Medicines Safety Tablet Press Extra
Medicines safety newsletter for GPs, nurses and pharmacy teams
NHS Northamptonshire ICB
July 2026

Medicines Supply Problems

Medicines supply problems can occur for numerous reasons including impact of global supply chain issues, manufacturing problems, raw material shortages, regulatory issues and localised problems due to issues at wholesaler depots. The issues causing medicines supply shortages are out of the control of community pharmacies and GP practices. As such medicines supply affects all sectors of the Integrated Care System and can lead to frustration and concern for patients. Since it is understood that both community pharmacies and GP practices are spending a significant amount of time sourcing alternative medicines or supplies and changing prescriptions the aim of this bulletin is to highlight some actions that might help when dealing with medicine supply problems.

Medicines Supply Tool

Pharmacy and practice staff should register with the Specialist Pharmacy Service Medicines Supply Tool to obtain details of medicines supply shortages. Any staff with a nhs.net e-mail address can sign up for access to the tool. The tool provides information on supply issues, expected re-supply date, actions to take and alternative options. Medicines Supply Notifications issued by the Department of Health and Social Care (DHSC) are available via this tool. E-mail alerts can be set up for the SPS website.
If a medicines shortage is not listed on the SPS Medicines Supply Tool, pharmacies should report the issue via the Community Pharmacy England (CPE) website.

Serious shortage protocols

If the DHSC decide there is a serious shortage of a specific medicine or appliance, then a Serious Shortage Protocol (SSP) may be issued. A SSP will allow a community pharmacy to substitute a prescribed medicine for an alternative as instructed in the SSP, without needing to seek authorisation from the prescriber. This saves time for patients, pharmacists and prescribers.
Where an SSP has been issued, community pharmacies and dispensers must consider whether it is appropriate to supply the product in accordance with the SSP rather than the prescription. The patient would also have to agree to the alternative supply.
Following a SSP reduces the need to request changes to the prescriptions from the prescriber. Current SSPs are listed on NHS Business Services Authority serious shortage protocol webpage.

Prices Concessions

Limited availability of certain medicines can lead to prices increasing above the Drug Tariff reimbursement price. When this occurs DHSC can introduce a price concession at the request of Community Pharmacy England. A price concession is a higher than Drug Tariff price that will be automatically reimbursed for that month for a particular item. The national reimbursement system for dispensing doctors and community pharmacists is designed around an "averaging" model. This means that the Drug Tariff prices and the associated discount scale assume that while certain lines may be dispensed at a loss, these are balanced by other items that yield a higher margin. Please be aware that the DHSC continually monitors the wholesalers price of items and if it is deemed that the “cost pressure” from an item is such that it will significantly affect the dispensing practices and community pharmacies profit margins then they will provide a price concession for that item.

Any pricing concerns should be raised with Community Pharmacy England via the form on their website. A request for a change of prescription based on reimbursement concerns is not appropriate. The price concession system should be used.

Recommendations for managing supply problems

- Initially check the SPS Medicines Supply Tool to check if there is a known supply problem and the recommendations.
- Liaise with nearby pharmacies, where practical; to suggest a pharmacy that has stock. Some pharmacies have an online stock tracker available.
- Review if the medicine is still needed. For example a recent supply problem with oxybutynin could be used as an opportunity to discuss with the patient taking a "trial without" and monitoring symptoms, anticholinergic burden etc.
- Prescribe generically where appropriate to allow pharmacies to dispense any brand that is appropriate and in stock. Some medicines must be prescribed by brand for safety reasons. Advice is available here
- Prescribe 28-day supply - prescribing for longer periods can exacerbate supply issues
- If an alternative is needed prescribe following the Northamptonshire ICB formulary which is on the Primary Care Portal and integrated into OptimiseRx and clinical systems.
- If an alternative medicine is needed this should be issued as a one-off acute, the repeat should not be changed.
- Keep the patient informed of any supply problems or medication changes. Consider using a patient information leaflet to explain shortages
- Consider using a direct phone number between community pharmacies and GP practices for medicines queries to avoid using patient lines.