CPW Guidance for CPCLS – Drug Tariff Requirements on Implementation of EPS and Periods of Treatment

A requirement set out in the Drug Tariff for additional funding for the CPCL role from 24/25 is to promote Pharmacy Specific activity related to EPS and changes to periods of treatment, as per the ambition set out in Presgripsiwn Newydd. CPCLs should document any discussion related to these areas within at least one of their reports each year. The ability to discuss EPS will broadly be determined by the roll out schedule, information on which can be found here. CPW and DHCW co-hosted a contractor event in October 2024 on EPS, a recording of this event and further information on EPS can be accessed on the CPW EPS page

In relation to 56 day prescribing, the CPW board does not currently support this progressing on a cluster by cluster basis, and feel that a much more widespread change is required to realise any benefits across the network. We remain broadly supportive of the idea that a move to 56 day prescribing should free up some time to provide other services, but are disappointed at the rate that this has happened so far across Wales, which has left many "early adopters" at a financial disadvantage in comparison to pharmacies where rates of 56 day prescribing are low. This is in no small part due to the inadequacies of the current dispensing compensation scheme, and as such we have agreed to review this scheme with Welsh Government within this financial year.

Contractors should bear these views in mind before entering into agreements to progress 56 day prescribing for their patients in isolation. CPCLs and pharmacies are reminded that at cluster meetings they should not enter into agreements on behalf of their employers or other contractors that may impact on business, without expressed permission of those persons to do so. Please contact CPW if you require any advice in regards to this. Where contractors experience a drop in the number of items dispensed as a result of a change to 56 day prescribing they should still make a declaration under the current dispensing compensation scheme on NECAF.

In terms of the requirement to discuss review of periods of treatment as part of the CPCL role we suggest that this is currently limited to surveillance of any plans to change prescribing habits, ensuring clusters are aware of guidance produced by CPW and BMA where a change to periods of treatment is mentioned and sharing with CPW any experiences where a change to periods of treatment has already occurred. Please contact the CPW engagement team for further advice if required