

## Decommissioning of the Norfolk Medicines Support Service (NMSS)

### **To: All GP practices, community pharmacies, Norfolk & Waveney LMC, Community Pharmacy Norfolk & Suffolk**

NHS Norfolk and Waveney ICB has decided that the Norfolk Medicines Support Service provided by AGEM CSU will be formally decommissioned, effective from 31 March 2026. This decision follows a review of service provision and aims to realign resources to best meet the evolving needs of our healthcare system. All healthcare professionals are encouraged to familiarise themselves with the implications for patient care and referral processes. The sub-contracted service paying pharmacies and dispensing practices for current patients is under separate consideration.

To enable this change, the service will not be accepting any further referrals with immediate effect. Further guidance and resources will be provided to assist healthcare professionals with this change in due course.

In the meantime, a set of Frequently Asked Questions is below to help you manage the immediate change.

- **Why is the Norfolk Medicines Support Service being decommissioned?**  
ICBs have a formal process to review commissioned services which has been undertaken. The service is not available across the whole of the Norfolk & Waveney system and there is inequality of service provision to patients.
- **What will happen to patients currently using this service for compliance aids?**  
Work is ongoing to plan for patients who are currently registered with the service. Please continue to provide the recommended intervention until further guidance is provided – payments will be provided into the new financial year whilst transitional arrangements are finalised. You should continue to log supplies made to patients via PharmOutcomes (pharmacies) or claim forms (dispensaries) with payments made from the ICB. Claims will be accepted for any patients with a valid NMSS registration number. Please do not change any arrangements for current NMSS patients until further guidance is given – except for MAR charts – see below.
- **What will happen to patients currently using MAR charts?**  
We are writing to home care providers to explain the changes to the service. MAR charts should not be supplied with medicines after 31 March 2026. Patients using a MAR chart only will then be removed from the service. This does not affect their

ongoing supply of medication. You must ensure that all claims for the supply of MAR charts are made before 31 March 2026.

- **What should I do with a request for a MAR chart prior to 31 March?**  
You should explain that new patients are no longer being registered with the service, so alternative arrangements should be made by the home care provider (care agency). A letter will be available shortly to support this messaging.
- **Why can I not make a referral into the service now?**  
The service needs time to assess the referrals that have already been accepted before 31 March 2026 and to complete other closure activity.
- **We've made a referral in the last few weeks but haven't heard yet, will the patient be seen?**  
Recent referrals have been triaged with the highest priority referrals being seen. The service will notify you if a referral you have made will not be assessed. Some current referrals are awaiting clinical summaries from the GP practice; these must be provided to the service by 6<sup>th</sup> February.
- **Will there be additional training or resources for healthcare professionals?**  
Yes, a resource pack is currently being collated to support healthcare professionals. This will include information about how to assess what support a patient needs, and details about what resources are available to support patients. We are also looking to provide some training sessions to assist with this in the near future.

We will share further updates about this change as soon as possible. If you have a question that has not been answered here, please email: [nwicb.medsqueries@nhs.net](mailto:nwicb.medsqueries@nhs.net)

We recognise that this service has been established within the local health system for some time and that this will be a significant change to local providers. We are working to develop resources for signposting and holding conversations with impacted patients, and we will share these as soon as possible.

Kind regards



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