NHS Resolution

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24 March 2026

REF: SHA/ 26817

APPEAL AGAINST NORTH EAST AND NORTH CUMBRIA ICB DECISION TO REFUSE AN APPLICATION BY AJIDO LTD T/A VERITAS PHARMACY FOR INCLUSION IN THE PHARMACEUTICAL LIST AT 1-3 WILLIAM STREET, SUNDERLAND, TYNE AND WEAR SR1 1UL UNDER REGULATION 25

1 Outcome

1.1 The Pharmacy Appeals Committee ("Committee"), appointed by NHS Resolution, quashes the decision of the Commissioner and redetermines the application.

1.2 The Committee determined that the application should be refused.

A copy of this decision is being sent to:
Ajido Ltd T/A Veritas Pharmacy
PCSE on behalf of North East and North Cumbria ICB

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1 The Application

By application dated 20 June 2026, Ajido Ltd T/A Veritas Pharmacy ("the Applicant") applied to North East and North Cumbria ICB ("the Commissioner") for inclusion in the pharmaceutical list at 1-3 William Street, Sunderland, Tyne and Wear SR1 1UL under Regulation 25. In support of the application it was stated:

1.1 In response to "If you are undertaking to provide appliances, specify the appliances that you undertake to provide (or write 'none' if it is intended that the pharmacy will not provide appliances)" the Applicant left this box blank.

1.2 In response to why the application should not be refused pursuant to Regulation 31 the Applicant left this box blank.

1.3 In response to why the application should not be refused pursuant to Regulation 25(2)(a) the Applicant left this box blank.

Pharmacy procedures

1.4 Please explain how the pharmacy procedures used within the premises will secure:

(a) the uninterrupted provision of essential services during the opening hours of the premises, to persons anywhere in England who request those services, and

(b) the safe and effective provision of essential services without face to face contact between any person receiving the services, whether on their own or someone else's behalf, and the applicant or the applicant's staff.

1.5 Please describe the procedure that will be followed where a patient attends the premises and asks for one or more of the essential services.

1.6 If you are undertaking to provide advanced services at the premises please describe how you will do so without providing any element of essential services.

1.7 You must ensure that you provide sufficient information within this application form to satisfy NHS England or the relevant delegated integrated care board on the above points. You are not required to submit your standard operating procedures for the premises but if you do they will be circulated to interested

parties unless NHS England or the relevant delegated integrated care board is satisfied that the full disclosure principle does not apply.

1.8 "The pharmacy ensures the uninterrupted provision of essential services to individuals anywhere in England through robust systems, including trained staff, a reliable contingency rota, and a 24/7 online platform for prescription requests and advice. Using the Electronic Prescription Service (EPS) and a secure delivery network, we provide timely and safe access to medications, even during peak demand or system disruptions.

1.9 To ensure safe and effective service without face-to-face contact, we offer telephone and video consultations for professional advice and medication reviews. Patients can manage prescriptions online, and all medications are delivered securely to maintain privacy and compliance with safety standards.

1.10 If a patient attends the premises, they are guided to access services through our online platform or helpline. For urgent needs, staff liaise with nearby pharmacies or healthcare providers to ensure immediate care.

1.11 Advanced services, such as the New Medicine Service, are provided via remote consultations. Services requiring face-to-face interaction are referred to partner providers. These processes ensure compliance with regulations while delivering accessible, high-quality care."

Enclosed document

1.12 "In accordance with Regulation 7(3) of The National Health Service (Charges, Remission of Charges and Pharmaceutical Services etc.) (Amendment and Transitional Provisions) Regulations 2025, the pharmacy has robust and well-defined procedures in place to ensure the safe and effective provision of pharmaceutical services—including essential, advanced, and enhanced services—without face-to-face contact at the premises. As a distance-selling pharmacy, all services are designed to be accessed remotely, in line with regulatory requirements. Prescription requests will be received electronically, processed through secure systems, and dispensed by qualified staff under the supervision of a responsible pharmacist. Consultations will be carried out via telephone or video call, with clinical assessments documented accurately and securely within the patient's records. Medicines will be delivered directly to patients using secure and trackable methods, ensuring safe receipt and continuity of care. Services such as the New Medicine Service, and Pharmacy First will be delivered remotely through structured protocols that ensure patient understanding, engagement, and follow-up. All communications, including consent and advice, will be recorded digitally for audit purposes. These procedures will be continuously reviewed to ensure compliance with clinical governance standards, providing assurance that services are delivered safely, effectively, and equitably to patients across England, without requiring them to attend the pharmacy premises in person".

2 Comments to the Commissioner

On reviewing the paperwork provided by PCSE, it was noted that the comments made by the Applicant in response to the representations on the application, had not been circulated or seen by parties.

In the interests of transparency and fairness, NHS Resolution sought to rely on the discretion afforded in paragraph 7 of Schedule 3 of the Regulations to vary the normal procedures and circulate these comments to parties for them to make observations on them if they so wished.

2.1 The Applicant

2.1.1 "I write further to your letter enclosing copies of the representations received regarding Ajido Ltd's application. We are grateful for the opportunity to respond to the comments made.

2.1.2 Community Pharmacy Durham & Sunderland (LPC)

2.1.3 We note the LPC's comments that any application must comply with Regulation 25(1). We can confirm:

2.1.3.1 Ajido Ltd will provide the full range of essential services to all patients in England during opening hours.

2.1.3.2 No face-to-face essential NHS services will be offered on or near the premises.

2.1.3.3 A responsible pharmacist will be present and available during all opening hours.

2.1.4 We also note the LPC's reference to nine existing distance-selling pharmacies in the area. Regulation 25 does not limit the number of DSPs permitted but instead ensures compliance with service requirements. Ajido Ltd fully accepts and will adhere to these requirements.

