

NWSI 2026 NO.187

HEALTH AND SOCIAL CARE

**The Pharmaceutical Services
(Clinical Services) (Wales)
Directions 2026**

Made 13 October 2026

Coming into force 1 November 2026

The Welsh Ministers, in exercise of the powers conferred by sections 12(3), 81, 82, 203(9) and (10), and 204(1)(b) of the National Health Service (Wales) Act 2006⁽¹⁾, give the following Directions.

Title, coming into force and application

1.—(1) The title of these Directions is the Pharmaceutical Services (Clinical Services) (Wales) Directions 2026.

(2) These Directions come into force on 1 November 2026.

(3) These Directions are given to Local Health Boards.

Interpretation

2.—(1) In these Directions—

“the Act” (“*y Ddeddf*”) means the National Health Service (Wales) Act 2006;

“Human Medicines Regulations” (“*Rheoliadau Meddyginiaethau Dynol*”) means the Human Medicines Regulations 2012⁽²⁾;

“Pharmaceutical Services Regulations” (“*Rheoliadau Gwasanaethau Fferyllof*”) means the National Health Service (Pharmaceutical Services) (Wales) Regulations 2020⁽³⁾;

(1) 2006 c. 42.

(2) S.I. 2012/1916.

(3) S.I. 2020/1073 (W. 241).

“appropriate person” (“*person priodol*”) means a registered pharmacist, pharmacy technician, trainee pharmacist, or health care professional (as it is defined in regulation 2(1) of the Pharmaceutical Services Regulations), except in relation to paragraph 8 where it also includes any other person, employed or engaged by the NHS pharmacist to provide a service in accordance with the relevant service specification;

“approved” (“*a gymeradwywyd*” and “*cymradwy*”) means approved by the Welsh Ministers;

“Choose Pharmacy” (“*Dewis Fferyllfa*”) means the electronic system used by NHS pharmacists to create a Choose Pharmacy Record;

“Choose Pharmacy Record” (“*Cofnod Dewis Fferyllfa*”) means the patient record kept by an NHS pharmacist who, in accordance with an arrangement made with a Local Health Board, provides a service specified in these Directions;

“clinical services” (“*gwasanaethau clinigol*”) means those directed services within the meaning of regulation 2(1) of the Pharmaceutical Services Regulations;

“drug misuser” (“*camddefnyddiwr cyffuriau*”) means a person who misuses drugs;

“enhanced criminal record certificate” (“*tystysgrif cofnod troseddol fanwl*”) means an enhanced criminal record certificate issued under section 113B of the Police Act 1997⁽¹⁾ which includes suitability information relating to children and suitability information relating to vulnerable adults under sections 113BA (suitability information relating to children) and 113BB (suitability information relating to vulnerable adults) of that Act respectively;

“gluten free foods” (“*bwydydd heb glwten*”) means only those gluten free foods that are specified in list A of Part XV (borderline substances) of the Drug Tariff;

“GMS contract unified services” (“*gwasanaethau unedig contractau GMC*”) means the services required to be provided by GMS contractors in accordance with regulation 17 of the National Health Service (General Medical Services Contracts) (Wales) Regulations 2023⁽²⁾;

“independent prescriber” (“*rhagnodydd annibynnol*”) means a—

- (a) community practitioner nurse prescriber,
- (b) nurse independent prescriber,

(1) 1997 c. 50.

(2) S.I. 2023/953 (W. 155).

- (c) optometrist independent prescriber,
- (d) paramedic independent prescriber,
- (e) pharmacist independent prescriber,
- (f) physiotherapist independent prescriber,
- (g) podiatrist or chiropodist independent prescriber, or
- (h) therapeutic radiographer independent prescriber;

“NECAF” (“*FfHAEG*”) means the National Electronic Claim and Audit Form, the electronic system used by NHS pharmacists to submit claims for remuneration for the provision of NHS services;

“NHS body” (“*corff GIG*”) has the meaning given by regulation 213(1) of the Human Medicines Regulations;

“notify” (“*hysbysu*”) means to notify in writing and includes electronic communications;

“NWSSP” (“*PCGC*”) means NHS Wales Shared Services Partnership, established by the Velindre National Health Service Trust Shared Services Committee (Wales) Regulations 2012⁽¹⁾;

“out of hours period” (“*cyfnod y tu allan i oriau*”) means, in relation to a pharmacy, the days and times at which the pharmacy is not obliged to remain open under paragraph 23 (pharmacy opening hours: general) of Schedule 5 to the Pharmaceutical Services Regulations;

“patient care record” (“*cofnod gofal claf*”) means the patient records kept by the person who is providing the patient with GMS contract unified services, or their equivalent;

“Patient Group Direction” (“*Cyfarwyddyd Grŵp Cleifion*”) has the meaning given by regulation 213(1) of the Human Medicines Regulations;

“pharmacy” (“*fferylfa*”) has the meaning given by regulation 2(1) of the Pharmaceutical Services Regulations;

“pharmacy technician” (“*technegydd fferylfa*”) means a person registered in Part 2 of the General Pharmaceutical Council’s Register established and maintained under article 19(1) and (2) of the Pharmacy Order 2010⁽²⁾;

“trainee pharmacist” (“*fferyllydd o dan hyfforddiant*”) means a person who is engaged upon an accredited programme of training, the successful completion of which would entitle that person to be entered in Part 1 of the General

(1) S.I. 2012/1261 (W. 156).

