

2026 election manifesto:

Prioritising community pharmacy

Community pharmacy is the front door to the primary healthcare system, especially in rural communities, after-hours, weekends, and for patients struggling to access timely GP appointments.

Pharmacists are the health professional you see most often. They are highly accessible, highly trained and highly trusted healthcare professionals. More than 1.65 million patients visit community pharmacy every month, with pharmacies dispensing over 98 million medicines to patients in 2025.

Pharmacies and pharmacists need to be funded and enabled to continue, and to grow, the vital role they play supporting patients and reducing pressure on other parts of the health system, particularly general practice and emergency departments.

The below four priorities, if delivered, will ensure community pharmacy is financially sustainable and able to continue to support their patients and communities.

Priority one: Maintain majority pharmacist ownership of community pharmacies

Why this matters?

Current pharmacy ownership regulations serve patients well. Community pharmacies are conveniently located throughout the country, often open when other health providers aren't. There are no patient safety or service quality issues. Maintaining majority pharmacist ownership of pharmacies ensures this continues.

What will it achieve?

- Protects the community pharmacy sector from monopoly/duopoly risks.
- Stops 'pharmacy deserts' from emerging in rural and deprived areas.
- Prevents the need for re-regulation, as seen overseas following the introduction of open ownership.
- Prevents service withdrawal, with corporate owners focused on profits and retail sales over patients – this means a reduced service offering.

Priority two: Sustainably fund community pharmacy – and address years of chronic underfunding

Why this matters?

Over almost two decades, pharmacy dispensing fees have only grown at half the rate of inflation, compared to general practice funding, which has kept pace with inflation. Retail competition means pharmacy retail sales no longer cross-subsidise this shortfall. Without a significant 'catch up' and a process to ensure ongoing funding increases meet cost pressures, the community pharmacy sector's viability is at risk, in turn risking patients' access to medicines and pharmacy services.

What will it achieve?

- Ensures pharmacies remain open and accessible throughout the country.
- Prevents service withdrawal, as pharmacies may need to cut unfunded services or opening hours to cut costs and remain viable.
- Enables pharmacy owners to fairly pay their staff, supporting workforce retention and recruitment efforts.
- Gives pharmacies confidence to increase their service offering, thanks to a solid funding foundation.

Priority three: Implement a national contracting policy for access to a pharmacy funding agreement

Why this matters?

A national contracting approach means improved workforce stability, scale and efficiency across the community pharmacy sector, and it means the confidence to invest – in people, premises, technology and services – knowing the process for securing and keeping a contract is fair, consistent and focused on a sustainable sector, wherever you are in the country.

What will it achieve?

- Evaluates quality service provision when assessing applications for new pharmacy agreements.
- Gives pharmacy owners confidence to invest in technology, people, their premises, and services.
- Supports pharmacy mergers where it's sensible, creating bigger, more sustainable community pharmacies, able to offer more services and open longer hours.
- Helps address workforce shortages – unneeded new pharmacies currently employ staff from existing pharmacies, putting the sector's ability to offer new services at risk.

Priority four: Enable community pharmacists to do more and invest to ensure this continues

Why this matters?

Pharmacists are highly accessible, highly trained and highly trusted healthcare professionals and they can do more, if services are funded to support this role expansion. This could include treating common, long-term, and acute conditions, and continuing and initiating medicines, reducing pressure on other parts of the health system.

What will it achieve?

- Increased access to healthcare, particularly in areas with limited or delayed general practice access or closed books.
- Reduced burden on other healthcare services, including general practice, after hours clinics and emergency departments.
- Increased pharmacist scope of practice, supporting workforce retention and recruitment efforts.