2.1.5 Well Pharmacy

2.1.6 Well's comments emphasise compliance with Regulations 25 and 64, particularly ensuring uninterrupted service delivery and the prohibition of face-to-face provision. We can confirm:

2.1.6.1 Our SOPs and IT systems are designed to ensure uninterrupted provision of services to patients nationwide.

2.1.6.2 All services will be delivered without face-to-face contact with patients or their representatives, in strict compliance with Regulation 25(2).

2.1.6.3 We welcome scrutiny of our application to demonstrate that safe and effective service provision is guaranteed.

2.1.7 Boots UK Ltd

2.1.8 Boots raises concerns that insufficient information has been provided to satisfy the committee regarding:

2.1.8.1 Face-to-face services – We confirm again that no essential services will be provided in person on or near the premises.

2.1.8.2 Deliveries and cold chain maintenance – Deliveries will be managed through established courier services, with validated cold chain protocols in place for temperature-sensitive items.

2.1.8.3 Waste collection – Procedures are in place with licensed waste management providers to ensure compliance with all environmental and clinical waste regulations.

2.1.8.4 Signposting of patients – Our pharmacists will provide signposting to appropriate NHS or local services, supported by documented protocols.

2.1.9 We respectfully submit that these matters have been addressed within our SOPs and operating framework, which ensure full compliance with the Regulations.

2.1.10 Cohens Chemist

2.1.11 Cohens emphasises compliance with Regulation 25 and Regulation 64. Specifically, they seek assurance that:

2.1.11.1 The full range of essential NHS pharmacy services will be provided – confirmed.

2.1.11.2 Services will not be supplied from a traditional 'shop-front' – confirmed.

2.1.11.3 The premises will be registered with the GPhC – confirmed, registration is being progressed in parallel.

2.1.11.4 No conflict with existing LPS provisions or proximity issues – confirmed, our premises are not within or adjacent to any pharmacy or GP practice.

2.1.12 Conclusion

2.1.13 Ajido Ltd confirms that this application fully satisfies the requirements of Regulations 25 and 64 of the NHS (Pharmaceutical and Local Pharmaceutical Services) Regulations 2013. We respectfully submit that the representations made by existing operators raise no issues that undermine compliance with the statutory requirements.

2.1.14 We therefore request that our application is granted."

3 The Decision

The Commissioner considered and decided to refuse the application. The decision letter dated 10 November 2025 states:

3.1 “North East and North Cumbria ICB has considered the above application, and I am writing to confirm that it has been refused. Please see the enclosed report for the full reasoning.

3.2 You have a right of appeal to the Secretary of State against North East and North Cumbria ICB’s decision. Should you choose to appeal then you should either complete the online form available on the NHS Resolution website or send a concise and reasoned statement of the grounds for your appeal within 30 days of the date of this letter to nhsr.appeals@nhs.net or:

3.3 Primary Care Appeals
NHS Resolution
8th Floor
10 South Colonnade
Canary Wharf
London
E14 4PU.”

PSRC decision report

3.4 “On 29th October 2025, the Pharmaceutical Services Regulations Committee (PSRC) refused this Distance Selling Premises Application on the following basis:

3.4.1 Regulation 25(2)(a) does not apply as no primary care provider with a patient list is present within the same premises as the proposed site – Regulation not applicable

3.4.2 Regulation 25(2)(b)(i) - Regulation not met as the applicant has not demonstrated how services will be provided remotely, and without interruption throughout the given opening hours - Regulation not met

3.4.3 Regulation 25(2)(b)(ii) - Regulation not met as the applicant has not demonstrated how the safe and effective provision of pharmaceutical services without face to face contact at the pharmacy premises between any person receiving the services - Regulation not met

3.4.4 Regulation 31 does not apply as there is no pharmacy at the same or adjacent premises to the proposed site – Regulation not applicable

3.4.5 Regulation 64 – has not been met as the application does not fully meet the below specific conditions to be met by applications for Distance Selling Premises: Regulation not met

3.5 The applicant must not offer to provide pharmaceutical services to persons who are present at (which includes in the vicinity of) the proposed premises.

3.6 The means by which the applicant provides pharmaceutical services must be such that any person receiving those services does so otherwise than at the proposed premises.

3.7 The proposed premises must not be on the same site or in the same building as the premises of a provider of primary medical services with a patient list.

3.8 The pharmacy procedures for the premises must be such as to secure:

3.8.1 the uninterrupted provision of essential services, during the opening hours of the premises, to persons anywhere in England who request those services, and

3.8.2 the safe and effective provision of essential services without face-to-face contact between any person receiving the services, whether on their own or on someone else's behalf, and the applicant or the applicant's staff; and

3.8.3 Nothing in the applicant's practice leaflet, in the applicant's publicity material in respect of the proposed premises, in material published on behalf of the applicant publicising services provided at or from the proposed premises or in any communication (written or oral) from the applicant or the applicant's staff to any person seeking the provision of essential services from the applicant must represent, either expressly or impliedly, that:

3.8.3.1 the essential services provided at or from the premises are only available to persons in particular areas of England, or

3.8.3.2 the applicant is likely to refuse, for reasons other than those provided for in the applicant's terms of service, to provide drugs or appliances ordered on prescription forms or repeatable prescription forms which are presented by particular categories of patients (eg because the availability of essential services from the applicant is limited to other categories of patients).

