

Community Pharmacy Bulletin

Date: 28 April 2026

Headline News

- Bank Holiday Reminders – 4th & 25th May 2
- Bank Holiday Resources for Opioid Treatment Programmes 2
- Update on Supplies Enquiries and Authorised Signatories 2
- Dispensing List Validation – South West Update 3
- Webinar: AI Solutions for NHS Pharmacy Teams – Wednesday 29 April, 12–1pm 3
- Community Pharmacy Technician Apprenticeship Programme 2026 4
- GPhC Expectations for the Use of AI in Pharmacy Practice 4
- Annual Complaints Return – Action Required by 30 April 2025 4
- Data Security & Protection Toolkit (DSPTK) 2026 – Community Pharmacy England Guidance – Action required by 30 June 2026 5
- Detained estate EPS prescribing: medicines supply process update 5
- Contractor Guidance: Dispensing Obligations and Drug Tariff Pricing 6
- NHS prescription charges remain at £9.90 6
- Antibiotics and MenB vaccination to be offered to young people in Dorset 7
- Early detection of Type 1 diabetes and prevention of DKA – the 4Ts campaign 7

Campaign Information

- World Hand Hygiene Day – 5 May 2026 8
- National Walking Month – May 2026 9
- Deaf Awareness Week – 4–10 May 2026 9

Useful Information

- GDPR email requirements 10
- Contractor Supplies- PCSE 10
- Email Correspondence – Signature Details 10
- Serious Shortage protocols (SSP's) 11
- DHSC medicine Supply notifications 11
- Medical Alerts 11
- Reporting a Temporary Suspension in Service 11
- Changes of director and/or superintendent pharmacist 11
- NHSBSA Hints and Tips 12
- Pharmacy Support for Health & Wellbeing 12
- Interpretation and Translation Services 12
- Contact Details and Further Information 12

Contractor Noticeboard

- Farewell to Sharon Greaves and Michele Toy 13

Bank Holiday Reminders – 4th & 25th May 2026

4th May Bank Holiday

Contractors are asked to check the published rotas for 4th May and notify us immediately of any inaccuracies.

If you are scheduled to open, please ensure your Profile Manager entry is updated so patients and NHS 111 have the correct information.

All staff working on the Bank Holiday must have active smart cards.

25th May Bank Holiday

Draft rotas for 25th May have already been shared, Final versions will be circulated on 7th May.

Any amendments must be submitted by 6th May, including any Profile Manager updates for planned opening hours.

Thank you for your cooperation in ensuring accurate information is available to patients and NHS 111.

Thank you to all those pharmacies who will be open over the bank holidays, as always, your support is appreciated.

Bank Holiday Resources for Opioid Treatment Programmes

Bank Holidays can be a particularly busy period for community pharmacies, and we know there can be additional challenges when managing opioid treatment programmes.

The Community Pharmacy Patient Safety Group (CPPSG) has developed two helpful resources based on insights from its members: a 'Focus on Methadone' video and a Bank Holiday Checklist. These tools are designed to support pharmacy teams in safely and effectively delivering opioid treatment programmes before, during and after the Bank Holiday period.

These resources are aimed at all pharmacy team members involved in providing opioid substitution services:

- Focus on Methadone video
- Bank Holiday Checklist: Opioid Treatment Programmes

[Bank Holiday resources – Community Pharmacy Patient Safety Group](#)

Pharmacy teams are reminded to continue following their Local Service Level Agreements, company SOPs, and professional guidance at all times.

Update on Supplies Enquiries and Authorised Signatories

PCSE is planning updates to the online supplies ordering form. These changes are part of a wider set of system updates, so they will be released according to PCSE's broader implementation timetable.

Once live, the updated form will:

- Allow directors to be added as authorised signatories for ordering supplies, as intended.
- Bring all primary care professions onto a standardised process for sign-up and authorisation.
- Reduce unnecessary approval steps via ICBs, removing inappropriate administrative "traffic".