(2) S.I. 2010/231, amended by S.I. 2019/593.

Pharmaceutical Council's Register in accordance with article 20 of the Pharmacy Order 2010;

"Vaccine Group Direction" (*"Cyfarwyddyd Grŵp Brechlynnau"*) has the meaning given by regulation 213(1) of the Human Medicines Regulations.

(2) Expressions used in these Directions and in the Pharmaceutical Services Regulations have the same meaning as in those Regulations.

General matters and pre-conditions for making arrangements

3.—(1) Where a Local Health Board makes arrangements with an NHS pharmacist for the provision of any of the clinical services specified in paragraphs 4 to 8, such arrangements must include a requirement for the NHS pharmacist to satisfy the conditions set out in sub-paragraphs (2) to (9).

(2) The first condition is that the NHS pharmacist has notified the Local Health Board of their intention to provide the relevant clinical service, in the manner approved⁽¹⁾ for that purpose, and has provided the Local Health Board with a satisfactory enhanced criminal record certificate.

(3) The second condition is that the Local Health Board must be satisfied that the NHS pharmacist is satisfactorily complying with their obligations under Schedule 5 to the Pharmaceutical Services Regulations in connection with the provision of pharmaceutical services.

(4) Where the NHS pharmacist is providing the Pharmacy Independent Prescribing Service in accordance with paragraph 7, the third condition is that the Local Health Board must be satisfied that the NHS pharmacist is satisfactorily complying with the 'Standards for Competency Assurance Requirements for Employers' of the "Standards for Competency Assurance of Independent and Supplementary Prescribers in Wales", published by Health Education and Improvement Wales⁽²⁾.

(5) The fourth condition is that—

- (a) if the NHS pharmacist is a registered pharmacist, they must complete all approved training required in order to provide the services which form part of the relevant clinical service,

(1) <https://nwssp.nhs.wales/ourservices/primary-care-services/our-services/pharmacy-services/all-wales-pharmacy-database/>. Clinical services are available from the local health board.

(2) <https://heiw.nhs.wales/files/heiw-standards-for-competency-assurance-of-independent-and-supplementary-prescribers-in-wales/>.

- (b) if the NHS pharmacist is a registered pharmacist and they intend to employ or engage another appropriate person to provide services which form part of a clinical service, that appropriate person must complete all approved training required in order to provide the services which form part of the relevant clinical service, or
- (c) if the NHS pharmacist is a body corporate or partnership, any appropriate person they intend to employ or engage to provide services must complete all approved training required in order to provide services as part of the relevant clinical service.

(6) The fifth condition is that—

- (a) if the NHS pharmacist is a registered pharmacist, they must complete in the approved manner the approved form warranting that they are competent to provide the services which form the relevant clinical service,
- (b) if the NHS pharmacist is a registered pharmacist and they intend to employ or engage an appropriate person to perform services which form part of a clinical service, that appropriate person must complete in the approved manner the approved form warranting that they are competent to provide those services, or
- (c) if the NHS pharmacist is a body corporate or partnership, any appropriate person they intend to employ or engage to provide any services which form part of a clinical service must complete in the approved manner the approved form warranting that they are competent to provide those services.

(7) The sixth condition is that the NHS pharmacist has in place, at the pharmacy at or from which services which form part of the relevant clinical service are to be provided, a standard operating procedure for the delivery of the service—

- (a) which has been notified to such persons employed or engaged by the NHS pharmacist for the purpose of delivery of the service,
- (b) which explains the clinical service, its eligibility criteria and the roles that such persons employed or engaged by the NHS pharmacist may be required to perform as part of its delivery, and
- (c) about which such persons employed or engaged by the NHS pharmacist have received appropriate training, if there is any

role that they may be required to perform as part of the service.

(8) The seventh condition is that—

- (a) if the NHS pharmacist is a registered pharmacist and an independent prescriber, they must comply with the “Standards for Competency Assurance of Independent and Supplementary Prescribers in Wales”, published by Health Education and Improvement Wales,
- (b) if the NHS pharmacist is a registered pharmacist and they intend to employ or engage an independent prescriber to provide services which form part of a clinical service, the independent prescriber must comply with the “Standards for Competency Assurance of Independent and Supplementary Prescribers in Wales”, published by Health Education and Improvement Wales, or
- (c) if the NHS pharmacist is a body corporate or partnership, any independent prescriber they intend to employ or engage to provide services must comply with the “Standards for Competency Assurance of Independent and Supplementary Prescribers in Wales”, published by Health Education and Improvement Wales.