3.9 Regulation 64(4) is satisfied as the NENC ICB will not vary or remove the conditions set out in paragraph 64(3) - Regulation met

3.10 The HWB's Pharmaceutical Needs Assessment is not relevant to this application as DSP applications are excepted.

3.11 Consultation – Objections were received from Boots UK Limited and Well Pharmacy.

3.12 Appeal Rights: Applicant."

4 The Appeal

In a letter dated 10 December 2025, the Applicant appealed against the Commissioner's decision. The grounds of appeal are:

4.1 "AJIDO LTD T/A VERITAS PHARMACY

4.2 Distance Selling Pharmacy (DSP) Application Appeal Pack

4.3 Application Reference: CAS-370385-L3W2X3

APPEAL LETTER – AJIDO LTD t/a VERITAS PHARMACY

4.18 Application Reference: CAS-370385-L3W2X3

4.19 Premises: 1–3 William Street, Sunderland, Tyne & Wear, SR1 1UL

4.20 Decision Date: 29 October 2025

4.21 Submitted to: NHS Resolution – Primary Care Appeals

4.22 Appeal Against Refusal of Distance Selling Pharmacy Application

4.23 Dear Sir/Madam,

4.24 Ajido Ltd respectfully appeals the decision of the Pharmaceutical Services Regulations Committee (PSRC) to refuse its Distance Selling Pharmacy (DSP) application. We submit that the refusal resulted from an underappreciation of the comprehensive systems, SOPs, governance processes and operational safeguards put in place that fully satisfy Regulations 25(2)(b)(i), 25(2)(b)(ii) and 64 of the NHS (Pharmaceutical and Local Pharmaceutical Services) Regulations 2013.

4.25 Our SOPs and operational model provide detailed, evidence-based assurances of uninterrupted, safe, and exclusively remote provision of essential services to all patients across England. This appeal therefore requests the overturning of the refusal and the approval of Ajido Ltd's inclusion in the pharmaceutical list as a DSP at 1–3 William Street, Sunderland SR1 1UL.

4.26 It is important to note that the summary appendix below, as well as the SOPs attached are not a complete list of SOPs for the operation of Veritas Pharmacy. They have been provided to demonstrate how essential services will be provided in a safe and effective manner without face-to-face contact with the patient.

4.27 **Regulation 25(2)(b)(i): Uninterrupted Provision of Essential Services During Opening Hours**

4.28 The PSRC stated that the application has not met the regulation "as the applicant has not demonstrated how services will be provided remotely, and without interruption throughout the given opening hours". However, our DSP SOPs explicitly confirm:

4.29 Essential services are provided remotely, without exception, to anyone in England.

4.30 Uninterrupted provision is guaranteed during all opening hours.

4.31 **1.1 Business Continuity & Resilience**

4.32 Our SOPs describe robust systems ensuring uninterrupted service:

4.32.1 Dual broadband with failover

4.32.2 Secure Cloud-based PMR accessible for inspection without interruption

4.32.3 Daily NHSmail monitoring for incoming referrals (including DMS referrals)

4.32.4 Regular NHS.uk and Directory of Services updates

4.32.5 RP procedures ensuring at least one pharmacist is always on duty

4.33 **1.2 Operational Processes Supporting Continuity**

4.34 Our operational SOPs provide clear procedures for:

4.34.1 Handling EPS outages

4.34.2 Managing prescription flow during IT downtime

4.34.3 Delivery continuity via Royal Mail, courier partners, and cold-chain systems

4.34.4 Ensuring timely and confidential communication with patients and prescribers

4.34.5 These all demonstrate compliance with Regulation 25(2)(b)(i).

4.35 **Regulation 25(2)(b)(ii): Safe & Effective Provision Without Face-to-Face Contact**

4.36 The PSRC concluded that this regulation has not been met as ”the applicant has not demonstrated how the safe and effective provision of pharmaceutical services without face to face contact at the pharmacy premises between any person receiving the services”; however, our SOPs contain detailed protocols that ensure full compliance.

4.37 **2.1 Remote-Only Contact Protocols**

4.38 The SOPs mandate:

4.38.1 No face-to-face provision of essential services on or near the premises.

4.38.2 Mandatory use of remote contact methods: phone, email, NHSmail, video.

4.38.3 Identity verification via strict multi-identifier checks (DOB, address, NHS number).

4.38.4 *(Contacting Patients SOP)*

4.39 **2.2 Clinical Safety Framework**

4.40 The SOPs include:

4.40.1 Full clinical assessment standards

4.40.2 Use of National Summary Care Record (NSCR) where appropriate (following due protocol)

4.40.3 Allergy checks, interaction screening, dose validation

4.40.4 Equality Act considerations and reasonable adjustments

4.40.5 *(Pharmaceutical & Legal Assessment SOP)*

4.41 **2.3 Dispensing Accuracy, Safety & Governance**

4.41.1 Dispensing SOPs ensure:

4.41.2 Selection based on prescription, not label (Product Scan Failsafe - TitanPMR®)

4.41.3 Accuracy checks by RP

4.41.4 PIL inclusion and safety warnings

4.41.5 Near-miss logging, incident investigation, and root-cause analysis

4.41.6 *(Selection, Assembly, Accuracy Check, Incidents SOPs)*

4.42 **2.4 Safe Delivery**

4.43 The Delivery SOP specifies:

4.43.1 Secure packaging

4.43.2 CD delivery controls (manifest, signatures on delivery)

4.43.3 Cold-chain integrity monitoring

4.43.4 *(Delivery SOP)*

4.43.5 These procedures ensure safe, effective services without face-to-face interaction, satisfying Regulation 25(2)(b)(ii).

4.44 **3. Regulation 64: DSP-Specific Requirements**

4.45 The PSRC concluded that this regulation has not been met “as the application does not fully meet the below specific conditions to be met by applications for Distance Selling Premises:”. The SOPs provide explicit evidence that all four limbs of Regulation 64(3) are met.

