

Community Pharmacy Assurance Framework (CPAF) – Issues commonly raised during CPAF visits

Dear contractor,

We have put together this short document on common issues that are raised during a CPAF visit. Please use this document to ensure your pharmacy complies with the terms of the [Community Pharmacy Contractual Framework \(CPCF\)](#).

For further information on contract monitoring please click [here](#).

For the terms of service as set out in Schedule 4 of the NHS (Pharmaceutical and Local Pharmaceutical Services) Regulations 2013 click [here](#).

Reasons why you may have a CPAF visit

- Data Security & Protection Toolkit not returned
- Initial CPAF screening questions not returned
- Workforce survey not completed
- Annual complaints report not submitted
- Pharmacy Contractor – change of ownership

Community Pharmacy Surrey and Sussex release a monthly deadline tracker to help you keep track of all the contractual deadlines. Please click [here](#) to view the latest monthly deadline tracker. You may find it useful to print and display this every month.

Community Pharmacy Surrey and Sussex also release a weekly newsletter targeted at contractors which offers useful information and a WhatsApp deadline reminder group. To sign up to our newsletter, please click [here](#). To sign up to our WhatsApp deadline reminder, please click [here](#).

Policy & Procedure:

Standard Operating Procedures (SOPs). For all SOPs please check if they are available, the date they were last reviewed, the next review date and have they been signed by all staff members. The most common SOPs checked are:

- Dispensing
- Repeat dispensing
- Discharge Medicine Service (DMS)
- Support for self-care
- Whistle blowing policy
- Safeguarding

Additionally,

DMS – please ensure all referrals are accepted within 72 hours as per the service specification.

Whistle blowing policy – please ensure all staff have the correct contact details to allow staff to raise at the earliest opportunity, any general concern that they might have about a risk, malpractice or wrongdoing at work, which might affect patients, the public, other staff, or the organisation itself.

Safeguarding – please ensure all staff are aware of the safeguarding policy and have access to local Safeguarding contact details or can access the NHS agile safeguarding guide [here](#).

Complaints procedure – Pharmacy owners must make it clear patients can complain either to the pharmacy or to the ICB. Pharmacy owners must make information available to the public as to their arrangements for dealing with complaints; and how further information about those arrangements may be obtained.

Complaints about pharmacies must go to ICB complaints teams;

NHS Surrey and Sussex ICB

- Phone: 0300 561 2500
- Email: syheartlandsicb.complaints@nhs.net
- Post: Complaints team, NHS Surrey and Sussex ICB, Block C, 1st Floor, Dukes Court, Woking, Surrey. GU21 5BH

Further information can be found [here](#).

Staff

- Roles – Do all staff members have clearly defined roles?
- Qualifications – Please ensure you have checked the qualifications for all your staff members and have any certificates on file.
- Induction programs for employed staff and Locum staff – You must have an induction program available for all employed staff members and for locum staff
- Continuing Professional Development (CPD) – can your staff evidence this?
- Staff references on employment (including locums) – Make sure you have a procedure for checking referenced upon employing staff

Premises:

- Prescription cost is clearly displayed to the public
- Opening hours are clearly displayed to the public
- There is a clearly defined dispensary and Over the Counter (OTC) area
- There are suitable bins for unwanted medicines which are stored safely, and waste separated as required – e.g. list of cytotoxic medication

Record Keeping:

You may be asked to evidence the following:

- Information given to patients or referrals made to another health care professional
- Advice given and/or drugs supplied when advice was given
- Advice given to persons seeking support for managing their own conditions
- Prescription interventions/refusal to supply drugs or appliances ordered on a prescription (and staff are aware of the circumstances that may be relevant for a refusal to supply and know what action to take in such circumstances)

You may find this [Q&A](#) useful under recording advice, interventions and referrals in community pharmacy to help ensure you are keeping the correct records.

Other

- Ensure at least two people have access to the pharmacies shared NHS mail account and this is checked several times a day
- Ensure the pharmacies NHS.uk website and Directory of Services (via Profile Manager) is up to date and validated at least once every quarter
- Evidence that safety alerts have been dealt with
- Patient safety incidents are reported to the NHS and there are arrangements in place to allow the pharmacy team to participate in the analysis of critical incidents. For more information on reporting patient safety incidents please click [here](#).
- From 1st October 2025, pharmacy owners no longer need to produce a pharmacy practice leaflet. Pharmacy owners must still comply with the requirement to publicise the Essential

and any Advanced services that are available at or from the pharmacy premises (but not the emergency supply element of Pharmacy First), and do so in a manner which makes clear the services are provided as part of the NHS (following the guidelines on use of the NHS logo). That requirement could be achieved in several ways, including via the pharmacy's NHS website profile.

If you need support with a CPAF visit, please contact us on LPC@communitypharmacyss.co.uk

Reviewed: 15th July 2026.
Next Review Date: July 2028