

Key insights from the June 2026 Common Registration Assessment

About this resource

This resource is prepared by the Board of Assessors and provides insights into performance from the June 2026 Common Registration Assessment (CRA). It should be used alongside the following important documents and resources available on the sitting the **Common Registration Assessment webpage** on the GPhC website:

- The **CRA framework** outlines the topics, skills and knowledge areas that may be assessed. The CRA framework content areas provide a broad indication of the assessment's scope.
- The CRA example questions for **Part 1** and **Part 2** show the style, format and level of challenge of questions. They allow you to become familiar with the functionality of the assessment delivery platform.

The Board do not endorse external revision or preparation materials as these may differ in content, style and level of challenge compared to the actual assessment. Preparation for the assessment is supported by the knowledge, skills and experience developed during foundation training, your pharmacy education and the application of learning in practice.

How to use this resource

This resource is of value to a variety of audiences, including current trainee pharmacists, future trainee pharmacists, trainee pharmacists who have recently sat the assessment, designated supervisors, educational supervisors, Statutory Education Bodies, and undergraduate and postgraduate providers.

This resource can be used to:

- support reflection and guide discussions with designated and educational supervisors on areas of challenge
- guide self-assessment and identification of learning needs within the pharmacy practice environment

Passing standard

The CRA is set at the standard required for safe and effective person-centred care and professional practice in the UK, at the point of registration. The GPhC uses recognised methodology and psychometrics to ensure reliability, validity and fairness.

The pass mark may vary between assessment sittings because each sitting contains a different set of questions. The standard required to pass remains consistent across sittings. A trainee pharmacist must achieve the pass mark or greater for Part 1 and for Part 2 within the same sitting. Further information is available in the **CRA mark awarding algorithm**.

Insights from the June 2026 assessment

The tables below highlight areas where performance suggests that further development is required. These insights are not exhaustive and do not indicate that these topic areas are more likely to appear in future assessments. All assessment content is underpinned by legislation, regulatory standards and the supporting evidence base.

Part 1 insights

Table 1: Insights from Part 1 pharmacy and healthcare calculations

Calculation	Comments
Displacement volumes	Apply pharmaceutical principles to the preparation of medicines. For example, usage of displacement volumes.
Infusion rates	Use all the relevant information in the scenario when calculating infusion rates. For example, the infusion time, concentration, and rate.
Medical statistics	Correctly extract and apply data relating to evidence-based medicine to evaluate treatment options and make appropriate decisions about patient care.
Pharmacokinetics	Apply the principles of pharmacokinetics to an individual patient, including the impact of half-life and creatinine clearance on dosing decisions.

Additional comments

- Consider the dose, frequency, formulation and duration of treatment when calculating quantities to supply. A variety of dose expressions are used in the assessment.
- Check the units of the answer and ensure the answer is practical and realistic.
- Apply underpinning knowledge to determine when and how to round during calculations. Where required, specific instructions for rounding the final answer will be provided within the question, for example, 'give your answer to one decimal place'.

Part 2 insights

Table 2: Insights from Part 2 clinical therapeutic areas

Therapeutic area	Comments
Cardiovascular	Advise on the appropriate use of antiplatelet, anticoagulant and lipid-modifying therapy in managing cardiovascular conditions.
Infection	Differentiate between an allergy and an adverse drug reaction when advising on the selection of antimicrobial treatment.

Therapeutic area	Comments
	• Apply the principles of antimicrobial stewardship when managing patients presenting with infection. • Advise on antimicrobial selection for different patient populations and presentations.
Respiratory	• Understand how to treat acute and chronic presentations of common respiratory conditions (e.g. asthma and COPD). • Advise on the appropriate initiation and adjustment of pharmacological treatment. • Be familiar with the different classes of inhaled and systemic treatment, and their role in management.
Endocrine	• Advise on the treatment of menopausal symptoms, considering the patient's comorbidities and concomitant medication.
Obstetrics, gynaecology and genito-urinary	• Advise on the suitability of different methods of contraception, considering medical eligibility.

Table 3: Insights on Part 2 law, governance and regulation

Questions will assess the knowledge and application of the principles of law, governance, and regulation, including how you make safe and effective decisions in line with UK pharmacy legislation, professional standards, and regulatory frameworks.

Topic	Comments
Controlled drugs	• Apply underpinning knowledge of pharmacy legislation and best professional practice to the prescribing, storage, supply, disposal and record keeping of controlled drugs.
Medication supply	• Apply underpinning knowledge of pharmacy legislation and best professional practice when assessing requests for an emergency supply.

Additional comments

- Advise on the safe use of medicines in pregnancy and breast feeding, including the treatment of common conditions that present in the pharmacy.
- Provide suitable advice on the management of menstrual, reproductive and menopausal care.
- Advise on the appropriate use of medicines during acute periods of illness.
- Advise on the supply and use of medicines in end of life care.
- Identify clinically significant interactions, including the underlying pharmacodynamic or pharmacokinetic mechanisms and take action to protect patients from avoidable harm.