What to do in the meantime

If a contractor:

- Needs to add a director as an authorised signatory, or
- Has an urgent supplies order but cannot proceed because the authorised signatory cannot be updated,

They can contact the PCSE Supplies Team directly using the “Contact Us” form on the following page:

<https://pcse.england.nhs.uk/contact-us/supplies-enquiries>

Dispensing List Validation – South West Update

Dispensing List Validation is currently underway with all dispensing practices across the South West. The focus of this exercise is on patients who live within 1.6 km (as the crow flies) of a community pharmacy. CPLs have already been informed of this work.

- GP practices have received training on the dispensing regulations and the validation process.
- Each South West practice has been issued with data to review.
- Cornwall practices are due to return their validated lists by 22 May, although returns are already being received from across the region.
- In some cases, practices have removed dispensing flags following review.

Briefings are being shared with external stakeholders — including MPs and councillors — to ensure they understand the purpose and scope of the exercise.

As a result of this validation work, pharmacies may see:

- New patients seeking pharmaceutical services
- Requests for support such as delivery options or prescription collection arrangements

Key Points to Note

- This is a national NHS requirement, not a local policy change.
 - The purpose is to ensure GP dispensing is applied correctly and in line with regulations.
 - Patients remain free to choose any pharmacy for dispensing.
 - Pharmacy finder: <https://www.nhs.uk/service-search/pharmacy/find-a-pharmacy>
 - Distance-selling (online-only) pharmacies: [Online-only pharmacies - NHS](#)
 - This process does not involve any review or change to controlled localities.
-

Webinar: AI Solutions for NHS Pharmacy Teams – Wednesday 29 April, 12–1pm

We wanted to make you aware of a webinar taking place this Wednesday, 29 April, from 12–1pm, focusing on AI solutions for NHS pharmacy teams.

There is an associated training offer linked to the session, but there is no obligation to sign up for the training in order to attend the webinar.

If you would like more information or wish to register, please use the link below:

[Transform NHS Pharmacy Teams with AI L4 WS | Cambridge Spark](#)

Community Pharmacy Technician Apprenticeship Programme 2026

We are pleased to announce the launch of the Community Pharmacy Technician Apprenticeship Programme 2026, supporting pre-registration trainee pharmacy technicians (PTPTs) to complete their full 24-month apprenticeship within community pharmacy.

On completion of training and registration with the General Pharmaceutical Council (GPhC), pharmacy technicians will be equipped to play a key role in delivering community pharmacy services and supporting wider healthcare transformation.

Guidance for contractors is available to download in both PDF and accessible Word formats. This includes:

- Programme benefits
- Eligibility criteria
- Key timelines
- Training expectations

Your regional NHS England WT&E pharmacy team (england.WTEpharmacy.sw@nhs.net) can provide advice on the apprenticeships, including levy-transfer options and funding. Additional information on the apprenticeship levy is available via the HASO website [HASO | Skills for Health](#)

GPhC Expectations for the Use of AI in Pharmacy Practice

The General Pharmaceutical Council (GPhC) has emphasised that pharmacy professionals remain personally accountable for their decisions and actions when using artificial intelligence (AI). AI must not replace clinical decision-making or professional judgement.

To meet GPhC standards, pharmacists and pharmacy technicians are expected to:

- Understand how AI tools are intended to be used, including their limitations and potential biases
- Ensure they have completed appropriate training before using AI
- Review AI outputs critically for accuracy, bias, or misleading information
- Be transparent about when and how AI tools are used
- Maintain patient confidentiality and comply with data protection requirements
- Explain to patients how AI is being used in their care, including any risks or benefits
- Seek patient consent where required
- Raise concerns about AI use, errors, or risks in line with the duty of candour
- Avoid using AI in any way that could put patients or the public at risk

Pharmacy owners and superintendent pharmacists must ensure that any AI tools used within their organisation are safe, appropriate, and aligned with their intended purpose. This includes:

- Carrying out due diligence before adopting AI tools
- Implementing clear governance arrangements, including risk assessments
- Ensuring robust data security, confidentiality, and information governance
- Providing suitable training and support for staff using AI

More information can be found at [GPhC publishes new position statement on the use of artificial intelligence in pharmacy | General Pharmaceutical Council](#)

Annual Complaints Return – Action Required by 30 April 2026

Under the National Health Service (Pharmaceutical and Local Pharmaceutical Services) Regulations 2013, all pharmacy contractors are required to submit annual complaints report to the local Commissioning Team as soon as reasonably practicable after 31 March, marking the end of the reporting year.

