

From the Chief Medical Officer
Professor Sir Michael McBride



HSS(MD) 32/2026

FOR ACTION

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Trusts/NIAS
Chief Operating Officer, SPPG
GP Medical Advisers, SPPG
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Our Ref: HSS(MD) 32/2026
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Dear Colleague

**UPDATED ADVICE ON THE IMPLEMENTATION OF HUB AND SPOKE
DISPENSING ARRANGEMENTS WITHIN THE HSC**

Further to the advice provided in [HSS \(MD\) 34 /2025](#) which advised of amendments made to the [Medicines Act 1968](#) (“the Medicines Act”) and the [Human Medicines Regulations 2012](#) (HMRs) in relation to the introduction of hub and spoke dispensing between pharmacies of different legal entities, this letter now aims to provide further advice and clarity in relation to the implementation of hub and spoke dispensing arrangements within the HSC.

Background

Hub and spoke dispensing is a pharmacy model whereby some routine parts of the dispensing process, like assembling prescriptions, are done in a central hub pharmacy, while patient interactions and final supply occur at spoke pharmacies, allowing staff within the latter to focus on the delivery of patient-centred services.

Section 10 of the Medicines Act has long permitted hub and spoke dispensing within the same retail pharmacy business (intra-company). Intra-company hub and spoke arrangements do not involve subcontracting any part of the essential dispensing service. [The Human Medicines \(Amendments Relating to Hub and Spoke Dispensing etc.\) Regulations 2025](#) were made on 25 June 2025 and came into force on 1 October 2025, amending both the Medicines Act and the HMRs to enable all community pharmacies to access hub and spoke dispensing of human medicines between pharmacies belonging to different legal entities if they complied with certain requirements. These are:

- Hub and spoke pharmacies are mandated to enter written arrangements with each other when adopting this dispensing model. This must be a comprehensive agreement of the responsibilities each pharmacy has for the shared dispensing process.
- The spoke must sell, supply, or dispense the medicine to the patient; the hub having assembled or part assembled it – under these arrangements.
- The dispensed medicine must be labelled with the spoke's name and address, plus the date on which the hub assembled or part assembled the medicine (*as well as standard information required on any dispensing label*).
- The sharing of patient data between the hub and spoke (*without the explicit consent of a patient*) is permitted through an information gateway. This gateway requires the spoke to display an appropriate notice to patients, and staff at the spoke and the hub to maintain the confidentiality of patient data.
- The spoke is required to display a notice, both on their premises and/or their internet presence, aiming to provide full transparency to patients.

In line with the position adopted by NHS England, the Department considers that Controlled Drugs in Schedules 1–3 should be excluded from hub and spoke dispensing arrangements due to the enhanced legal, governance, and patient safety requirements associated with these medicines, including those outlined in [the Controlled Drugs \(Supervision of Management and Use\) Regulations \(Northern Ireland\) 2009](#). Controlled Drugs are subject to strict statutory controls relating to possession, safe custody, record-keeping, and accountability, which are most effectively maintained within a single registered pharmacy. Introducing additional handling, transport, and transfer of responsibility between hub and spoke pharmacies increases the risk of diversion, theft, record discrepancies, and uncertainty regarding legal accountability. Furthermore, retaining dispensing within the pharmacy that receives the prescription ensures robust professional oversight, supports compliance with controlled drug legislation, and maintains public confidence in the safe and secure supply of these higher-risk medicines. Accordingly, the dispensing and supply of Schedule 1–3 Controlled Drugs should remain under the direct control of the registered pharmacy responsible for supplying the patient.

In the context of existing UK-wide legislation, hub and spoke dispensing is **not mandatory** and, having given due consideration to any additional requirements that may have been required locally to underpin this dispensing model within the HSC, the Department has decided that no additional amendments are currently required to the [Pharmaceutical Services Regulations \(Northern Ireland\) 1997](#) ("the 1997 Regulations") to facilitate hub and spoke dispensing within the HSC. This position remains subject to review and the Department reserves the right to progress legislative amendments to the 1997 Regulations should circumstances arise where it is felt that amendments are necessary.

As existing UK-wide legislative provisions around hub and spoke dispensing are enabling, the Department is of the view that the current legislative provisions set out in UK-wide legislation are sufficient in allowing for a choice in how a community pharmacy offering HSC pharmaceutical services may wish to manage its dispensing practices in accordance with its business model. It is important to emphasise however, that as per section 10 of the Medicines Act and regulations 220-222B and

274 of the HMRs (as amended and inserted by the Human Medicines (Amendments Relating to Hub and Spoke Dispensing etc.) Regulations 2025), **both the hub and spoke under such dispensing arrangements must be “registered pharmacies”** (in accordance with section 75 of the Medicines Act), with such premises then needing to be registered with the Pharmaceutical Society of Northern Ireland (PSNI).

Hub and spoke and the provision of HSC pharmaceutical services

In the context of delivering HSC pharmaceutical services, all registered pharmacy contractors and appliance suppliers who have entered into arrangements with the Department under Article 63(1) of the [Health and Personal Social Services \(Northern Ireland\) Order 1972](#) (“the 1972 Order”) for the provision of pharmaceutical services, must be included in the Pharmaceutical List in Northern Ireland.

A pharmacy seeking to utilise the HMR provisions outlined above to act as a ‘spoke’ pharmacy within the hub and spoke pharmacy dispensing model is required to be both a registered pharmacy and also included in the Department’s Pharmaceutical List. In contrast, if a pharmacy is providing a “preparation and assembly” role as a ‘hub’ pharmacy under a hub and spoke dispensing model, without making any supply to the patient, it must be a registered pharmacy, but it does not need to be included in the Pharmaceutical List as a provider of HSC Pharmaceutical Services. It should be noted however, if the hub also provides pharmaceutical services within the meaning of Article 63(1) of the 1972 Order; as a spoke pharmacy in the context of the hub and spoke dispensing model, it would also need to be included in the Pharmaceutical List for that role.

Further Information

Further information on registering pharmacy premises with the Pharmaceutical Society of Northern Ireland can be found [here](#)

Further information on applications to join the Pharmaceutical List as a provider of HSC pharmaceutical services can be found [here](#)

Yours sincerely



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This letter is available on the Department of Health website at
<https://www.health-ni.gov.uk/topics/professional-medical-and-environmental-health-advice/hssmd-letters-and-urgent-communications>