



PHARMACY CONTRACTOR OPENING HOURS NOTIFICATION FORM

Information Return which is to be submitted to the LHB, as required by the NHS (Pharmaceutical Services) (Amendment) (Wales) Regulations 2005, Regulation 21 (3) and (4)

Notification type (tick one box) (see note 1)	<input type="checkbox"/> First notification <input type="checkbox"/> First application to open for less than 40 hours <input type="checkbox"/> Application for amendment of core (contractual) hours <input type="checkbox"/> Notification of changes to supplementary hours
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Name of Local Health Board _____

Name of pharmacy contractor _____

Address of premises to which this return applies _____

Address for correspondence (if different) _____

Proposed Hours:

	Column 1			Column 2		
	Core (contractual) Hours (normally 40 hours) (see note 2)			Total opening hours – including core and supplementary hours (see note 3)		
	From	To	Lunchtime	From	To	Lunchtime
Monday			-			-
Tuesday			-			-
Wednesday			-			-
Thursday			-			-
Friday			-			-
Saturday			-			-
Sunday			-			-
Total hours (see note 4)						

The above hours constitute a change to those during which pharmaceutical services are provided at the date of this return (tick one box)	<input type="checkbox"/> Yes <input type="checkbox"/> No
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If the above hours constitute a change, the date on which these hours are intended to come into effect is - (see note 5)	/ /
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I / we undertake to provide the pharmaceutical services listed, during the hours specified in column 1 above, and will ordinarily provide the pharmaceutical services during other hours included within the total opening hours specified in Column 2 above.

Signed _____ Date _____

Contact for queries relating to this form	Telephone number
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Form HN1 (CPW)

(further copies of this form can be obtained from www.cpwales.org.uk)



The following Essential services are available from this pharmacy (**see note 6**):

	Available	Proposed
Dispensing	<input type="checkbox"/>	<input type="checkbox"/>
Repeat dispensing	<input type="checkbox"/>	<input type="checkbox"/>
ETP	<input type="checkbox"/>	<input type="checkbox"/>
Disposal of unwanted medicines	<input type="checkbox"/>	<input type="checkbox"/>
Promotion of healthy lifestyles	<input type="checkbox"/>	<input type="checkbox"/>
Sign-posting patients to other NHS services	<input type="checkbox"/>	<input type="checkbox"/>
Support for self-care	<input type="checkbox"/>	<input type="checkbox"/>
Clinical governance	<input type="checkbox"/>	<input type="checkbox"/>

The following Advanced services are available from this pharmacy:

	Available	Proposed
Medicines Use Review & Prescription Intervention Service	<input type="checkbox"/>	<input type="checkbox"/>

The following Enhanced services are available from this pharmacy:

	Currently Available	Available if commissioned
Minor ailment schemes	<input type="checkbox"/>	<input type="checkbox"/>
Palliative Care Services	<input type="checkbox"/>	<input type="checkbox"/>
Supervised Administration Schemes	<input type="checkbox"/>	<input type="checkbox"/>
Needle Exchange Service	<input type="checkbox"/>	<input type="checkbox"/>
Stop Smoking Service	<input type="checkbox"/>	<input type="checkbox"/>
Supplementary Prescribing	<input type="checkbox"/>	<input type="checkbox"/>
Patient Group Direction service	<input type="checkbox"/>	<input type="checkbox"/>
Care Home service	<input type="checkbox"/>	<input type="checkbox"/>
Head Lice Management Service	<input type="checkbox"/>	<input type="checkbox"/>
Anticoagulant Service	<input type="checkbox"/>	<input type="checkbox"/>
Gluten Free Food Supply Service	<input type="checkbox"/>	<input type="checkbox"/>
Emergency Hormonal Contraception	<input type="checkbox"/>	<input type="checkbox"/>
Out of Hours Services	<input type="checkbox"/>	<input type="checkbox"/>
Services to Schools	<input type="checkbox"/>	<input type="checkbox"/>
Screening Services	<input type="checkbox"/>	<input type="checkbox"/>
Full Clinical Medication Review	<input type="checkbox"/>	<input type="checkbox"/>
Disease specific medicines management	<input type="checkbox"/>	<input type="checkbox"/>
Other (please specify)	<input type="checkbox"/>	<input type="checkbox"/>
Other (please specify)	<input type="checkbox"/>	<input type="checkbox"/>



Notes:

- (1) All pharmacy contractors must notify the LHB not later than **30 June 2005**, of the total hours of opening for premises in the pharmaceutical list on 1 April 2005. Provided these hours are not less than 40, and there are no existing directions requiring the pharmacy to open on particular days or times, these hours will be accepted by the LHB.

If the contractor opens for less than 40 hours prior to 1 April 2005, an application may be made to the LHB to open for less than 40 hours, which will be determined by the LHB within 60 days.

When notifying changes to supplementary hours or applying for changes to core hours, include all the hours in the table not just the amended hours, so that the LHB has all the necessary information.

- (2) These are the 40 contractual ('core') hours during which the pharmacy will be open and the contractor undertakes to provide a full pharmaceutical service. Only use the 'Lunchtime' column if appropriate, i.e. if you will not be providing pharmaceutical services during that period. These hours can be amended after the first notification, only with the consent of the LHB. The LHB will have regard to these hours when assessing whether the pharmaceutical needs of people in the neighbourhood are met.
- (3) These hours are the total opening hours of the pharmacy, and will include the core hours in column 1, together with non contractual or 'supplementary' hours during which the pharmacy will ordinarily provide pharmaceutical services. Only use the 'Lunchtime' column if appropriate, i.e. if you will not be providing pharmaceutical services during that period. The supplementary hours can be amended by giving 90 days notice to the LHB. The LHB may have regard to supplementary hours when assessing whether the pharmaceutical needs of people in the neighbourhood are met, but the hours during which the pharmacist is obliged to provide pharmaceutical services are limited to those specified in column 1.
- (4) Column 1 total hours will be 40 hours. If the pharmacy is applying for permission to open for less than 40 hours, the proposed number of hours should be stated.
- (5) Where an application is made to the LHB to amend core hours, the change, if granted, may not take place until the expiry of 90 days from the date of the application or 30 days after approval is granted (whichever is the later). If this form is used to notify changes to supplementary hours, this change should take effect not earlier than 90 days after the notification.
- (6) The terms of service require contractors to include details of the pharmaceutical services which are ordinarily provided at the premises when making a return to the LHB detailing opening hours. In the early stages of implementing the new contractual framework not all Essential services may be available. If services are not available at the time of completing the form contractors should tick the 'Proposed' box. This form cannot be used to apply to amend the pharmaceutical services provided from the pharmacy. Please contact the LHB for details that must be included in such an application.