4.46 **3.1 No Face-to-Face Essential Services**

4.47 The SOPs repeatedly state:

4.47.1 Face-to-face contact is prohibited for all essential services;

4.47.1.1 Staff must refuse such requests and provide alternative instructions remotely

4.48 **3.2 Remote-Only National Delivery of Services**

4.49 Our practice is explicitly national:

4.49.1 All essential services available to any patient in England

4.49.2 Website, App and materials contain no geographical restrictions

4.49.3 SOPs prohibit statements implying limited access restricted by location

4.49.4 3.3 Uninterrupted Provision Nationwide

4.49.5 Demonstrated via:

4.49.5.1 Business continuity planning

4.49.5.2 Multi-channel patient communication (Phone, Video Conferencing, In-app Chat, WhatsApp)

4.49.5.3 Resilient delivery infrastructure (Royal Mail Tracked Delivery, courier, cold-chain)

4.49.5.4 RP continuity arrangements

4.50 **3.4 Safe & Effective Remote-Only Model**

4.51 Fully evidenced by:

4.51.1 Clinical governance SOPs

4.51.2 SCR use

4.51.3 ID verification steps

4.51.4 Remote counselling protocols

4.51.5 Delivery safeguards

4.52 **3.5 No Misleading Publicity**

4.53 Our SOPs require:

4.53.1 Practice leaflet clearly stating nationwide service availability

4.53.2 No suggestion of preferential or restricted access

4.53.3 Ajido Ltd therefore meets all DSP-specific requirements.

4.54 **4. Responses to Consultation Objections**

4.55 Objections from Boots UK Ltd and Well Pharmacy do not have legal standing in DSP applications, which are “excepted” under the Regulations (Regulation 31 of the NHS (Pharmaceutical and Local Pharmaceutical Services) Regulations 2013).

4.56 Competition and local service density are not valid criteria for DSP assessment.

4.57 **5. Summary & Request**

4.58 Ajido Ltd respectfully submits that:

4.58.1 The refusal did not fully consider the extensive SOP-based evidence of compliance.

4.58.2 Regulations 25(2)(b)(i), 25(2)(b)(ii) and 64 are fully met.

4.58.3 Our DSP model is safe, robust, compliant and serves patients nationally.

4.58.4 We therefore request that NHS Resolution overturn the refusal and approve Ajido Ltd's inclusion in the pharmaceutical list at 1–3 William Street, Sunderland SR1 1UL."

4.59 [Appendices and SOPs enclosed]

5 Summary of Representations

No representations were received in response to the appeal.

6 Consideration

6.1 The Pharmacy Appeals Committee ("Committee") appointed by NHS Resolution, had before it the papers considered by the Commissioner.

6.2 It also had before it the responses to NHS Resolution's own statutory consultations.

6.3 On the basis of this information, the Committee considered it was not necessary to hold an Oral Hearing.

6.4 The Committee had regard to the National Health Service (Pharmaceutical and Local Pharmaceutical Services) Regulations 2013 ("the Regulations").

Regulation 31

6.5 The Committee first considered Regulation 31 of the Regulations which states:

(1) A routine or excepted application, other than a consolidation application, must be refused where paragraph (2) applies.

(2) This paragraph applies where -

(a) a person on the pharmaceutical list (which may or may not be the applicant) is providing or has undertaken to provide pharmaceutical services ("the existing services") at or from -

(i) the premises to which the application relates, or

(ii) adjacent premises; and

(b) NHS England is satisfied that it is reasonable to treat the services that the applicant proposes to provide as part of the same service as the existing services (and so the premises to which the application relates and the existing listed chemist premises should be treated as the same site).

6.6 The Committee noted that the Applicant had not provided any information in the application form on this point but the Committee noted that the wording of the application form only required the Applicant to include information in the

relevant section if the proposed premises were adjacent to, or in close proximity to, another pharmacy or dispensing appliance contractor premises. The Committee considered it reasonable to determine that the lack of information in the application form on this point when read with the wording of the application form allowed it to be reasonably satisfied that the Applicant considered that the proposed premises were not adjacent to, or in close proximity to, another pharmacy or dispensing appliance contractor premises.

6.7 The Commissioner it is decision report stated that "*Regulation 31 does not apply as there is no pharmacy at the same or adjacent premises to the proposed site – Regulation not applicable".* The Committee noted that no party had sought to dispute this on appeal. The Committee therefore determined that it was not required to refuse the application under the provisions of Regulation 31.

Regulation 25

6.8 The Committee had regard to Regulation 25 of the Regulations which reads as follows:

"(1) Section 129(2A) and (2B) of the 2006 Act (regulations as to pharmaceutical services) does not apply to an application—

(a) for inclusion in a pharmaceutical list by a person not already included; or

(b) by a person already included in a pharmaceutical list for inclusion in that list in respect of premises other than those already listed in relation to that person,

in respect of pharmacy premises that are distance selling premises.

(2) NHS England must refuse an application to which paragraph (1) applies—

(a) if the premises in respect of which the application is made are on the same site or in the same building as the premises of a provider of primary medical services with a patient list; and

(b) unless NHS England is satisfied that the pharmacy procedures for the pharmacy premises are likely to secure—

(i) the uninterrupted provision of essential services, during the opening hours of the premises, to persons anywhere in England who request those services, and

(ii) the safe and effective provision of pharmaceutical services without face to face contact at the pharmacy premises between any person receiving the services, whether on their own or on someone else's behalf, and the applicant or the applicant's staff."

6.9 The Committee also had regard to the provisions of Schedule 2 to the Regulations shown below:

Additional information to be included with excepted applications

8. *If the applicant (A) is making an excepted application, A must include in that application details that explain—*

(a) A's belief that the application satisfies the criteria included in one of the regulations in Part 4 which need to be satisfied if section 129(2A) and (2B) of the 2006 Act (regulations as to pharmaceutical services) are not to apply in relation to that application; and

(b) if the regulation includes reasons for which the application must be refused, why the application should not be refused for those reasons.

