**Re: Primary Care Network (PCN) Community Pharmacy Lead**

Dear All

This is a reminder that I am currently acting as your PCN Community Pharmacy Lead and am happy to continue within this role for the current Pharmacy Quality Scheme in 2021-22.

Please can you re-confirm you are happy for me to continue within this role by [Enter deadline of one week].

Alternatively please do feel free to nominate either yourself or a colleague for this role using this email group. Community Pharmacy Hertfordshire will facilitate elections where necessary.

If you have any questions or would like to discuss this, please feel free to contact me directly.

Yours sincerely

[Your Name]

**Pharmacy PCN Lead**

Phone: [Phone number]

Email: [email address]