and resource requirements associated with a range of EPS-related publications, including:

- [Electronic Repeat Dispensing data csv file](#)
- elements of the [EPS dashboard elements](#); and
- [EPS nominations by pharmacy \(ODS code\)](#), including week-on-week reporting.

Some of these datasets are used by pharmacy analytics organisations and other stakeholders to create additional dashboards, reports and insights for pharmacy teams and the wider sector.

Understanding how the data is used will help inform future publication arrangements.

Group actions: Pharmacy team members and representatives are invited to share feedback on:

- which EPS datasets or publications they use;
- how the information supports pharmacy operations, analysis or decision-making;
- whether any publications would be difficult to replace if withdrawn; and
- opportunities to improve the usability or accessibility of EPS statistics.

Feedback can be emailed to the [secretariat](#).

NHS Digital Services for Integrated Care (DSIC)

NHS England also continues to develop the framework to incentivise the development of community pharmacy IT system suppliers, aligned with the CPCF. This includes supporting an open supplier market and involving both pharmacy teams and suppliers in shaping requirements. NHS England's Transformation Directorate is working to support suppliers in transitioning to the NHS Digital Services for Integrated Care ([DSIC](#)) framework.

NHS England has been working with both existing assured service suppliers and prospective suppliers progressing through the DSIC assurance process. Suppliers have continued DSIC-related work, with further activity expected over the course of this year as the DSIC pharmacy workstream progresses in line with planned timelines.

Additionally, the related relevant [DSIC capabilities and standards](#) continue to develop alongside the DSIC programme.

Suppliers who were interested with exploring the DSIC developments had been encouraged to engage via the [Atamis portal process](#) and DSIC process.

SNOMED International changes to Description Length Limits

NHS England's terminology team provided an update:

"NHS England is providing an update to the information posted in [previously](#) regarding the change by SNOMED International to increase the maximum length of Fully Specified Name (FSN) and Synonym descriptions, from 255 to 4,096 characters.

SNOMED International has shared on its [Early Visibility Release Notifications page](#) (item 29) the descriptions that will be increased beyond the previous 255 character limit from the August 2026 International Edition.

These descriptions will first appear in SNOMED CT UK Edition Release 43.0.0, due on [30 September 2026](#), as that release will include data from the August 2026 International Edition.

If UK stakeholders have any questions or concerns, please email the dm+d team and include 'SNOMED International proposal to increase Description length limit' to the subject line."

No specific actions are currently proposed, but members may wish to consider whether any pharmacy systems could be affected by the increased description length limits.

Drug Tariff IT

- The Government [announced](#) that young people leaving care will become entitled to free NHS prescriptions up to the age of 25. Further communications to follow. As this will require legislative changes and further operational planning, this entitlement is not likely to come into force for many months.

Patient choice and IT

- NHS England is working with Community Pharmacy England, system suppliers, integrated care boards (ICBs) and pharmacy teams to support implementation of the revised [EPS nomination: standards that must be followed](#).
- The process for ICBs requesting relevant data has been streamlined.
- ICBs can submit requests via the [NHS National Service Desk \(NSD\) portal](#).

NHS England resources

- NHS England has published an updated [patient choice poster](#) available from the [EPS nomination standards webpage](#) and Community Pharmacy England's [EPS nominations hub](#).
- Some pharmacies are displaying the poster to help explain patients' rights regarding pharmacy choice and to support patients who believe their choice has not been respected.
- The poster includes a QR code that helps patients or their representatives identify their local ICB website and ICB contact details so they can send their feedback about pharmacy preference to the ICB.
- The poster can be used for concerns relating to both dispensing arrangements and access to pharmacy services.

Community Pharmacy England resources: patient feedback templates

To support local resolution, optional patient feedback templates are available. These have been developed with input from NHS England pharmacy and EPS colleagues and cover:

- [Feedback about a pharmacy and my pharmacy choice](#)
- [Feedback about an app, website or technology affecting patient choice](#)
- [Feedback about GP practice information and pharmacy choice](#)

Key points

- The templates are entirely optional.
- Patients may adapt them or provide feedback in their own words.
- Existing local ICB feedback and escalation processes can continue to be used.
- When supporting patients, organisations may wish to use terms such as feedback or confirming pharmacy choice rather than complaints, where appropriate.