(9) The eighth condition, subject to sub-paragraph (10), is that the clinical services provided under any arrangement are provided at an acceptable location, and in this paragraph, “acceptable location” means an area for confidential consultations at the pharmacy, which is—

- (a) clearly designated as an area for confidential consultations,
- (b) distinct from the general public areas of the pharmacy premises, and
- (c) is an area where both the person receiving those services and the appropriate person providing those services are able to sit down together and talk at normal speaking volume without being overheard by any other person (including other pharmacy staff).

(10) An appropriate person who is the NHS pharmacist, or who is employed or engaged by the NHS pharmacist may provide services other than at the acceptable location at the pharmacy if that appropriate person does so—

- (a) by telephone, or video call or in person at a location other than the pharmacy to provide services to a particular person on a particular occasion,
- (b) with the agreement of the person receiving those services, that person having expressed a

preference for that contact to be by telephone, or video call or at a location other than the pharmacy on that occasion, and

- (c) in circumstances where—
 - (i) the appropriate person is at the pharmacy, and
 - (ii) the conversation cannot be overheard (except by someone who the person receiving those services wants to hear the conversation, for example, a carer), or
 - (iii) the provision of services takes place in a location other than the pharmacy, with the consent of the Local Health Board.

The Discharge Medicines Review Service

4.—(1) Each Local Health Board must make arrangements for the provision of a Discharge Medicines Review (“DMR”) Service, for persons within and outside its area, with NHS pharmacists included in its pharmaceutical list who—

- (a) wish to enter into such arrangements and notify the Local Health Board of their intention to provide the DMR service in accordance with paragraph 3(2), and
- (b) satisfy the conditions set out in paragraph 3(3) to (9), and
- (c) agree to provide the DMR service in accordance with the relevant specification⁽¹⁾.

(2) The underlying purpose of the DMR service is, with the agreement of the person receiving those services, to contribute to a reduction in risk of medication errors and adverse drug events by, in particular—

- (a) increasing the availability of accurate information about a person’s medicines,
- (b) improving communication between those involved in the transfer of that person’s care, the person receiving those services, and their carers,
- (c) increasing the involvement of the person receiving those services by helping them to develop a better understanding of their medicines, and
- (d) reducing the likelihood of unnecessary duplicated prescriptions being dispensed, and reducing wastage of medicines.

(1) <https://nwssp.nhs.wales/ourservices/primary-care-services/our-services/pharmacy-services/all-wales-pharmacy-database/>.

5.—(1) Prior to entering into arrangements with an NHS pharmacist for the provision of the DMR service under paragraph 4, a Local Health Board must satisfy itself those arrangements provide that—

- (a) the DMR service may only be provided by—
 - (i) a registered pharmacist, or pharmacy technician employed or engaged by the NHS pharmacist, who has completed in the approved manner the approved form warranting that they are competent to provide Part 1 and Part 2 services as part of the DMR service,
 - (ii) a trainee pharmacist employed or engaged by the NHS pharmacist, who has completed in the approved manner the approved form warranting that they are competent to provide Part 1 and Part 2 services as part of the DMR service and who provides those services under the supervision of a registered pharmacist or pharmacy technician who is competent to provide the DMR service in accordance with paragraph 5(1)(a)(i);
- (b) Part 1 and Part 2 services provided as part of the DMR service are to be provided at an acceptable location at the pharmacy, within the meaning given by paragraph 3(9) except in the circumstances provided for by paragraph 3(10);
- (c) the NHS pharmacist may only offer the provision of the DMR service—
 - (i) to persons who have been discharged from one care setting to another within the previous 4 weeks,
 - (ii) to persons for whom the pharmacy has received a copy of an advice note regarding the person's medicines issued by the care setting from which the person has been discharged, and—
 - (aa) a change has occurred to the person's medicines prior to the person being discharged,
 - (bb) the person is taking 4 or more medicines,
 - (cc) the person requires a reasonable adjustment to be made to the presentation of their medicines, or
 - (dd) the registered pharmacist or pharmacy technician who is providing the service or supervising a trainee pharmacist who is providing the service in accordance with paragraph 5(1)(a)(ii) has, in their

professional opinion, reason to consider that the person receiving those services would benefit from the service;

- (d) the Part 1 services that are to be provided by the NHS pharmacist as part of the DMR service must comprise—
 - (i) a discussion with the person receiving those services about the medicines they are taking,
 - (ii) identification by the person providing those services of any discrepancies between the medicines the person receiving those services is taking and those prescribed at discharge, and
 - (iii) agreement, where possible, between the person providing those services and the person receiving those services of the next steps, that is—
 - (aa) if no discrepancies between the medicines the person receiving those services is taking and those prescribed at discharge, agreeing with the person receiving those services a time and location for the provision of Part 2 services,
 - (bb) if any discrepancies or problems are identified under paragraph (d)(ii) and the registered pharmacist or pharmacy technician providing the service, or supervising the trainee pharmacist providing the service, is of the professional opinion that intervention by a general practitioner is required, explaining that to the person receiving those services, completing the approved DMR feedback form and referring the matter to the general practitioner with whom the person receiving those services is a registered patient,
 - (cc) if any discrepancies or problems are identified under paragraph (d)(ii) and the registered pharmacist or pharmacy technician providing the service, or supervising the trainee pharmacist who is providing the service, is of the professional opinion that intervention by a general practitioner is not required, agreeing with the person receiving those services a time and location