We will be coming out to contractors shortly and we will share a CPE template that can be used to send in your annual complaints return

You may also use your own template, provided it includes all required information listed below.

Your annual report must include:

- The number of complaints received during the reporting period
- The number of complaints determined to be well-founded
- The number of complaints referred to the Health Service Commissioner under the 1993 Act

Your annual report must also summarise:

- The subject matter of the complaints received
- Any matters of general importance arising from those complaints or from the way they were handled
- Any actions taken or planned to improve services as a result of the complaints

The annual report for the period 01 April 2025 to 31 March 2026 must be submitted by 30 April 2026 to: england.pharmacysouthwest@nhs.net

Data Security & Protection Toolkit (DSPTK) 2026 – Community Pharmacy England Guidance – Action required by 30 June 2026

Community Pharmacy England has published updated guidance to support community pharmacy owners in completing the Data Security and Protection Toolkit (DSPTK) 2026. The Toolkit is used to make each pharmacy's annual information governance (IG) declaration and must be completed by Tuesday, 30 June 2026.

What's new in the 2026 Toolkit

- A new question confirming whether multi-factor authentication (MFA) is used with your clinical IT systems
 - Improved layout for easier navigation
 - Clearer question wording and enhanced pharmacy-specific tips
 - Previous year's answers displayed for many questions, allowing teams to quickly confirm accuracy or update where needed
 - Continued availability of the NHS Parent Organisation Code (POC) HQ batch submission feature, enabling owners of three or more pharmacies to complete a single submission for all premises
- Recommended next steps

We strongly advise logging in to the Toolkit as soon as possible and reviewing the guidance documents—starting with the Toolkit Completion: Overview – Five Steps Guide. If capacity allows, pharmacy teams should begin completing the Toolkit early.

Important reminder: - All mandatory questions in the Toolkit must be completed as part of a pharmacy's NHS Terms of Service to meet minimum information governance requirements

Pharmacy owners can now watch a recording of Community Pharmacy England's recent online workshop to help with the completion of the <https://cpe.org.uk/our-work/updates-events/our-webinars/data-security-and-protection-ig-toolkit-workshop/>.

Detained estate EPS prescribing: medicines supply process update

Why the process is changing

The old system expected prisons to give people a 7-day supply on release. This often failed because discharge can happen quickly, leaving people without medicines and creating urgent pressure on GPs and community pharmacies.

The new approach aims to improve continuity of care, reduce urgent same-day demand, and make the transition into the community safer.

What has changed

- Most people leaving prison will now get a 28-day EPS prescription (usually non-nominated).
- They will keep any remaining medicines they already have.
- This gives them time to register with a GP and arrange ongoing prescriptions.
- EPS expansion across prisons means community pharmacies will see more prescriptions from secure settings.

What community pharmacies can expect

- More non-nominated EPS prescriptions — use EPS Tracker to locate them.
- Patients may arrive with leftover medicines, which is expected.
- Maintain privacy and sensitivity, as some people may not want to discuss their background.
- People leaving prison remain exempt from charges under code 0015.

How this supports pharmacy teams

- Fewer urgent, last-minute requests.
- More predictable dispensing workload.
- Safer handover of medicines at a vulnerable time.
- Clearer, more consistent processes aligned with integrated NHS care.

Contractor Guidance: Dispensing Obligations and Drug Tariff Pricing

Contractors are reminded that a pharmacy is not entitled to decline the dispensing of a valid NHS prescription on the grounds that the current Drug Tariff reimbursement does not cover the acquisition cost of the medicine. Under the NHS contractual framework, and in line with professional and ethical standards, contractors must ensure that patients receive the medicines prescribed for them. Financial considerations must not compromise patient care or delay access to treatment.

