

**COMMUNITY PHARMACY IM&T – CHANGE OF SYSTEMS**

This form is to be used by a Community Pharmacy Contractor to ensure a central database of all community pharmacies and their respective "PMR" or Pharmacy IT systems can be maintained.

This form should be used to advise where a change of system has taken place, so that a central database of all Community Pharmacy systems within Wales can be updated to reflect any change. This information is vital for the strategic development of all Community Pharmacy systems in Wales.

This form is to be used on its own **only when previous connectivity services are not interrupted**; in all other cases, please use the ETP1 Claim Form.

**Name of Pharmacy**.....

**Trading Name/Name of Chain**.....

**Address (Line 1)**.....

**Address (Line 2)**.....

**Post Code**.....

**Telephone Number**..... **LHB**.....

**New Pharmacy Computer Dispensing System**.....

**Pharmacy Stamp**

**Date new system installed**.....

**HSW Account Number (e.g. 60xxxxA)** .....

**BSC Code (e.g. 10xxxxx)**.....

**DECLARATIONS**

I undertake to notify the BSC (Business Service Centre) in writing immediately that the Community Pharmacy changes the 'PMR' / IT system used.

Notification by: (Authorised signature)		Name: (Please print name)	
Position:		Date:	

**Please return this ETP2 Claim Form to:**

Community Pharmacy Co-ordinator, IM&T Department, NHS Wales **B**usiness **S**ervices **C**entre (BSC),  
8th Floor, The Oldway Centre, 36 Orchard Street, Swansea, SA1 5AQ.

**BSC USE ONLY**

New CPSS Business Notification received?       Yes       No

Master Database Updated?       Yes       No

Checked by: \_\_\_\_\_ Date: \_\_\_\_\_

Position: \_\_\_\_\_