- for the provision of Part 2 services, and any remedial steps to be taken prior to that intervention;
- (e) the Part 2 services that are to be provided by the registered pharmacist, pharmacy technician or trainee pharmacist as part of the DMR service must comprise—
 - (i) a discussion with the person receiving those services about the medicines they are taking,
 - (ii) an assessment of the extent to which any discrepancies between the medicines the person receiving those services is taking and those prescribed at discharge have been resolved,
 - (iii) if any discrepancies or problems are identified under paragraph (d)(ii) and the registered pharmacist or pharmacy technician providing the service, or supervising a trainee pharmacist who is providing the service, is of the professional opinion that intervention by a general practitioner is required, explaining that to the person receiving those services, completing the approved DMR feedback form and referring the matter to the general practitioner with whom the person receiving those services is a registered patient;
 - (f) the registered pharmacist, pharmacy technician or trainee pharmacist ensures that the Choose Pharmacy Record is updated as soon as reasonably practicable after each consultation has been carried out by or on behalf of the NHS pharmacist as part of the DMR service and includes the approved data.

(2) For the purposes of sub-paragraph (1)(d) and (e), provision of the DMR service has been completed—

- (a) once a person has received Part 1 and, if necessary, Part 2 services, or
- (b) if, as a consequence of an act or omission of the person receiving those services, that person does not receive the Part 2 services at the agreed time and the NHS pharmacist is unable, having made reasonable efforts to do so, to rearrange and provide those Part 2 services on another occasion, once those reasonable efforts have been made.

The Clinical Community Pharmacy Service

6.—(1) Each Local Health Board must make arrangements for the provision of the Clinical Community Pharmacy Service services specified in

sub-paragraph (2), for persons within and outside its area, with NHS pharmacists included in its pharmaceutical list who—

- (a) wish to enter into such arrangements and notify the Local Health Board of their intention to provide the Clinical Community Pharmacy Service in accordance with paragraph 3(2),
- (b) satisfy the conditions set out in paragraph 3(3) to (9), and
- (c) agree to provide the Clinical Community Pharmacy Service in accordance with the relevant specification⁽¹⁾.

(2) An arrangement to provide the Clinical Community Pharmacy Service must include the provision by the NHS pharmacist of—

- (a) a Common Ailment Service, the underlying purpose of which is for a registered pharmacist to provide advice and support to eligible persons complaining of a common ailment, and where appropriate, to supply drugs to them for the treatment of the common ailment;
- (b) an Urgent Contraception Service, the underlying purpose of which is for an NHS pharmacist to provide a contraception service to supply contraception in case of urgency or emergency, or to supply regular contraception, to a person;
- (c) an Emergency Medicine Supply Service, the underlying purpose of which is for a registered pharmacist to ensure, at the request of a person in cases of urgency, prompt access to drugs or appliances—
 - (i) which have previously been prescribed for them in an NHS prescription but for which they do not have an NHS prescription, and
 - (ii) where, in the case of prescription only medicines, the requirements of regulation 225(1) of the Human Medicines Regulations (emergency sale etc. by Pharmacist: at patient's request) are satisfied.

The Pharmacy Independent Prescribing Service

7.—(1) Each Local Health Board must make arrangements for the provision of the Pharmacy

(1) <https://nwssp.nhs.wales/ourservices/primary-care-services/our-services/pharmacy-services/all-wales-pharmacy-database/>.

Independent Prescribing Service, for persons within and outside its area, with NHS pharmacists included in its pharmaceutical list who are either independent prescribers or NHS pharmacists who intend to employ or engage an independent prescriber to deliver the service on their behalf, and who—

- (a) are providing the Clinical Community Pharmacy Service under an arrangement with a Local Health Board in accordance with paragraph 6,
- (b) wish to enter into an arrangement to provide the Pharmacy Independent Prescribing Service and notify the Local Health Board of their intention to do so in accordance with paragraph 3(2),
- (c) satisfy the conditions set out in paragraph 3(3) to (9), and
- (d) agree to provide the Pharmacy Independent Prescribing Service in accordance with the relevant specification⁽¹⁾.

(2) The underlying purposes of the Pharmacy Independent Prescribing Service are—

- (a) to provide access to prescription only medicines for the treatment of common ailments that require treatment with prescription only medicines that are not available under the Clinical Community Pharmacy Service,
- (b) to provide access to emergency or regular contraception where those needs cannot be met under the Clinical Community Pharmacy Service, and
- (c) for the provision of any other service which the NHS pharmacist agrees with the relevant Local Health Board to provide.

Additional Clinical Services

8.—(1) Each Local Health Board may make arrangements for the provision of the clinical services specified in sub-paragraph (2), to persons within or outside its area, with NHS pharmacists included in its pharmaceutical list, or in the pharmaceutical list of a neighbouring Local Health Board, who—

- (a) wish to enter into an arrangement to provide an additional service specified in sub-paragraph (2) and notify the Local Health Board of their intention to do so in accordance with paragraph 3(2),

(1) <https://nwssp.nhs.wales/ourservices/primary-careservices/our-services/pharmacy-services/all-wales-pharmacy-database/>.