Where contractors identify that the Drug Tariff price is significantly lower than the actual market cost, they should report this to Community Pharmacy England (CPE). CPE will gather the necessary data, investigate the issue, and, where appropriate, submit an application to the Department of Health and Social Care (DHSC) for a price concession. This process exists specifically to support contractors experiencing exceptional purchasing costs.

It is essential to emphasise that pharmacies must not delay or refuse to dispense a prescribed medicine while awaiting the outcome of a potential price concession. Patient safety, continuity of treatment, and timely access to essential medicines must remain the overriding priorities. Contractors are expected to take all reasonable steps to obtain the medicine, liaise with the prescriber where clinically appropriate, and follow established escalation processes in cases of supply difficulty.

Refusing to dispense solely on the grounds of reimbursement level is not compatible with professional standards, the NHS contractual framework, or the duty of care owed to patients.

NHS prescription charges remain at £9.90

Pharmacy teams are reminded that the NHS prescription charge remains at £9.90 per prescription item for 2026/27.

The list of 2026/27 prescription-related charges are outlined below.

NHS charges for	2026/27
Single prescription charge	£9.90

PPC 3-month	£32.05
PPC 12-month	£114.50
HRT PPC	£19.80

Antibiotics and MenB vaccination to be offered to young people in Dorset

Three young people in Weymouth, Dorset have been diagnosed with Meningitis B between 20 March and 15 April. All have received treatment and are recovering well, and their close contacts have already been given precautionary antibiotics.

The cases are all the same MenB sub-strain, but different from the recent strain seen in Kent.

Health officials (UKHSA, NHS, Dorset Council) are offering antibiotics and MenB vaccinations to young people in school years 7–13 across Weymouth, Portland and Chickerell as a precaution.

People are being reminded to watch for symptoms of meningococcal disease, which can develop quickly. These include fever, headache, vomiting, rapid breathing, drowsiness, cold hands/feet, and in septicemia, a rash that doesn't fade under a glass.

Early detection of Type 1 diabetes and prevention of DKA – the 4Ts campaign

NHS England South West and Diabetes UK South West and South Central are asking for your support in ensuring Type 1 diabetes is diagnosed before the onset of potentially life-threatening Diabetic Ketoacidosis (DKA). You may have heard recently of the tragic loss of a young girl called Lyla Story aged 2 years old, in May 2025 because of DKA due to undiagnosed Type 1 diabetes less than 24 hours after being seen by the family doctor who misdiagnosed tonsillitis.

The number of children and young people who have been admitted to hospital in DKA across the South West continues to rise.

The early signs and symptoms of Type 1 diabetes can be easy to mistake for a viral infection or other illness. The main symptoms are referred to as the 4Ts – Toilet, Thirsty, Tired, Thinner. Type 1 diabetes usually starts in children and young adults, but it can happen at any age, and the symptoms are the same. Other symptoms can include infections such as thrush, or blurred vision. These symptoms can come on very quickly – over a few days or weeks – and need urgent treatment.

Without it, consistently high blood sugar levels can quickly lead to life-threatening DKA. DKA symptoms can include feeling thirsty and urinating more, stomach pain and vomiting, diarrhea, weakness, fruity-smelling breath, feeling sleepy or confused and breathing more deeply than usual and is a medical emergency.

Without medical intervention, DKA is a life-threatening condition, which happens when there is a severe lack of insulin in the body, causing blood glucose levels to become very high. This usually happens for over 24 hours but can progress more quickly.

We want to work with you to reduce hospital admissions of DKA in the South West and to encourage earlier diagnoses of type 1 diabetes, preventing potential loss of life and reducing trauma at diagnosis for patients. We'd like to ask for your help to do the following:

Please help us raise awareness of the 4Ts of Type 1 diabetes amongst staff and patients

The following resources can help you do this:

Links to downloadable [posters](#) and [flyers](#) which explain the 4Ts – for displaying in your pharmacy so that staff and patients become familiar with the symptoms.