Nature of details to be supplied

10. *Where, pursuant to this Part, a person is required to provide details, that obligation is only discharged if the information or documentation provided is sufficient to satisfy NHS England in receipt of it, with good cause, that no relevant information or documentation is missing, having regard to the uses that NHS England may need to make of the information or documentation when carrying out its functions.*

Regulation 25(1)

6.10 In relation to Regulation 25(1), the Applicant is applying for inclusion in the relevant pharmaceutical list as a person already included in a pharmaceutical list for inclusion in that list in respect of premises other than those already listed in relation to that person, and paragraph (1)(b) therefore operates to disapply the specified provisions of section 129 of the National Health Service Act 2006, provided that paragraph (2) does not require the application to be refused.

Regulation 25(2)(a)

6.11 The Committee noted that the Applicant had not included any information in the relevant section of the application form that deals with this point. The Committee noted that the application form states that the relevant section should only be completed if the proposed premises are on the same site or in the same building as the premises of a provider of primary medical services with a patient list. The Committee considered that, where the Applicant did not include any information in this section, it was reasonable to consider that the Applicant was indicating that the proposed premises were not on the same site or in the same building as the premises of a provider of primary medical services with a patient list.

6.12 The Commissioner it is decision report stated that "*Regulation 25(2)(a) does not apply as no primary care provider with a patient list is present within the same premises as the proposed site – Regulation not applicable*". The Committee noted that no party had sought to dispute this on appeal. Based on

the information available to it, the Committee therefore determined that the proposed premises were not on the same site as, or in the same building as the premises of a provider of primary medical services with a patient list.

Regulation 25(2)(b)

6.13 As far as Regulation 25(2)(b) is concerned, the Committee considered the information which had been provided by the Applicant in relation to its procedures for the provision of essential services and pharmaceutical services, including its Standard Operating Procedures (SOPs) that it intends to use at the proposed pharmacy premises.

6.14 The Regulations require the Committee to be satisfied as to a number of matters, including that essential services will be provided on an uninterrupted basis, across England, and that pharmaceutical services will be provided in a safe and effective way without face to face contact.

6.15 Paragraph 8 of Schedule 2 requires an applicant to provide details in relation to an application, and paragraph 10 of Schedule 2 indicates that the obligation is only discharged if the information or documentation provided is sufficient to satisfy the Commissioner in receipt of it, with good cause, that no relevant information or documentation is missing, having regard to the uses that the Commissioner may need to make of the information or documentation when carrying out its functions.

6.16 The Committee has asked itself whether it has sufficient information and documentation which would address the criteria in Regulation 25(2)(b). If the Committee is to be satisfied of the matters in that paragraph, the Committee must be provided with evidence to demonstrate these matters. In this case, that evidence put forward has taken the form of the original application and the SOPs which the Applicant has prepared or commissioned.

6.17 It is not for the Committee to 'approve' or 'disapprove' of these SOPs (as they may contain matters not relevant to the Committee's consideration, and there are many ways an applicant can choose to organise itself in order to comply with the various requirements of the Regulations) and the Committee has not sought to do so. The Committee has sought evidence within the SOPs and application in order to satisfy itself that it is appropriate to grant the application, the absence of which would require it to reject it.

6.18 The Committee considered whether the Applicant had explained the arrangements which ensure that, for appliances which require fitting/ measuring, a registered pharmacist measures/fits them.

6.19 In the application, the Committee noted that in response to the question as to whether they were undertaking to provide appliances, the Applicant had left his box blank and had not provided any information on this point in its appeal. The Committee was therefore unsure if the Applicant was or was not proposing to provide appliances, however given that no further information had been provided to show that there would be compliance with paragraph 8(4) of Schedule 2, the Committee was of the view that, if the application was to be granted, the Applicant would not be able to provide any appliances.

6.20 The Committee considered how the Applicant would provide essential services without interruption.

6.21 In its decision report, the Commissioner stated that "*Regulation 25(2)(b)(i) - Regulation not met as the applicant has not demonstrated how services will be provided…without interruption throughout the given opening hours - Regulation not met".*

6.22 In response, the Applicant states that "*our DSP SOPs explicitly confirm: … Uninterrupted provision is guaranteed during all opening hours".*

6.23 The Committee noted that in its application, the Applicant states that "*The pharmacy ensures the uninterrupted provision of essential services to individuals anywhere in England through robust systems, including trained staff, a reliable contingency rota, and a 24/7 online platform for prescription requests and advice".*

6.24 In its appeal, the Applicant states that:

6.24.1 "*3.3 Uninterrupted Provision Nationwide*

Demonstrated via:

Business continuity planning

…

RP continuity arrangements."

6.25 The Committee had regard to the Applicant's SOPs.

6.26 "SOP: DSP Operating Principles & Governance (DSP1)" states that:

6.26.1 "*5.3 Uninterrupted Service Requirement*

RP must be signed in at all times services are provided.

PMR, EPS, NHSmail systems must be functional.

Contingency plans activated for outages."

6.27 Further, "SOP: DSP Business Continuity & Uninterrupted Service Provision (DSP2)" states that:

6.27.1 *"1. Purpose*

To ensure uninterrupted remote provision of essential services as required by Regulation 25(2)(b)(i)…

…3. Professional Considerations

Business continuity must ensure essential services never pause during opening hours.

Failures in EPS, internet, power, or staff availability must trigger contingency plans.