- (b) satisfy the conditions set out in paragraph 3(3) to (9), and
 - (c) agree, where applicable, to provide that clinical service in accordance with the relevant specification⁽¹⁾.
- (2) The clinical services specified are—
- (a) an Anticoagulant Monitoring Service, the underlying purpose of which is for the NHS pharmacist to test the person's blood clotting time, review the results and adjust (or recommend an adjustment to) the anticoagulant dose accordingly,
 - (b) a Care Home Service, the underlying purpose of which is for the NHS pharmacist to provide advice and support to residents and staff in a care home relating to—
 - (i) the proper and effective ordering of drugs and appliances for the benefit of residents in the care home,
 - (ii) the clinical and cost-effective use of drugs,
 - (iii) the proper and effective administration of drugs and appliances in the care home,
 - (iv) the safe and appropriate storage and handling of drugs and appliances, and
 - (v) the recording of drugs and appliances ordered, handled, administered, stored or disposed of,
 - (c) a Disease Specific Management Service, the underlying purpose of which is for the NHS pharmacist to advise on, support and monitor the treatment of persons with specified conditions, and, where appropriate, to refer the person to another health care professional,
 - (d) an Emergency Pandemic Treatment and Prophylaxis Supply Service—
 - (i) the underlying purpose of which is for the NHS pharmacist to supply medicines to a person under a Patient Group Direction or protocol approved by the Ministers or an NHS body in accordance with regulation 247 of the Human Medicines Regulations (exemption for supply in the event or anticipation of pandemic disease), and
 - (ii) if an NHS pharmacist arranges to provide this service, it must provide it for the duration of the arrangement it has agreed with the Local Health Board,

(1) Clinical services are available from the relevant health board.

- (e) an Emergency Pandemic Vaccination Service—
 - (i) the underlying purpose of which is for the NHS pharmacist to provide a vaccination service to administer a vaccination to a person under a Patient Group Direction or a Vaccine Group Direction in accordance with regulation 235A of the Human Medicines Regulations (exemption for supply or administration of certain medicines used for vaccination), and
 - (ii) if an NHS pharmacist arranges to provide this service, it must provide it for the duration of the arrangement it has agreed with the Local Health Board,
- (f) a Gluten Free Food Supply Service, the underlying purpose of which is for the NHS pharmacist to supply gluten free foods to persons,
- (g) a Home Delivery Service, the underlying purpose of which is for the NHS pharmacist to deliver to persons' homes—
 - (i) drugs, and
 - (ii) appliances, other than specified appliances within the meaning of regulation 2(1) of the Pharmaceutical Services Regulations,
- (h) a Language Access Service, the underlying purpose of which is for the NHS pharmacist to provide, either orally, or in writing, advice and support to persons in a language understood by them in relation to—
 - (i) drugs which they are using,
 - (ii) their health,
 - (iii) general health matters relevant to them, and
 - (iv) where appropriate, referring the person receiving those services to another health care professional,
- (i) a Medication Review Service, the underlying purpose of which is for the NHS pharmacist to—
 - (i) conduct a review of the drugs used by a person on the basis of information and test results included in the patient care record, with the objective of considering the continued appropriateness and effectiveness of the drugs,
 - (ii) advise and support regarding the use of drugs including encouraging the active participation of the person receiving

- those services in decision making relating to their use of drugs, and
- (iii) where appropriate, refer the person receiving those services to another health care professional,
 - (j) a Medicines Assessment and Compliance Support Service, the underlying purpose of which is for the NHS pharmacist to—
 - (i) assess the knowledge of, compliance with and use of, drugs by vulnerable persons and persons with additional learning needs, and
 - (ii) offer advice, support and assistance to vulnerable persons and persons with additional learning needs⁽¹⁾ regarding the use of drugs with a view to improving their knowledge of, their compliance with and their use of, such drugs,
 - (k) a Needle and Syringe Supply Service, the underlying purpose of which is for the NHS pharmacist to—
 - (i) provide sterile needles, syringes and associated materials to drug misusers,
 - (ii) receive from drug misusers used needles, syringes and associated materials, and
 - (iii) offer advice to drug misusers and where appropriate refer the drug misuser to another health care professional or a specialist drug treatment centre,
 - (l) an On Demand Availability of Specialist Drugs Service, the underlying purpose of which is for the NHS pharmacist to ensure that persons receiving those services or health care professionals have prompt access to specialist drugs,
 - (m) an Out of Hours Service, the underlying purpose of which is for the NHS pharmacist to dispense drugs and appliances in the out of hours period (whether or not for the whole of the out of hours period),
 - (n) a Patient Group Directions Service, the underlying purpose of which is for the NHS pharmacist to supply or administer prescription only medicines to persons under Patient Group Directions,
 - (o) a Prescriber Support Service, the underlying purpose of which is for the NHS pharmacist to support health care professionals who prescribe drugs, and in particular to offer advice on—

(1) As defined in section 2 of the Additional Learning Needs and Education Tribunal (Wales) Act 2018 (anaw. 2).