[A link to an online e-learning tool](#) for healthcare professionals which explores what should be done if type 1 diabetes is suspected, and how a prompt type 1 diagnosis can prevent DKA – please share this with your pharmacy team.

Diabetes UK website: [Type 1 diabetes](#) | [Diabetes UK](#)

Remember the most common symptoms of type 1 diabetes in children are the 4Ts:

Toilet — Going for a wee more often, especially at night, bed wetting by a previously dry child or heavier nappies in babies.

Thirsty — Being really thirsty and not being able to quench the thirst. A child may ask for a drink more often, finish drinks very quickly or parents might notice they generally drink more.

Tired — being incredibly tired and having no energy, not playing as often, less energy for sports. A child may have trouble staying awake in school, or a baby might start napping more or for longer.

Thinner — Losing weight or looking thinner than usual.

Remember the most common symptoms of DKA, a medical emergency, are:

Feeling thirsty and urinating more

Stomach pain and vomiting,

Diarrhoea

Weakness,

Fruity-smelling breath,

Feeling sleepy or confused

Breathing more deeply than usual

Campaign Information

World Hand Hygiene Day – 5 May 2026

World Hand Hygiene Day takes place every year on 5 May, and in 2026 the message remains as vital as ever: clean hands save lives. Led by the World Health Organization (WHO), the campaign encourages healthcare teams, organisations, and the public to recognise the power of hand hygiene in preventing infection and protecting patient safety.

Hand hygiene is one of the simplest and most effective ways to stop the spread of harmful bacteria and viruses. In healthcare settings, good hand hygiene reduces healthcare-associated infections, protects vulnerable patients, and supports safer clinical environments. Even small lapses can have a big impact, which is why continued awareness and consistent practice are essential.

- Strengthening a culture of safety
- Empowering staff to speak up for clean hands
- Ensuring hand hygiene resources are always available
- Reinforcing the “5 Moments for Hand Hygiene”
- Clean hands at the right moments – especially before and after patient contact
- Use alcohol-based hand rubs where appropriate
- Lead by example – visible good practice encourages others
- Report issues such as empty dispensers or poor access to hand hygiene supplies
- Promote awareness within your team or department

World Hand Hygiene Day is a reminder that infection prevention is not just a policy — it's a collective commitment. By taking a few seconds to clean our hands properly, we protect our colleagues, our patients, and ourselves.

This is not a mandatory campaign

National Walking Month – May 2026

May marks National Walking Month, a nationwide campaign encouraging everyone to get moving, step outside, and enjoy the physical and mental benefits of walking. As the days get lighter and warmer, it's the perfect time to build healthier habits and make walking part of your daily routine.

Walking is one of the simplest, most accessible forms of exercise. It requires no equipment, no gym membership, and can be easily fitted into even the busiest day. Just a short daily walk can help to:

- Boost energy and improve mood
- Reduce stress and support mental wellbeing
- Strengthen muscles and joints
- Improve heart health
- Increase focus and productivity

How to get involved

You don't need to commit to long hikes or big distances. National Walking Month is all about making walking enjoyable and achievable. You could:

- Take a lunchtime walk with colleagues
- Get off the bus one stop earlier
- Swap a short drive for a stroll
- Explore a new local route or green space
- Track your steps and set a personal goal for the month

Walking isn't just about physical health — it's a powerful tool for mental clarity and stress relief. A few minutes outdoors can help reset your mind, improve concentration, and create a sense of calm. It's also a great way to connect with others, whether through walking groups, team challenges, or simply catching up with a friend on the move.

Let's make May a month of movement

National Walking Month is a reminder that looking after ourselves doesn't have to be complicated. By choosing to walk a little more each day, we invest in our long-term health and wellbeing. Every step counts and every step is a step towards feeling better.

This is not a mandatory campaign.