Use of the templates

- The templates are intended to be used where issues arise. Community Pharmacy England Local Pharmacy Committee colleagues and others may wish to signpost pharmacy owners to them where relevant queries are raised.

Feedback

Any feedback on the templates can be provided directly to [Community Pharmacy England's IT Policy Manager](#).

Updates will continue to be published at:

- [EPS nominations hub](#)
- [Patient choice and IT](#)

Interoperability

Further updates have been published on the [NHS Developer and Integration Hub](#) since the group's last bulletin.

Developing robust services IT & systems

Relevant webpages include: [/servicesit](#) and [/systems](#)

Ambient voice technology

Community Pharmacy England has further updated its [ambient scribing tools hub](#), setting out how these tools may support community pharmacy and the safeguards required for their use. This guidance incorporates the group's feedback gathered at the last session we had on this topic.

Ambient scribing tools use voice technology and AI to create draft consultation notes, which pharmacy professionals must review and approve. This can help reduce administrative workload, improve record quality, and allow greater focus on patient care.

These tools may become increasingly relevant as community pharmacies provide more clinical services. However, they must be used safely, transparently, and in line with NHS guidance.

Ambient scribing tools do not replace professional judgement, do not make clinical decisions, and do not automatically update patient records. Pharmacy teams remain fully accountable for all documentation. These tools may offer efficiency benefits but require careful, responsible and user-tested implementation.

Additional ambient scribing developments are outlined on page 10 of this agenda paper. The NHS digital Ambient scribing webpage states that:

“Applications for [IT] suppliers reopened.. and will remain open. Read more about the process on the [Find a Tender](#) website. The list of suppliers on our website will be updated when new suppliers are added to the [list of self-certified AVT supplier](#).”

Next steps

- Members may wish to consider the guidance and the potential role of these tools during piloting, procurement or wider rollout.
- IT suppliers may consider whether the ambient scribing framework and register is relevant.
- An upcoming event may be of interest to some: [Ambient Voice Technology](#) (Kings Fund, Thurs 12th Nov 2026) (virtual)

Other updates on Ambient voice technology

- [Medicines and Healthcare products Regulatory Agency \(MHRA\) confirmed within new guidance regarding ambient voice technology products](#) that:
 - are intended to support diagnosis, treatment and automated clinical actions need to be regulated as medical devices and remain subject to the relevant regulatory requirements
 - solely intended to transcribe and summarise clinical conversations, draft correspondence or suggest clinical codes for review by a clinician are not to be regulated as medical devices under the current regulatory framework (MDR 2002).
- HTN Health Tech News reported that [Croydon Health Services was awarded a £380k contract for ambient voice implementation](#) and [Kingston and Richmond NHS Foundation Trust started its roll out of ambient voice technology](#).
- The King's Fund published an article [Seizing a rare opportunity: scaling ambient voice technology in the NHS](#).
- JMIR published an article [Ambient AI Scribes: Retrospective Cohort Study](#).
- Health Innovation Kent Surrey Sussex published a case study on [Accelerating successful and safe adoption of ambient voice technology across health and care](#).
- Healthwatch published a report, [What does the public think about AI scribe use in healthcare?](#)
- Healthcare Today reported that [The Royal College of Physicians expressed concerns regarding use of automated voice technologies](#).
- Patient Safety Learning Hub published, [Ambient voice technology: patient safety](#).
- [Central and North-West London NHS Foundation Trust cut clinical admin by up to 68% after becoming one of the first mental health trusts in England to scale ambient voice technology](#).

Artificial Intelligence (AI) governance

- NPJ Digital Medicine [reviewed governance frameworks for the safe and responsible use of AI within healthcare organisations](#).

- Frontiers in Digital Health evaluated [AI, digital health equity and implementation safeguards framework](#).
- Tony Blair Institute for Global Change discussed [The Risk of Standing Still: Governing AI in Health Systems Under Pressure](#).
- NHS Shared Business Services [launched a £900m AI procurement framework for NHS and public sector organisations](#).

AI Regulation

- HTN Health Tech News reported that [MHRA announced plans to launch a regulatory AI sandbox with the aim to explore how AI can support medicines development and safety](#).
- Medical Protection Society published a report, [Closing the AI liability gap: AI, safety, and the case for legislative change](#).
- HTN Health Tech News reported that [MHRA AI regulatory sandbox for London calls for expressions of interest](#).

