

Registered pharmacy inspection report

Pharmacy name: Osbon Pharmacy

Address: 7 Trident House, Clare Road, Stanwell, STAINES, Middlesex, TW19 7QU

Pharmacy reference: 1035130

Type of pharmacy: Community

Date of inspection: 22/10/2025

Pharmacy context and inspection background

This pharmacy is set on a small parade of shops in a residential area of Stanwell. The pharmacy opens six days a week. It dispenses people's prescriptions, sells over-the-counter medicines and offers health advice. And it provides additional NHS services and a private prescribing service for weight-loss treatments and Vitamin B12 injections.

This was a full inspection of the pharmacy. The pharmacy was last inspected in June 2016.

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 hasn't adequately identified and managed the risks associated with its hub-and-spoke dispensing model and its private prescribing service. The pharmacy doesn't have written procedures for its hub-and-spoke dispensing model or its private prescribing service, or some of the other services it provides. And it hasn't reviewed the written procedures it does have for

quite some time. The pharmacy doesn't have prescribing policies for each of the conditions covered by its prescribing service. And there is no clear indication or evidence that health information provided by people during the consultation process is independently verified. This raises concerns about the clinical appropriateness and safety of the service.

Standard 1.6

- The pharmacy doesn't keep adequate consultation records relating to its pharmacist prescribing service and these lack important details. This raises concerns about the robustness of clinical governance and the ability to review or justify prescribing decisions effectively. The pharmacy doesn't always keep accurate records of who has prescribed some of the medicines it dispenses on private prescriptions. And it sometimes doesn't complete all of the supplier's details and the headings in its controlled drugs register.

Standard 4.2

- The pharmacy is unable to demonstrate that its prescribing service operates in a safe and effective manner. It cannot provide evidence that it checks the identity or health information of individuals accessing the service, nor that it routinely informs patients' GPs or implements appropriate systems for monitoring, follow-up, or safety netting. Additionally, there is a lack of procedures to demonstrate effective antimicrobial stewardship and safeguard against the inappropriate use of antibiotics. The pharmacy's multi-compartment compliance pack service isn't adequately managed. And multi-compartment compliance packs are often assembled in advance of the prescription. This increases the risk of errors or supplies being made unlawfully. The pharmacy doesn't routinely supply packaging leaflets with multi-compartment compliance packs. This means people may not have all the information they need to take their medicines safely.

Standard 4.3

- The pharmacy cannot show that all its medicines it needs to keep in a refrigerator have been stored at the right temperature.

Standards that were met with areas for improvement

Standard 1.2

- The pharmacy usually keeps a log of the mistakes its team makes. But it doesn't always review this to spot patterns or trends. This means team members may sometimes miss opportunities to learn from their mistakes.

Standard 1.7

- People usually need to walk through the dispensary to access one of the pharmacy's consulting rooms. And in doing so they sometimes go past other people's prescriptions. This means there's a risk they could see someone else's confidential information.

Standard 4.4

- The pharmacy acts upon the drug alerts it receives, but it doesn't keep a clear record of what it

has done, and when. This makes it harder for the pharmacy to show what action it had taken if a query about one of the affected medicines should arise in the future.

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	Met	Area for improvement
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	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

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	
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	Not 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	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
✓ 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.