Deaf Awareness Week – 4–10 May 2026

Deaf Awareness Week takes place from 4–10 May, and it's an important opportunity to celebrate the Deaf community, promote inclusion, and highlight the barriers that Deaf and hard-of-hearing people still face in everyday life. The week encourages all of us to think about how we communicate and how small changes can make a big difference.

Why Deaf Awareness Week matters

Around 1 in 6 people in the UK have some form of hearing loss. For many, communication challenges can affect confidence, independence, and access to services. Deaf Awareness Week aims to:

- Increase understanding of Deaf culture and identity
- Promote better communication skills
- Reduce stigma and misconceptions
- Encourage organisations to be more accessible
- Support equal opportunities for Deaf and hard-of-hearing people

Awareness is the first step toward meaningful inclusion.

You don't need to be fluent in British Sign Language (BSL) to make communication easier. Simple adjustments can have a huge impact:

- Face the person when speaking so they can lip-read if needed
- Speak clearly without shouting or exaggerating mouth movements
- Reduce background noise where possible
- Use gestures, writing, or visual aids to support understanding
- Be patient — communication is a two-way process
- Check understanding rather than assuming

Celebrating Deaf culture

Deaf Awareness Week is also a celebration of the richness of Deaf culture, including:

- British Sign Language
- Deaf arts, performance, and storytelling
- Community events and advocacy
- The achievements of Deaf individuals across all fields

It's a reminder that Deafness is not a limitation — it's a vibrant identity with its own language, history, and community.

By taking time to learn, listen, and adapt, we can help ensure that Deaf and hard-of-hearing people feel valued, understood, and included. Deaf Awareness Week encourages us to reflect on how we communicate and to commit to making our workplaces and communities more accessible every day of the year.

This is not a mandatory campaign

Useful Information

GDPR email requirements

We would like to remind all contractors that any email containing patient identifiable information must be sent from a secure email address, preferably the pharmacies shared generic nhs.net store email address. Any emails with patient details must not be sent from a non-secure email address as this could result in a breach of GDPR.

Contractor Supplies- PCSE

Contact the PCSE Supplies Team directly using the "Contact Us" form on the following page:
<https://pcse.england.nhs.uk/contact-us/supplies-enquiries>

Email Correspondence – Signature Details

Please ensure that when communicating with the NHS South West Collaborative Commissioning Hub's Community Pharmacy Team you include the following details within your correspondence to help us respond to your enquiry. Many thanks.

- Contact Name
 - Name of Contractor
 - ODS Code (F Code)
-

Serious Shortage Protocols (SSPs)

All current Serious Shortage Protocols can be viewed via [BSA website](#).

If you have any questions regarding SSPs please contact the NHS Prescription Service:

- Email: nhsbsa.prescriptionservices@nhsbsa.nhs.uk
 - Telephone: 0300 330 1349
 - Textphone: 18001 0300 330 1349
-

DHSC Medicine Supply Notifications

DHSC and NHSE/I have now launched an online [Medicines Supply Tool](#), which provides up to date information about medicine supply issues. The contents of these MSNs can now be viewed on the Tool. The Tool also details any changes to resupply dates and updates to the entries. To access the Tool, you will be required to register with the [SPS website](#).

The Medicine Supply Tool is moving on the SPS website. Update your links and bookmark its new home in the 'Tools' section: <https://www.sps.nhs.uk/home/tools/medicines-supply-tool/>

Medicine Alerts

For information on medical alerts, recalls and safety information regarding drugs and medical devices please see the Medicines and Healthcare products Regulatory Agency below:

Medicines and Healthcare products Regulatory Agency - GOV.UK (www.gov.uk)

Reporting a Temporary Suspension of Service

In accordance with regulations, contractors must notify the commissioner of any temporary suspension in service; including those for reasons due to illness or causes beyond the control of the contractor. In accordance with pharmacy regulations contractors must provide evidence to the commissioner that they have undertaken the following:

- Notified the commissioner of the suspension as soon as practical.
- Used all reasonable endeavors to implement the business continuity plan required by paragraph 29D, Schedule 4 of the NHS (Pharmaceutical and Local Pharmaceutical Services) Regulations 2013, and
- Used all reasonable endeavors to resume the provision of pharmaceutical services as soon as is practicable. (Paragraph 23(10), Schedule 4, of the NHS (Pharmaceutical and Local Pharmaceutical Services) Regulations 2013.