- (i) the clinical and cost-effective use of drugs,
 - (ii) prescribing policies and guidelines, and
 - (iii) repeat prescribing,
- (p) a Schools Service, the underlying purpose of which is for the NHS pharmacist to provide advice and support to children and staff in schools relating to—
 - (i) the clinical and cost-effective use of drugs in a school,
 - (ii) the proper and effective administration and use of drugs and appliances in a school,
 - (iii) the safe and appropriate storage and handling of drugs and appliances, and
 - (iv) the recording of drugs and appliances ordered, handled, administered, stored or disposed of,
- (q) a Screening Service, the underlying purpose of which is for the NHS pharmacist to—
 - (i) identify persons at risk of developing a specified disease or condition,
 - (ii) offer advice regarding testing for a specified disease or condition, and
 - (iii) offer advice following a test and refer the person to another health care professional where appropriate,
- (r) a Stop Smoking Service, the underlying purpose of which is for the NHS pharmacist to—
 - (i) advise and support persons wishing to give up smoking, and
 - (ii) where appropriate, supply appropriate drugs and aids,
- (s) a Supervised Administration of Medicines Service, the underlying purpose of which is for the NHS pharmacist to supervise the administration of prescribed medicines in the pharmacy,
- (t) an Anti-viral Collection Service, the underlying purpose of which is for the NHS pharmacist to supply anti-viral medicines, in accordance with regulation 247 of the Human Medicines Regulations (exemption for supply in event of or in anticipation of pandemic disease), to persons for treatment or prophylaxis,
- (u) a Waste Minimisation Service, the underlying purpose of which is to identify prescribed medicines or appliances which are not required by the person at the point of supply,

- (v) a Vaccination Service, the underlying purpose of which is for the NHS pharmacist to provide a vaccination service to administer a vaccination as part of the health service in Wales, and
- (w) a Point of Care Tests Supply Service, the underlying purpose of which is for the NHS pharmacist to offer access to point of care tests for patients who have a health condition that makes them eligible for NHS treatment, to enable testing at home.

(3) The Local Health Board may terminate an arrangement made under sub-paragraph (2) if, in the opinion of the Local Health Board, the NHS pharmacist is not, or no longer, satisfactorily complying with their obligations under Schedule 5 to the Pharmaceutical Services Regulations in connection with the provision of clinical services.

(4) Where the Welsh Ministers have given specific directions to Local Health Boards in relation to certain vaccination services, the Local Health Board must ensure that it makes arrangements for the provision of those vaccination services in accordance with the relevant directions as opposed to under sub-paragraph (2)(v).

Consent, record keeping and data processing

9.—(1) On each occasion when a clinical service is provided, the NHS pharmacist or the appropriate person providing the service must—

- (a) obtain consent from the person receiving those services in the manner specified in the service specification before any service is provided,
- (b) provide the person receiving the service with sufficient information about the service to enable that person to give informed consent to receiving that service, and
- (c) maintain a record of any consent obtained under sub-paragraph (1)(a).

(2) Where a person has consented on another person's behalf, the relationship between that person and the person receiving the service must also be recorded.

(3) On each occasion when a clinical service is provided, the NHS pharmacist or the appropriate person providing the service must complete a written patient record (which may be an electronic record)—

- (a) in the approved manner set out by the Local Health Board, and
- (b) in accordance with the service specification.

(4) The written patient record must be retained in accordance with any legal requirement and the NHS Wales Record Management Code of Practice⁽¹⁾.

(5) On each occasion when a clinical service is provided, the NHS pharmacist must, through the agreed process—

- (a) notify the patient's General Practitioner of the service provided in the manner approved by its Local Health Board (which may include approval of methods of transmission of the information as well as of the form in which the information is transmitted) where specified within the relevant service specification,
- (b) supply its Local Health Board with such information as they may reasonably require for the purposes of contract management and for assuring, maintaining and improving the quality and safety of the services provided,
- (c) supply its Local Health Board and NWSSP with such information as they may reasonably require for the purpose of making payments and for the purpose of post payment verification,
- (d) supply its Local Health Board, NWSSP, Public Health Wales and the Welsh Ministers with such anonymised information as they may reasonably request for the purposes of public health surveillance, monitoring the impact of services and service evaluation,
- (e) provide such information from the Choose Pharmacy Record to Digital Health and Care Wales as may be reasonably required for the collection, management and dissemination of data necessary to support the provision of information for the purposes set out in subparagraph (3), and
- (f) ensure consistent coding for the capture of data and compliance with relevant data protection legislation.

Payment for provision of clinical services

10. The Local Health Board must make payments to an NHS pharmacist who provides services under an arrangement made pursuant to these Directions in accordance with—

- (a) Part VID of the Drug Tariff, for the provision of the DMR service, the Clinical Community Pharmacy Service, or Pharmacy Independent Prescribing Service, and

(1) <https://www.gov.wales/managing-health-and-social-care-records-code-practice-2022>.

- (b) Part VIE of the Drug Tariff, for the provision of any other service.

