

Position Statement – Patient Return Medication: Care Providers (September 2026)

There is no contractual requirement for pharmacies to complete or sign documentation regarding the return of patient medicines that forms part of any care provider's internal audit process. Pharmacy colleagues should also be mindful of the professional and legal risks associated with signing records that they cannot independently verify.

Requests for pharmacy signatures when medicines are returned from care homes or care agencies can create accountability concerns. Pharmacies may be asked to acknowledge receipt of medicines without being able to confirm exactly what has been returned or whether it matches the care agency/home's records. Community Pharmacy England has highlighted the liability risks associated with accepting and signing for returned medicines where there is no clear inventory. This activity would also create additional unfunded workload.

From a patient safety and governance perspective, colleagues should not sign documentation or create records that they cannot independently validate. Responsibility for regulating medicines management in care homes sits with the Care Quality Commission (CQC), with support and oversight provided by local authorities and ICB medicines optimisation teams where appropriate.

Care providers should be able to maintain their own audit trail through returned medicines records, witness signatures, disposal records and stock records without requiring pharmacy signatures, which may blur professional accountability.

Where auditors request additional evidence, care providers may wish to seek advice from their medicines management team, local authority commissioners or CQC inspector regarding acceptable audit requirements. Auditor expectations do not, in themselves, create an obligation for pharmacies to undertake activities outside their contractual responsibilities.

Pharmacies may choose to acknowledge receipt of returned medicines where appropriate, but any acknowledgement should be limited to receipt only and should not be interpreted as verification of medicines returned, quantities, condition, reconciliation against records, or the accuracy of the care provider's audit trail.

(This position statement has been adapted with permission from guidance issued by Well Pharmacy, Superintendent office)