Patient use of AI

- A study published by King's College London found that [instead of consulting a GP](#).
- The King's Fund published, [Is the NHS ready for the AI-powered patient?](#)
- Wired Gov published, [Harnessing the potential of AI to bring real benefits for patients](#).

AI and health policy

- Digital Health's chief clinical information officer, [warned that the NHS risks becoming "too attached to AI" at the expense of tackling challenges around access and inequality](#).
- NHS Employers published [Keeping humans at the heart of the AI transformation](#).
- BMJ published [NHS AI policy: What's in the £10bn investment and what are the concerns?](#)

AI pilot and trials

- The Rotherham NHS Foundation Trust has [reduced IT help desk call volumes by 28% after introducing an AI-powered autonomous agent](#).
- HTN reported that University Hospital Southampton NHS Foundation Trust [shared plans on how it will progress further with its rollouts of AI and ambient voice technology tools](#).
- GOV.UK reported on the launch of [the London sandbox, a secure environment designed to safely test AI-enabled devices in a real-world environment](#).

AI: workforce, adoption and implementation

- Health Innovation Network South London published [Preparing the NHS workforce for AI requires more than technology](#).
- [NHS England is rolling out Microsoft 365 Copilot to 505,000 clinicians and support staff across healthcare services](#).
- The Journal of mHealth published an [AI Tools that Cut Paperwork could Help Tackle Rising Clinician Burnout across the NHS](#).
- UCL Partners published [Beyond productivity: AI and NHS workforce implications](#), the report explored how AI may affect workforce roles, skills requirements and service delivery across the NHS.
- [Health sector organisations reportedly welcomed NHS England's plans to accelerate the rollout of AI tools across the NHS as part of a reported £10bn investment programme](#).

- The King's Fund published [What is it like to lead AI and digital transformation during a time of constant change?](#), a video exploring the opportunities and challenges of leading AI and digital transformation programmes across health and care services.
- NHS Employers published a case study, [Empowering safe and confident AI adoption](#).
- AI Magazine published an article, [Why 90% of NHS Healthcare Workers Use AI in Clinical Work](#).
- Wired Gov published [NICE Listens: hearing the public's views on AI in health and care](#).
- Humber Teaching Foundation Trust reflected on [how the NHS could embrace AI without losing the human heart of healthcare](#).

Digital prescriptions & services

Relevant webpages include: [/patientdigitalservices](#), [/apps](#), [nhsapp](#) and [/eps](#)

Other NHS account and NHS App updates

- The updated [NHS App prescription feature](#) enables patients to view their active repeat medicines in one place.
- The NHS App is [evolving from a simple access tool into a personalised platform to support long-term care management and reduce system pressure](#).
- The updated [NHS App Toolkit](#) includes posters, images, walk-through videos and messages to help primary care teams promote the NHS App to patients.
- HTN Health Tech News reported that [NHS England has set out plans to commit £10 billion in funding over the next three years for tech and digital systems, including an AI triage tool for the NHS App](#).
- HTN reported that an [NHS App AI triage tool pilot reduced phone queue volumes by 29% at Wealden Ridge Medical Partnership](#). NHS England plans wider rollout ahead of national availability from April 2028.

Patient digital tools and apps: case studies

- [University Hospitals Coventry and Warwickshire \(UHCW\) NHS Trust has gone live with an interoperable digital medicines management system](#).

Electronic health records usage

Relevant webpages include: [/genomics](#) and [/records](#)

Records: National

- NHS trusts in England could [spend more than £13.5 million in 2026 fixing data issues after electronic patient record \(EPR\) implementations](#).
- [Integrated Care Northamptonshire expanded digital care plans through the NHS National Record Locator](#).
- Dedalus opined that [NHS electronic patient record adoption has a design challenge, not just a training challenge](#).
- Genomics England [explained how participant data within the National Genomic Research Library supports research](#)
- [Analysis of NHS data by The King's Fund found that the NHS spent almost £240 million storing patient records in 2024/25](#).
- Health Services Safety Investigations Body published a report: [Electronic patient record systems – electronic referrals for ongoing care](#).