Conditions of payment

11.—(1) A payment under these Directions is only payable if an NHS pharmacist, in respect of each person for whom a payment under these Directions is claimed in accordance with the arrangements for claiming payments set out in Parts VID and VIE of the Drug Tariff, has supplied the Local Health Board via Choose Pharmacy, NECAF (where the relevant Choose Pharmacy module is not available), or an alternative mechanism agreed between the NHS pharmacist and Local Health Board, with—

- (a) the name of the person,
- (b) the date of birth of the person,
- (c) the NHS number of the person, where it is known, and
- (d) the date on which the service has been provided to the person.

(2) The Local Health Board may request from an NHS pharmacist any information which the Local Health Board does not have but needs, and the NHS pharmacist either has or could be reasonably expected to obtain, in order for the Local Health Board to form an opinion on whether the NHS pharmacist is entitled to payment under these Directions.

(3) The Local Health Board may, in appropriate circumstances, withhold payment of any, or any part of, payments due under these Directions if an NHS pharmacist has breached any of these conditions.

Overpayment and withheld amounts

12.—(1) If a Local Health Board makes a payment to an NHS pharmacist pursuant to these Directions and—

- (a) the NHS pharmacist was not entitled to receive all or part thereof, whether because it did not meet the entitlement conditions for the payment or because the payment was calculated incorrectly (including where a payment on account overestimates the amount which is to fall due),
- (b) the Local Health Board was entitled to withhold all or part of the payment because of a breach of a condition attached to the payment, but is unable to do so because the money has already been paid, or
- (c) the Local Health Board is entitled to repayment of all or part of the money paid,

regulation 57 of the Pharmaceutical Services Regulations applies and the Local Health Board may recover the money paid by deducting an equivalent amount from any payment payable under these Directions or any other payment payable to an NHS pharmacist in accordance with the Drug Tariff and by virtue of its provision of NHS services, and where no such deduction can be made, it is a condition of the payments made pursuant to these Directions that the NHS pharmacist must pay to the Local Health Board that equivalent amount.

(2) Where a Local Health Board is entitled pursuant to sub-paragraph (1) to withhold all or part of a payment because of a breach of a payment condition, and the Local Health Board does so or recovers the money by deducting an equivalent amount from another payment payable under these Directions or any other payment payable to an NHS pharmacist in accordance with the Drug Tariff and by virtue of its provision of NHS services, it may, where it sees fit to do so, reimburse the NHS pharmacist the amount withheld or recovered, if the breach is remedied.

Underpayments and late payments

13.—(1) If the full amount of a payment that is payable under these Directions has not been paid before the date on which the payment falls due, once it falls due, it must be paid promptly unless—

- (a) this is with the consent of the NHS pharmacist, or
- (b) the amount of, or entitlement to, the payment, or any part thereof, is in dispute.

(2) If the NHS pharmacist's entitlement to the payment is not in dispute but the amount of the payment is in dispute, then once the payment falls due, pending the resolution of the dispute, the Local Health Board must—

- (a) pay to the NHS pharmacist, promptly, an amount representing the amount that the Local Health Board accepts that the NHS pharmacist is at least entitled to, and
- (b) thereafter pay any shortfall promptly, once the dispute is finally resolved.

(3) However, if an NHS pharmacist has—

- (a) not claimed a payment to which it would be entitled under these Directions if it claimed the payment, or
- (b) claimed a payment to which it is entitled under these Directions but a Local Health Board is unable to calculate the payment until after the payment is due to fall due because it

does not have the information it needs in order to calculate that payment (all reasonable efforts to obtain the information having been undertaken),

that payment is (instead) to fall due on the first working day of the month after the month during which the Local Health Board obtains the information it needs in order to calculate the payment.

Payments on account

14. Where a Local Health Board and the NHS pharmacist agree (but the Local Health Board's agreement may be withdrawn where it is reasonable to do so and if it has given the NHS pharmacist reasonable notice thereof), the Local Health Board must pay to an NHS pharmacist on account any amount that is—

- (a) the amount of, or a reasonable approximation of the amount of, a payment that is due to fall due under these Directions, or
- (b) an agreed percentage of the amount of, or a reasonable approximation of the amount of, a payment that is due to fall due under these Directions, and if that payment results in an overpayment in respect of the payment, paragraph 12 applies.

Post payment verification

15. Post payment verification⁽¹⁾ applies to the provision of services under arrangements made pursuant to these Directions.

Dispute resolution

16.—(1) In the case of a dispute (other than in relation to an overpayment, in which case regulation 57(1)(b) of the Pharmaceutical Services Regulations applies) arising out of, or in connection with, the provision of services under these Directions, the NHS pharmacist and the Local Health Board must make every reasonable effort to communicate and cooperate with each other with a view to resolving the dispute, before referring the dispute for consideration and determination to the Welsh Ministers in accordance with the dispute resolution procedure (or, where applicable, before commencing court proceedings) specified in sub-paragraphs (2) to (15) .

(1) For more information on post payment verification, please see: <https://nwssp.nhs.wales/ourservices/primary-care-services/general-information/post-payment-verification-ppv/>.

