General Pharmaceutical Council

Registered pharmacy inspection report

Pharmacy name: Rowlands Pharmacy

Address: 3a Lakeland Court, Wood Street, Middleton, MANCHESTER,

Greater Manchester, M24 5QJ

Pharmacy reference: 1033687

Type of pharmacy: Community

Date of inspection: 06/03/2025

Pharmacy context and inspection background

This is a community pharmacy situated in a shopping-parade along a main road, serving the local population. Its main activity is dispensing NHS prescriptions for people living locally. The volume of dispensing has increased significantly due to the closure of a nearby pharmacy around eighteen months ago. The pharmacy manages people's repeat prescription medicines, a large number of which it provides in multi-compartment compliance packs. The pharmacy provides other NHS services which includes Pharmacy First, the New Medicine Service (NMS), flu vaccinations, and substance misuse treatments. It has a private in-person weight loss treatment service via a patient group direction (PGD), and it provides a home delivery service.

This was a routine inspection of the pharmacy which focused on the core Standards relating to patient safety. Not all the Standards were inspected on this occasion.

Overall outcome: Standards met

Required Action: None

Follow this link to find out what the inspections possible outcomes mean

Standards that were met with areas for improvement

Standard 1.7

• The pharmacy does not always secure people's private information appropriately. A few prescriptions were left in the consultation room, which could not be secured to prevent unauthorised access.

Standard 2.1

• The pharmacy sometimes allows more than one team member to take planned leave at the same time, which may increase workload pressures unnecessarily.

Standard 3.1

• The dispensary is reasonably well organised, but it lacks workspace for the increased prescription demand. This may lead to the pharmacy team having difficulties preparing prescription medicines efficiently within the existing space.

Standard 4.3

• Team members are able to access the controlled drug (CD) cabinet when the responsible pharmacist (RP) is absent which is a potential security risk. The pharmacy keeps an audit trail of medicine home deliveries, but it does not always obtain the recipient's signature or request proof of their identity for deliveries of CDs. This could make it harder to resolve queries or identify what has happened in the event of a concern.

Principle 1: The governance arrangements safeguard the health, safety and wellbeing of patients and the public

Table 1: Inspection outcomes for standards under principle 1

Standard	Outcome of individual standard	Area for improvement/ Area of good or excellent practice
1.1 - The risks associated with providing pharmacy services are identified and managed	Met	
1.2 - The safety and quality of pharmacy services are regularly reviewed and monitored	Met	
1.3 - Pharmacy services are provided by staff with clearly defined roles and clear lines of accountability	Met	
1.4 - Feedback and concerns about the pharmacy, services and staff can be raised by individuals and organisations, and these are taken into account and action taken where appropriate	Standard not inspected	
1.5 - Appropriate indemnity or insurance arrangements are in place for the pharmacy services provided	Met	
1.6 - All necessary records for the safe provision of pharmacy services are kept and maintained	Met	
1.7 - Information is managed to protect the privacy, dignity and confidentiality of patients and the public who receive pharmacy services	Met	Area for improvement
1.8 - Children and vulnerable adults are safeguarded	Met	

Principle 2: Staff are empowered and competent to safeguard the health, safety and wellbeing of patients and the public

Table 2: Inspection outcomes for standards under principle 2

Standard	Outcome of individual standard	Area for improvement/ Area of good or excellent practice
2.1 - There are enough staff, suitably qualified and skilled, for the safe and effective provision of the pharmacy services provided	Met	Area for improvement
2.2 - Staff have the appropriate skills, qualifications and competence for their role and the tasks they carry out, or are working under the supervision of another person while they are in training	Met	
2.3 - Staff can comply with their own professional and legal obligations and are empowered to exercise their professional judgement in the best interests of patients and the public	Met	
2.4 - There is a culture of openness, honesty and learning	Standard not inspected	
2.5 - Staff are empowered to provide feedback and raise concerns about meeting these standards and other aspects of pharmacy services	Standard not inspected	
2.6 - Incentives or targets do not compromise the health, safety or wellbeing of patients and the public, or the professional judgement of staff	Standard not inspected	

Principle 3: The environment and condition of the premises from which pharmacy services are provided, and any associated premises, safeguard the health, safety and wellbeing of patients and the public

Table 3: Inspection outcomes for standards under principle 3

Standard	Outcome of individual standard	Area for improvement/ Area of good or excellent practice
3.1 - Premises are safe, clean, properly maintained and suitable for the pharmacy services provided	Met	Area for improvement
3.2 - Premises protect the privacy, dignity and confidentiality of patients and the public who receive pharmacy services	Met	
3.3 - Premises are maintained to a level of hygiene appropriate to the pharmacy services provided	Standard not inspected	
3.4 - Premises are secure and safeguarded from unauthorized access	Met	
3.5 - Pharmacy services are provided in an environment that is appropriate for the provision of healthcare	Standard not inspected	

Principle 4: The way in which pharmacy services, including management of medicines and medical devices, are delivered safeguards the health, safety and wellbeing of patients and the public

Table 4: Inspection outcomes for standards under principle 4

Standard	Outcome of individual standard	Area for improvement/ Area of good or excellent practice
4.1 - The pharmacy services provided are accessible to patients and the public	Met	
4.2 - Pharmacy services are managed and delivered safely and effectively	Met	
4.3 - Medicines and medical devices are: obtained from a reputable source; safe and fit for purpose; stored securely; safeguarded from unauthorized access; supplied to the patient safely; and disposed of safely and securely	Met	Area for improvement
4.4 - Concerns are raised when medicines or medical devices are not fit for purpose	Met	

Principle 5: The equipment and facilities used in the provision of pharmacy services safeguard the health, safety and wellbeing of patients and the public

Summary outcome: Standards met

Table 5: Inspection outcomes for standards under principle 5

Standard	Outcome of individual standard	Area for improvement/ Area of good or excellent practice
5.1 - Equipment and facilities needed to provide pharmacy services are readily available	Met	
5.2 - Equipment and facilities are: obtained from a reputable source; safe and fit for purpose; stored securely; safeguarded from unauthorized access; and appropriately maintained	Standard not inspected	
5.3 - Equipment and facilities are used in a way that protects the privacy and dignity of the patients and the public who receive pharmacy services	Standard not inspected	

What do the summary outcomes for each principle mean?

Finding	Meaning
✓ Excellent practice	The pharmacy demonstrates innovation in the way it delivers pharmacy services which benefit the health needs of the local community, as well as performing well against the standards.
✓ Good practice	The pharmacy performs well against most of the standards and can demonstrate positive outcomes for patients from the way it delivers pharmacy services.
✓ Standards met	The pharmacy meets all the standards.
Standards not all met	The pharmacy has not met one or more standards.