4. Responsibilities

Role Responsibility

RP Daily oversight; activates contingency

IT Provider Maintain uptime and backup services

All Staff Report failures immediately

5. Process

Stage 1 – Daily System Checks

RP ensures:

EPS is functional

PMR accessible

NHSmail logged in

Backup internet online

Stage 2 – Managing Outages

SCENARIO: EPS DOWN

Contact prescriber for paper prescription

Inform patient

Record in PMR

SCENARIO: INTERNET DOWN

Switch to backup router

If unresolved, activate paper fallback procedures

SCENARIO: STAFF SHORTAGE

Superintendent arranges locum cover

RP redistributes tasks…".

6.28 Whilst the Applicant states that "*SCENARIO: STAFF SHORTAGE Superintendent arranges locum cover*", this suggested there would be interruption and the Committee noted that no assurance had been provided as to how essential services would be provided, should they be required, during

the absence of the Responsible Pharmacist. It was unclear if a second pharmacist would be immediately available to ensure non-interruption and assume RP responsibilities. The Committee was therefore not satisfied that the provision of essential services would be without interruption.

6.29 With regard to services being available to persons anywhere in England.

6.30 In its application, the Applicant states that "*The pharmacy ensures the uninterrupted provision of essential services to individuals anywhere in England through robust systems, including trained staff, a reliable contingency rota, and a 24/7 online platform for prescription requests and advice".*

6.31 In its appeal letter, the Applicant states that:

6.31.1 *"3.2 Remote-Only National Delivery of Services*

Our practice is explicitly national:

All essential services available to any patient in England

Website, App and materials contain no geographical restrictions

SOPs prohibit statements implying limited access restricted by location."

6.32 Further "SOP: DSP Operating Principles & Governance (DSP1)" states that:

6.32.1 *"1. Purpose*

…This SOP ensures that all essential services are provided remotely, safely, and uninterruptedly to persons anywhere in England, with no face-to-face provision on or near the premises…

… 5.2 National Availability

Veritas must provide essential services to any patient in England, regardless of location."

6.33 The Committee was therefore satisfied that the provision of essential services would be available to persons anywhere in England.

6.34 The Committee considered how the Applicant would provide pharmaceutical services without face to face contact.

6.35 In its decision report, the Commissioner states that "*Regulation 25(2)(b)(i) - Regulation not met as the applicant has not demonstrated how services will be provided remotely… Regulation not met as the applicant has not demonstrated how the safe and effective provision of pharmaceutical services without face to face contact at the pharmacy premises between any person receiving the services".*

6.36 In response, the Applicant states that "*our DSP SOPs explicitly confirm…Essential services are provided remotely, without exception… however, our SOPs contain detailed protocols that ensure full compliance.*

Remote-Only Contact Protocols

The SOPs mandate:

No face-to-face provision of essential services on or near the premises.

Mandatory use of remote contact methods: phone, email, NHSmail, video.

Identity verification via strict multi-identifier checks (DOB, address, NHS number). (Contacting Patients SOP)."

6.37 "SOP: DSP Operating Principles & Governance (DSP1)" states that:

6.37.1 *"…Stage 3 – Enforce No Face-to-Face Contact*

Who: All staff If a patient arrives at premises:

1. Staff must state: "Veritas Pharmacy is a Distance Selling Pharmacy and cannot provide any essential services in person."

2. Provide remote contact information

3. If urgent, signpost to nearest walk-in provider."

6.38 "SOP B1 – CONTACTING PATIENTS REMOTELY (DSP3)" states that:

6.38.1 *"2. Scope*

This SOP applies to all non–face-to-face communication including:

Phone

Email

SMS

NHSmail

Live video consultations

Website enquiries"

6.39 Further, the Committee was mindful of the regulatory changes as of 1 October 2025, that distance selling pharmacies can no longer provide Directed services (Advanced, National Enhanced and Enhanced Services, with the exception of Covid-19 and Flu vaccination services) face to face with the patient at the pharmacy premises.

6.40 In its application, which the Committee acknowledged was completed before the regulatory amendments came into force, the Applicant had stated that it intended to provide:

6.40.1 "*New medicine service (NMS)*

6.40.2 *NHS Pharmacy Contraception Service –*

6.40.3 *Ongoing Supply and Initiation of Oral*

6.40.4 *Contraception*

6.40.5 *NHS Pharmacy First Service*

6.40.6 *Patient Group Direction Service*

6.40.7 *Emergency Supply Service."*

6.41 Further, in the supporting information provided with the application, the Applicant states that "*Services such as the New Medicine Service, and Pharmacy First will be delivered remotely through structured protocols that ensure patient understanding, engagement, and follow-up".*

6.42 As a result of this amendment, the Committee noted that the Applicant would not be able to provide any pharmaceutical services to patients present at its premises.

6.43 The Committee was aware that when the pharmacy opens, it will be the responsibility of the Commissioner, in keeping with Regulation 64, to ensure that services are provided other than with face to face contact.

6.44 The Committee was satisfied that pharmaceutical services would be provided without face to face contact. The Committee went on to consider whether the safe and effective provision of pharmaceutical services was likely to be secured.

6.45 The Committee considered pharmaceutical services including each essential service in paragraphs 3 to 22 of schedule 4 of the Regulations ("Terms of Service") in turn.

6.46 The Committee paid particular attention to the following aspects of the essential services, which it considered were more difficult to provide safely and effectively in a distance selling context:

6.46.1 Dispensing of drugs and appliances

6.46.2 Urgent supply without a prescription

6.46.3 Preliminary matters before providing ordered drugs or appliances

6.46.4 Providing ordered drugs or appliances

6.46.5 Refusal to provide drugs or appliances ordered

6.46.6 Further activities to be carried out in connection with the provision of dispensing services

6.46.7 Disposal service in respect of unwanted drugs

6.46.8 Promotion of healthy lifestyles

6.46.9 Prescription linked intervention

6.46.10 Health campaigns

6.46.11 Signposting

6.46.12 Support for self-care

6.46.13 Discharge medicines service

6.46.14 Websites and health promotion zones

6.47 The Committee was of the opinion that the procedures adopted by the pharmacy were not likely to secure the safe and effective provision by the Applicant of the following essential services.

