

Community Pharmacy: What It Can Offer the System

Tackling London's Primary and Community Care Challenges

December 2025

The system challenge

London's health system is under pressure

- Demand up >10% year-on-year; while workforce has reduced.
- Persistent inequalities across boroughs (Core20PLUS5).
- Fragmented patient journeys and variable access.
- Rising unplanned admissions linked to medicines and chronic disease.
- Both the 10-Year Health Plan and independent system reviews emphasise three shifts required:
 - hospital → neighbourhood,
 - analogue → digital,
 - reactive → preventive.
- At neighbourhood level, conversations still default to GPs when talking about primary care. This is about access to care - not access to GPs.

To deliver neighbourhood-based care at scale, the system must use every part of primary care - not just general practice.

Community Pharmacy: An Untapped Asset Ready for Integration



Reach: over 1.6 million people visit pharmacies daily in England, highlighting their high accessibility and frequent use.



Current perception: pharmacies are often limited to dispensing roles despite their potential to deliver broader clinical care.



Future role: integrated, clinical, digital, preventive. Recognised in the 10 Year Health Plan: increase the role of community pharmacy in the management of LTCs and link them to the single patient record.

Five strategic advantages:

1. **Access:** immediate, walk-in care, known to residents
2. **Continuity:** medicines-safety anchor
3. **Prevention:** local health hub, visibility of emerging common resident challenges
4. **Digital:** connected to NHS App & Shared Record
5. **Productivity:** high ROI, reduces GP & A&E demand

Community Pharmacy: A Central Pillar of the Neighbourhood Health Service

As set out in the 10 Year Health Plan and Medium-Term Planning Guidance, pharmacy will transition from being focused on dispensing to becoming integral to neighbourhood health by:



Single Patient Record Integration Pharmacists access and update patient records in real time.



NHS App Connectivity Patients book pharmacy services, manage prescriptions, and receive advice.



Modernised Dispensing Automated dispensing and home delivery streamline operations.



Preventative Care & Screening Pharmacies support screening for CVD, diabetes and deliver vaccines

Taking on an expanded clinical role

- **Pharmacy First & new clinical services** rolled out nationally
- Growth of **prescribing-based services** from 2026/27, expanding pharmacists' clinical scope
- **Discharge Medicines Service** strengthened to reduce medicines harm and readmissions
- Workforce plans preparing all new pharmacists to qualify as **independent prescribers** from 2026

Supporting prevention and public health

- **Emergency contraception and HPV vaccination** offered routinely through pharmacies
- Community pharmacy positioned to **improve access** in underserved groups through walk-in care
- Contribution to medicines safety, harm reduction and proactive follow-up after hospital discharge

Integrating digitally

- Drive adoption of Electronic Prescription Service (EPS), NHS App, and Federated Data Platform for seamless medicines management.
- Support digital incident response frameworks as part of the NHS Patient Safety Strategy.
- All community pharmacies must enable patients to track prescription status via the NHS App
- All primary care services should allow patients to request and manage medicines online

System Challenges and Pharmacy Solutions

System Challenge	Pharmacy Contribution	System Impact
Access & GP pressure	Pharmacy First, independent prescribing, digital booking	Same-day care, freed GP time
Hospital readmissions	Discharge Medicines Service + follow-up	Fewer medicines-related readmissions
Prevention gap	Vaccination, BP checks, weight & smoking support	Early intervention, inequality reduction
LTC management	Pharmacist-led clinics (HTN, diabetes, asthma)	Improved control, fewer admissions
Workforce strain	Task-shift e.g. routine monitoring & reviews	Stabilises primary-care workload
Digital fragmentation	Shared Record + NHS App integration	Seamless, safe patient journeys

Enablers: what the system needs to do differently

- **Embed pharmacy within every Integrated Neighbourhood Team**, and ensure representation in strategic planning and leadership.
- **Build the capability to commission community pharmacy services effectively**; and commissioning services consistently through Community Pharmacy Networks (aligned with Primary Care Networks) to support coherent, place-based delivery
- **Strengthen digital interoperability and NHS App integration**, including community pharmacy within IT and estates strategies. This will enable full participation in digital health initiatives and ensure premises are equipped for high-quality clinical service delivery.
- **Shift to blended, outcome-based funding models** (covering access, prevention, and safety) and review current community pharmacy service contracts to create a sustainable funding and operational framework.
- **Invest in workforce development and independent prescribing capability**. Support the pipeline of newly qualified independent prescribers (2025–26 onwards) and ensure community pharmacy is fully integrated into wider workforce strategies..

*.... but it will
take a time to
move to this,
and a
pragmatic
workable
model should
be where we
start....*

Next steps – next 6-12 months priorities

Our proposed first steps for SEL's NBCB to agree on:

- **Adopt “access to care” as the SEL neighbourhood framing** (rather than “access to GPs”) to support a shift toward a whole-neighbourhood approach.
- **Convene pharmacy, GPs, and commissioners** for a 90-minute mapping session to review current pharmacy services against neighbourhood priorities. This will help build the evidence base and develop best-practice models for integrating community pharmacy; identify untapped resources; and support development of a consistent London-wide model of community pharmacy.
- **Establish a demonstrator site** building on existing work and using NNHIP as an accelerator (e.g., potentially in Lambeth/Southwark focused on CVD and prevention) to build on evidence base regarding outcomes. Learning can then be scaled across London while strengthening local relationships.
- **Enable the LPC and Pharmacy Alliance** to act as the system's coordinated route into community pharmacy, supporting alignment and engagement.

Potential future outcomes

By 2028–29, improved integration with community pharmacy could deliver:

- Significant proportion of same-day demand managed in pharmacy
- Reduction in medicines-related readmissions
- Increased screening & vaccination in underserved groups
- Significant numbers of GP appointments avoided annually
- Improved equity and consistent access across boroughs
- Better patient and staff experience

Community Pharmacy is not a peripheral contractor – it is the front door and medicines backbone of London’s Neighbourhood Health Service. Integrating it fully will deliver faster access, better outcomes, and a more sustainable NHS.