(2) The procedure specified in the following paragraphs applies in the case of any dispute arising out of or in connection with the provision of services under these Directions which is referred to the Welsh Ministers.

(3) Any party wishing to refer a dispute as mentioned in sub-paragraph (2) must send to the Welsh Ministers a written request for dispute resolution which must include or be accompanied by—

- (a) the names and addresses of the parties to the dispute,
- (b) a copy of any arrangement made under these Directions, and
- (c) a brief statement describing the nature and circumstances of the dispute.

(4) Any party wishing to refer a dispute as mentioned in sub-paragraph (2) must send the request under sub-paragraph (3) within a period of 3 years beginning with the date on which the matter giving rise to the dispute happened or should reasonably have come to the attention of the party wishing to refer the dispute.

(5) The Welsh Ministers may determine the dispute themselves or, if the Welsh Ministers consider it appropriate, appoint a person or persons to consider and determine it.

(6) Before reaching a decision as to who should determine the dispute, under sub-paragraph (5), the Welsh Ministers must, within 7 days beginning with the date on which a matter under dispute was referred to them, send a written request to the parties to make in writing, within a specified period, any representations which they may wish to make about the matter under dispute.

(7) The Welsh Ministers must give, with the notice given under sub-paragraph (6), to the party other than the one which referred the matter to dispute resolution a copy of any document by which the matter was referred to dispute resolution.

(8) The Welsh Ministers must give a copy of any representation received from a party to the other party and must in each case request (in writing) a party to whom a copy of the representations is given to make within a specified period any written observations which it wishes to make on those representations.

(9) Following receipt of any representations from the parties or, if earlier, at the end of the period for making such representations specified in the request sent under sub-paragraph (6) or (8), the Welsh Ministers must, if they decide to appoint an adjudicator to hear the dispute—

- (a) inform the parties in writing of the name of the person or persons whom they have appointed, and
- (b) pass to the adjudicator any documents received from the parties under sub-paragraph (3), (6) or (8).

(10) For the purpose of assisting the Welsh Ministers or the adjudicator, as the case may be, in the consideration of the matter, the Welsh Ministers or the adjudicator may—

- (a) invite representatives of the parties to appear before them to make oral representations either together or, with the agreement of the parties, separately, and may in advance provide the parties with a list of matters or questions to which the Welsh Ministers or the adjudicator wish them to give special consideration, or
- (b) consult other persons whose expertise the Welsh Ministers or the adjudicator consider would assist in the consideration of the matter.

(11) Where the Welsh Ministers or the adjudicator consult another person under sub-paragraph (10)(b), the Welsh Ministers or the adjudicator must notify the parties accordingly in writing and, where the Welsh Ministers or the adjudicator consider that the interests of any party might be substantially affected by the result of the consultation, they must give to the parties such opportunity as they consider reasonable in the circumstances to make observations on those results.

(12) In considering the matter, the Welsh Ministers or the adjudicator must consider—

- (a) any written representations made in response to a request under sub-paragraph (6), but only if they are made within the specified period,
- (b) any written observations made in response to a request under sub-paragraph (8), but only if they are made within the specified period,
- (c) any oral representations made in response to an invitation under sub-paragraph (10)(a),
- (d) the results of any consultation under sub-paragraph (10)(b), and
- (e) any observations made in accordance with an opportunity given under sub-paragraph (11).

(13) Subject to the other provisions within this paragraph and to any agreement by the parties, the Welsh Ministers or the adjudicator, as the case may be, have wide discretion in determining the procedure for the resolution of the dispute to ensure

the just, expeditious, economical and final determination of the dispute.

(14) The determination of the Welsh Ministers or the adjudicator, as the case may be, and the reasons for it, must be recorded in writing and the Welsh Ministers or the adjudicator must give notice of the determination (including the record of reasons) to the parties.

(15) In this paragraph—

“adjudicator” (*“dyfarnwr”*) means the person or persons appointed by the Welsh Ministers under sub-paragraph (5);

“specified period” (*“cyfnod penodedig”*) means such period as the Welsh Ministers specify in a request, being not less than 2, nor more than 4, weeks beginning with the date on which the notice referred to is given, but the Welsh Ministers may, if they consider that there is good reason for doing so, extend any such period (even after it has expired) and, where they do so, a reference in this paragraph to the specified period is to the period as so extended.

Revocation, transitional provision and savings provision

17. The Pharmaceutical Services (Clinical Services) (Wales) Directions 2022 are revoked⁽¹⁾.

18. An arrangement entered into by a Local Health Board and NHS Pharmacist under directions 4, 5, 6, 7 and 8 of the Pharmaceutical Services (Clinical Services) (Wales) Directions 2022 (including any arrangement to which direction 17(1) applies) continues to apply as if it were made under paragraphs 4, 5, 6, 7 and 8 of these Directions.

Name

Andrew Evans

Chief Pharmaceutical Officer, under the authority of the Cabinet Minister for Health and Care, one of the Welsh Ministers

Date 13th October 2026

(1) 2022 No. 6, amended by 2024 No. 42.