Preliminary matters before providing ordered drugs or appliances

6.48 The Committee considered whether the Applicant had explained how evidence will be sought and provided about the patients' entitlement to exemption or remissions from NHS Charges.

6.49 "SOP D1 — GENERAL DELIVERY OF PHARMACY ITEMS (DSP10)" states that:

6.49.1 *"1. Purpose*

To ensure that all items dispensed at Veritas Pharmacy are delivered safely, securely, confidentially, and in accordance with Distance Selling Pharmacy (DSP) regulations, ensuring no face-to-face essential services occur during any delivery process…

… Stage 4 — On Return to Pharmacy

Who: P/ACT/PT/D

Match delivery book against prescriptions

Confirm exemption/payment status

File prescriptions accordingly."

6.50 "SOP E1 — EPS DISPENSING PROCESS (DSP14)" states that:

6.50.1 *"1. Purpose*

To describe the complete, legally compliant process for dispensing Electronic Prescription Service (EPS) prescriptions at a Distance Selling Pharmacy, ensuring safe remote provision of essential services and uninterrupted dispensing…

… Stage 5 — Delivery Preparation

Who: ACT / Dispenser

Prepare items per DSP10

Confirm exemption status or payment due…

…Stage 7 — Notification to Spine

Who: Pharmacist

Send dispense notification

Update exemption status

Complete EPS claim process."

6.51 Other than the information above and the Applicant referring to "Regulation 7(3) of The National Health Service (Charges, Remission of Charges and Pharmaceutical Services etc.) (Amendment and Transitional Provisions) Regulations 2025" in its supporting information provided with the application, the Committee noted no other information had been provided to explain how evidence will be sought and provided about the patients' entitlement to exemption or remissions from NHS Charges.

6.52 The Committee was therefore not satisfied that it had been provided with information sufficient to show that there would be compliance with paragraph 7(3) of Schedule 4.

6.53 The Committee considered whether the Applicant had explained how charges will be paid.

6.54 The Committee noted that no information had been provided to explain how charges will be paid.

6.55 The Committee was therefore not satisfied that it had been provided with information sufficient to show that there would be compliance with paragraph 7(5)(b) of Schedule 4.

Providing ordered drugs or appliances

6.56 The Committee considered whether the Applicant had explained what containers will be "suitable" for posted/delivered items.

6.57 In its appeal letter, the Applicant states that:

6.57.1 "*2.4 Safe Delivery*

The Delivery SOP specifies:

Secure packaging…

…APPENDIX D — DELIVERY, DISPATCH & NATIONAL COVERAGE

D1. Standard Deliveries (Royal Mail & Courier)

The SOP ensures:

Secure packaging

Use of padded or reinforced boxes."

6.58 As highlighted by the Applicant, the Committee had regard to "SOP D1 — GENERAL DELIVERY OF PHARMACY ITEMS (DSP10)" however other than:

"1. Purpose

To ensure that all items dispensed at Veritas Pharmacy are delivered safely, securely, confidentially, and in accordance with Distance Selling Pharmacy (DSP) regulations, ensuring no face-to-face essential services occur during any delivery process…

…Stage 2 — Handover to Delivery Driver

Who: RP

RP must be signed in

Check delivery book entries

Confirm driver has insulated box for fridge items."

6.59 The Committee found no reference to secure packaging or padded or reinforced boxes. Due to the title of the SOP, the Committee considered this to be "*The Delivery SOP"* as referenced by the Applicant.

6.60 The Committee further noted that "SOP D2 — COLD CHAIN DELIVERY (DSP11)" states that:

6.60.1 *"1. Purpose*

To ensure the safe, compliant delivery of temperature-sensitive items (2–8°C) while maintaining full cold chain integrity throughout the entire DSP process…

… 3. Professional Considerations…

… Packaging must include:

Insulated container

Cool packs separated from medicine

Temperature monitoring methods…

… 5. Process Stages

Stage 1 — Prepare Cold Chain Packaging

Who: PT/ACT/D

Use insulated, reinforced cold box

Place medicine in separate compartment away from ice packs

Pack with appropriate buffering material

Label as "FRIDGE LINE — KEEP REFRIGERATED"."

6.61 The Committee was of the view that the Applicant had not provided sufficient information to demonstrate what outer packaging it would be using for items other than cold chain items and how this would be suitable for posted/delivered items to ensure that the integrity of the medication would be maintained. There was no explanation as to what constitutes "secure packaging".

6.62 Based on the information before it, the Committee was not satisfied that it had been provided with information sufficient to show that there would be compliance with paragraph 8(15) of Schedule 4.

Further activities to be carried out in connection with the provision of dispensing services

6.63 The Committee considered whether the Applicant had explained how appropriate advice about the benefits of repeat dispensing is given to any patient who (i) has long term, stable medical condition (that is, a medical condition that is unlikely to change in the short to medium term), and (ii) requires regular medicine in respect of that medical condition.

6.64 The Committee noted that the Applicant had provided no information in relation to providing advice to patients about the benefits of repeat dispensing. The Committee was therefore not satisfied that it had been provided with information sufficient to show that there would be compliance with paragraph 10(1) of Schedule 4.

Disposal service in respect of unwanted drugs

6.65 The Committee considered whether the Applicant had explained how it will safely and effectively accept and dispose of unwanted drugs presented to it for disposal.

6.66 In its 14 day comments to the Commissioner, the Applicant states that "*Waste collection – Procedures are in place with licensed waste management*

providers to ensure compliance with all environmental and clinical waste regulations".