Straightforward security & connectivity

Relevant webpage(s) include: [/ds](#) and [/connections](#)

- [NHS England launched a new online tool to help pharmacy teams more quickly identify their local Registration Authority contact details for NHS Smartcard support.](#)
- NHS England has [restricted access to some of its open source code to strengthen security amid concerns about the impact of AI models.](#)

Policy updates

Relevant webpages include: [techpolicydev](#)

IT policy: priorities, reports and the future

- NHS England published a pipeline [notice](#) that [set out a potential £40 million opportunity relating to NHS Digital Citizen services, including the NHS App, NHS Proxy and NHS.uk.](#)
- DHSC published the [Health Bill: data and digital functions - fact sheet.](#)
- Computer Weekly published an article [exploring the NHS data model underpinning the Federated Data Platform \(FDP\).](#)
- King's Fund published a report [Innovation, economic growth, medtech and the NHS: from strategy to delivery.](#)
- Community Pharmacy England reported on:
 - [Clarifications on the CPCF arrangements for 2026/27 and continued support for a more digitised CPCF.](#)
 - [Medicines packs with poor barcodes: NHS England survey.](#)
 - [Preparing for national digital phoneline switchover.](#)
- The King's Fund published, [One Year On: Is the NHS 10 Year Health Plan Being Delivered?](#), which highlighted progress towards the shift from analogue to digital, including developments in the NHS App, interoperability, and the Single Patient Record.
- Computer Weekly published [The FDP debate is looking in the rear-view mirror – what's around the next bend?](#)

Federated Data Platform developments

- The King's fund published [Our response to the government's announcement of investment in NHS technology and data.](#)
- [Health and Social Care Committee urged health minister to get consider whether to end instead of continue arrangements with US firm Palantir and its Federated Data Platform amid 'contested benefits'.](#) The NHS England Chief Executive reportedly called for [a further review of the effectiveness of the Federated Data Platform and sought further information on reported benefits.](#)
- BMJ published an article, [Palantir: NHS England is warned by statistics watchdog over FDP claims.](#)

Digital capabilities of the workforce

- [DHSC plans £1.3 million national workforce development and training framework.](#)

Local IT roadmaps and ICB IT priorities

Community Pharmacy England's [the IT policy](#) webpage includes the template:
[Local pharmacy IT priorities and ICBs](#)

The template is designed to help LPCs and pharmacy owners articulate community pharmacy IT priorities in a clear and consistent way in line with wider ICB and primary care digital objectives. LPCs, pharmacy owners, and other stakeholders are invited to share email feedback to the secretariat.

The template is intended to help Local Pharmacy Committees (LPCs), pharmacy owners and other stakeholders articulate community pharmacy IT priorities in a clear and consistent way, aligned with wider ICB and primary care digital objectives. LPCs, pharmacy owners and other stakeholders are invited to provide feedback to the secretariat.

Seamless referrals & appointments

Relevant webpages include: [/bookings](#)

- [NHS BaRS programme](#) continues to support the exchange of [booking and referral information between NHS service providers using standardised formats designed to support clinical workflows](#). The longer-term ambition remains for BaRS to be available across all care settings. The [minutes and slides from the group's previous bulletins](#) contain additional information about BaRS and pharmacy use cases. Previous CP ITG feedback highlighted the importance of incorporating NHS appointment standards within the future development of the BaRS programme.

Optimal principles across all pharmacy IT

Relevant webpage(s) include: [/itworkflow](#) and [/itcontingency](#)

- Pharmacy teams can provide updates about any efforts to move towards more [paperless](#) work by contacting da@cpe.org.uk.

About CP ITG

CP ITG voting members nominated by IPA, CCA, NPA, Community Pharmacy England, and RPS: Steve Ash, David Broome (Chair), Darryl Dethick, Amandeep Doll, David Evans, Sanjay Ganvir, Dervis Gurol, Nick Kaye, Darren Powell, Sian Retallick, Craig Spurdle, Iqbal Vorajee, Janson Woodall (Vice Chair) and Heidi Wright.

The wider CP ITG: Other pharmacy representatives, system supplier staff and representatives from NHS England pharmacy team, NHS England's Transformation Directorate, NHSBSA, DHSC and PRSB.

Secretariat: [Dan Ah-Thion](#).

Social media: To publicly tweet about the group use: [#cpitg](#)

Date of last main meeting: Wednesday 3rd June 2026.

Next virtual main meetings: Tues 2nd March 2027, Tues 1st June 2027, Tues 21st September 2027

Comments or feedback: Comments that support progress on the priority areas, can be provided by emailing the CP ITG secretariat, Dan Ah-Thion (da@cpe.org.uk).