In the event of you being unable to open please complete a Temporary Suspension closure form via one of the following ways either:

1. via [Manage Your Service \(MYS\) portal](#).
2. Completing the Temporary Suspension Form found [here](#) titled Annex 18 and sending this to the SW generic email address: england.pharmacysouthwest@nhs.net.

Details of the new Temporary Suspension policy can be found [here](#) the new temporary suspension policy went live on the **01 of April 2025**.

Changes of director and/or superintendent pharmacist

When a body corporate appoints a new director and / or a new superintendent they must inform the commissioner within 30 days of the person taking up that new position. Recent experience suggests that contractors sometimes overlook making these declarations.

To make such a declaration you should go to the Primary Care Support England (PCSE) website at <https://pcse.england.nhs.uk/services/pharmacy-market-administration-services/market-entry/> where you will be able to complete the necessary declarations. Failure to notify any changes to directors and / or superintendent pharmacist maybe a breach of your terms of service.

NHSBSA Hints and Tips

Please see below the links to the NHSBSA website and a link for previous back copies

- [GP and Pharmacy support: open days, webinars and newsletters | NHSBSA](#)
 - <https://r1.dotdigital-pages.com/p/7R9K-79Q/sign-up-for-the-hints-tips-bulletin>
-

Pharmacy Support for Health & Wellbeing

Please see below support available for our NHS people with free confidential coaching and support for the primary care workforce.

- Wellbeing apps:
 - NHS staff have been given free access to a number of wellbeing apps to support their mental health and wellbeing.
 - Link: <https://www.england.nhs.uk/supporting-our-nhs-people/support-now/wellbeing-apps/>
 - Mental Health and Wellbeing:
 - Guidance and advice on how you can stay mentally healthy and boost your wellbeing from Pharmacists' Support.
 - Link: <https://pharmacistsupport.org/i-need-help-managing-my/mental-health-and-wellbeing/>
-

Interpretation & Translation Services

Interpretation and translation services are available for Community Pharmacies when treating NHS Patients. These services are commissioned and paid for by NHS England.

The information and how to access these are available on the South West Pharmacy website page via the following link [NHS England — South West » Interpretation and Translation Services.](#)

The services commissioned cover the following areas:

- Bristol, North Somerset, and South Gloucestershire (BNSSG)
 - Bath and North East Somerset, Swindon, and Wiltshire (BSW)
 - Cornwall & Isles of Scilly
 - Devon
 - Dorset
 - Gloucestershire
 - Somerset
-

Contact Details and Further Information

South West Collaborative Commissioning Hub - Community Pharmacy Contract Management Team contact information: email: england.pharmacysouthwest@nhs.net.

Website: [South West Community Pharmacy information](#) for more further information, blank templates, forms, and documents.

Please report any controlled drug incidents to us via our reporting website www.cdreporting.co.uk
The NHSE SW Controlled Drugs Team can be contacted at ENGLAND.southwestcontrolleddrugs@nhs.net

Farewell to Sharon Greaves and Michele Toy

This month we say a very fond — and very reluctant — goodbye to two much-loved colleagues, Sharon Greaves and Michele Toy. Many of our contractors will have crossed paths with them over the years and will know just how much wisdom, patience, and good humor they've brought to the team.

Their dedication, professionalism, and ability to keep us all organised (even when we didn't want to be) will be truly missed. While we're sad to see them go, we're excited for whatever comes next for them — and we sincerely hope their future involves sunshine, relaxation, and absolutely no inboxes demanding attention.

We wish Sharon and Michele all the very best for the future and thank them for everything they've brought to the team. They will be missed, more than they know.