6.67 The Committee noted that the Applicant had provided no further information in relation to how it would safely and effectively accept and dispose of unwanted drugs presented to it for disposal. Therefore, the Committee was not satisfied that it had been provided with information sufficient to show that there would be compliance with paragraphs 13 - 15 of Schedule 4.

Promotion of healthy lifestyles

6.68 The Committee considered whether the Applicant had explained how it will safely and effectively promote healthy lifestyles.

6.69 The Committee noted that the Applicant had provided no information in relation to how it would safely and effectively promote healthy lifestyles. The Committee was therefore not satisfied that it had been provided with information sufficient to show that there would be compliance with paragraph 16 – 18 of Schedule 4.

Prescription linked intervention

6.70 The Committee considered whether the Applicant had explained how it will assess whether persons require prescription linked intervention advice because they have diabetes, are at risk of coronary heart disease, smoke or are overweight.

6.71 The Committee noted that the Applicant had provided no information in relation to how it would assess whether persons require prescription linked intervention advice because they have diabetes, are at risk of coronary heart disease, smoke or are overweight. The Committee was therefore not satisfied that it had been provided with information sufficient to show that there would be compliance with paragraph 16 – 18 of Schedule 4.

Health campaigns

6.72 The Committee considered whether the Applicant had explained how it will safely and effectively participate in public health campaigns, if and to the extent required by the Commissioner.

6.73 The Committee noted that the Applicant had provided no information in relation to how it would safely and effectively participate in public health campaigns, if and to the extent required by the Commissioner. The Committee was therefore not satisfied that it had been provided with information sufficient to show that there would be compliance with paragraph 18 of Schedule 4.

Signposting

6.74 The Committee considered whether the Applicant had explained how it will provide information to users of the pharmacy about other health and social care providers and support organisations.

6.75 The Committee noted that "SOP: DSP Operating Principles & Governance (DSP1)" states "Appendix 2 – DSP Signposting Script" however the Committee

noted that this had not been provided, despite NHS Resolution highlighting this to the Applicant and advising that if it wished to rely on it as part of its appeal (along with appendix 1 & 3), it would need to be provided.

6.76 In its 14 day comments to the Commissioner, the Applicant states that "*Signposting of patients – Our pharmacists will provide signposting to appropriate NHS or local services, supported by documented protocols".* However, the Committee did not consider that this was sufficient to satisfy the requirements of paragraphs 19 – 20 of Schedule 4.

Support for self-care

6.77 The Committee considered whether the Applicant had explained how it will provide advice and support to people caring for their families.

6.78 The Committee noted that the Applicant had provided no information in relation to how it would provide advice and support to people caring for their families. The Committee was therefore not satisfied that it had been provided with information sufficient to show that there would be compliance with paragraphs 21 – 22 of Schedule 4.

Websites and health promotion zones

6.79 The Committee considered whether the Applicant had explained how it will ensure that it has a website for use by the public for the purpose of accessing pharmaceutical services from those premises, on which there is an interactive page, clearly promoted to any user of the website when they first access it, which provides public access to a reasonable range of up to date materials that promote healthy lifestyles by addressing a reasonable range of health issues.

6.80 Beyond the reference to a website and website enquiries, the Committee noted that the Applicant had provided limited information regarding its website, in particular whether there will be an interactive web page.

6.81 The Committee was therefore not satisfied that it had been provided with information sufficient to show that there would be compliance with paragraph 28C of Schedule 4.

6.82 In relation to all other essential services, the Committee was, on balance, satisfied that procedures adopted by the pharmacy (and general adherence to the Terms of Service) would be "likely to secure" safe and effective provision.

Summary

6.83 On the information before it, the Committee could not be satisfied that there are procedures likely to secure the safe and effective provision of pharmaceutical services as required by Regulation 25(2)(b).

6.84 Pursuant to paragraph 9(1)(a) of Schedule 3 to the Regulations, the Committee may:

6.84.1 confirm the Commissioner's decision;

6.84.2 quash the Commissioner's decision and redetermine the application;

6.84.3 quash the Commissioner's decision and, if it considers that there should be a further notification to the parties to make representations, remit the matter to the Commissioner.

6.85 Even though the Committee had reached the same decision as the Commissioner, it had done so for different reasons, therefore, the Committee determined that the decision of the Commissioner must be quashed.

6.86 The Committee considered whether there should be a further notification to the parties detailed at paragraph 19 of Schedule 2 of the Regulations to allow them to make representations if they so wished (in which case it would be appropriate to quash the original decision and remit the matter to the Commissioner) or whether it was preferable for the Committee to reconsider the application.

6.87 The Committee noted that representations on Regulation 25 had already been made by parties to the Commissioner, and these had been circulated and seen by all parties as part of the processing of the application by the Commissioner. The Committee further noted that when the appeal was circulated representations had been sought from parties on Regulation 25.

6.88 The Committee concluded that further notification under paragraph 19 of Schedule 2 would not be helpful in this case.

7 Decision

7.1 The Committee concluded that it was not required to refuse the application under the provisions of Regulation 31.

7.2 The Committee:

7.2.1 quashes the decision of the Commissioner; and

7.2.2 redetermines the application as follows -

7.2.2.1 the Committee was satisfied that the premises of the Applicant are not on the same site or in the same building as the premises of a provider of primary medical services with a patient list;

7.2.2.2 the Committee was not satisfied that all essential services were likely to be secured without interruption during the opening hours;

7.2.2.3 the Committee was satisfied that all essential services were likely to be secured for persons anywhere in England;

7.2.2.4 the Committee was not satisfied that pharmaceutical services were likely to be secured in a safe and effective manner; and

7.2.2.5 the Committee was satisfied that pharmaceutical services were likely to be secured without face to face contact.

7.2.3 The application is refused.

Case Manager
Primary Care Appeals