General Pharmaceutical Council

Registered pharmacy inspection report

Pharmacy name: Euro Chemist

Address: 16-20 Berry Street, LIVERPOOL, Merseyside, L1 4JF

Pharmacy reference: 1034428

Type of pharmacy: Community

Date of inspection: 21/04/2026

Pharmacy context and inspection background

This pharmacy is located amongst other retail shops, in the city centre of Liverpool. It dispenses NHS prescriptions, private prescriptions and sells over-the-counter medicines. It also provides a range of services including the NHS Pharmacy First service, Pharmacy contraception service (PCS), Discharge medicines service (DMS) and the seasonal flu vaccination service via a patient group direction (PGD). The pharmacy supplies medicines in multi-compartment compliance packs to some people to help them take their medicines at the right time.

This was a full intelligence-led inspection of the pharmacy following information received by the GPhC. The pharmacy was last inspected in July 2019 and all standards were met.

Overall outcome: Standards not all met

Required Action: Improvement Action Plan

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

Standards not met

Standard 1.1

- The pharmacy does not have effective governance procedures in place. Some standard operating procedures are outdated which means they do not reflect the processes the team are working to.

And some of the written procedures are not readily available. This means the pharmacy cannot demonstrate that its governance systems are up to date and consistently support the safe running of the pharmacy.

Standard 1.2

- The pharmacy does not have effective systems to identify and learn from mistakes. Dispensing errors and near miss incidents are not routinely recorded or reviewed, and learning is not consistently shared with members of the team. This means the pharmacy cannot demonstrate that it is effectively identifying risks and taking action to help prevent similar mistakes in the future.

Standard 1.6

- The pharmacy does not maintain the records it needs to in line with requirements. Records for the responsible pharmacist are incomplete, records for private prescriptions are not always accurate, and records for unlicensed medicines are not readily available. In addition, some records for higher-risk medicines are incomplete and stock balances are not routinely checked, which has led to discrepancies. This means the pharmacy may not be able to appropriately respond to any concerns or queries regarding the services it provides.

Standard 4.3

- The pharmacy does not consistently manage medicines safely in line with its procedures. It does not have an effective date checking system, fridge temperature monitoring is not routinely completed, and no action is taken when temperatures are outside the required range. Higher-risk medicines are not always stored securely and returned medicines are not always separated and clearly managed. This means the pharmacy cannot demonstrate that the medicines it supplies are always safe and appropriate for people to use.

Standards that were met with areas for improvement

Standard 2.2

- The pharmacy has team members who are appropriately trained or on suitable training programmes. However, there are no clear examples of ongoing training. This reduces assurance that staff are consistently supported to maintain the knowledge and skills required for their roles.

Standard 4.2

- The pharmacy does not routinely highlight high-risk medicines to prompt counselling and does not routinely provide advice to people when these medicines are supplied. It also does not keep records when counselling advice is provided. This reduces assurance that people consistently receive appropriate advice about their medicines and that there is continuity of care.

Standard 4.4

- The pharmacy receives drug safety alerts. However, it does not consistently keep records of the actions taken in response to these alerts. This reduces assurance that the pharmacy can demonstrate how it has responded to safety information about medicines.

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

Summary outcome: Standards not all met

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	**Not met**	
1.2 - The safety and quality of pharmacy services are regularly reviewed and monitored	**Not 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	Met	
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	**Not met**	
1.7 - Information is managed to protect the privacy, dignity and confidentiality of patients and the public who receive pharmacy services	Met	
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

Summary outcome: Standards met

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	
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	**Area For Improvement**
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	Met	
2.5 - Staff are empowered to provide feedback and raise concerns about meeting these standards and other aspects of pharmacy services	Met	
2.6 - Incentives or targets do not compromise the health, safety or wellbeing of patients and the public, or the professional judgement of staff	Met	

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

Summary outcome: Standards met

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	
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	Met	
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	Met	

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

Summary outcome: Standards not all met

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	**Area For Improvement**
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	**Not met**	
4.4 - Concerns are raised when medicines or medical devices are not fit for purpose	Met	**Area For Improvement**

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	Met	
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	Met	

What do the summary outcomes for each principle mean?

Finding	Meaning
✔ 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.