General Pharmaceutical Council

# Registered pharmacy inspection report

# Pharmacy name: The Clock Pharmacy

## Address: 1 Gayton Road, Gaywood, KING'S LYNN, Norfolk, PE30 4EA

## Pharmacy reference: 1035269

## Type of pharmacy: Community

## Date of inspection: 02/06/2026

### Pharmacy context and inspection background

This community pharmacy is located in the town of Kings Lynn in Norfolk. It provides a variety of services including dispensing of NHS and private prescriptions, the sale of Pharmacy only (P) medicines, the New Medicines Services (NMS) and the Pharmacy First service under Patient Group Directions (PGDs). It also provides medicines in multi-compartment compliance packs for people who need additional support taking their medicines.

This was a full inspection of the pharmacy. The pharmacy was previously inspected in September 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 1.2

- The pharmacy team does not record near misses (mistakes that occur before a medicine leaves the pharmacy). And the team members are not completely sure how or if dispensing errors (mistakes spotted after a medicine has left the pharmacy) are recorded. So, team the pharmacy

cannot show how it learns from things that go wrong.

### Standard 1.6

- The pharmacy keeps running balances for certain medicines which require additional records. But it does not investigate discrepancies found between the running balance and the quantity in stock in a timely way. And the pharmacy cannot demonstrate that it records entries within the required timeframe. This means that the pharmacy is less able to promptly identify if any mistakes have been made or any stock has been lost.

### Standard 1.7

- The pharmacy stores some checked medicines awaiting collection with people's details on them in an area of the dispensary near the entrance to the consultation room where team members have conversations with people. So, there is a risk of people's confidential information being exposed.

### Standard 4.3

- The pharmacy stores pharmacy only (P) medicines including high risk P medicines in the shop floor area in clear boxes areas where there is a risk of unauthorised access and/or theft. And the team is not aware of any risk assessments having been completed for this. So, the pharmacy cannot demonstrate that it stores P medicines safely or appropriately.

## Standards that were met with areas for improvement

### Standard 1.1

- The pharmacy has standard operating procedures (SOPs) and team members are familiar with them. But most of the SOPs are long overdue a review, which could mean that they do not reflect current best practice. Additionally, there is not a procedure to inform staff what to do if the Responsible Pharmacist is absent and the pharmacy also has procedures for services it no longer offers. This may make it harder for staff to know what procedure they should follow.

### Standard 2.4

- Pharmacy team members have completed or are in the process of completing the required training for their roles. However, there is no evidence that any ongoing training or learning routinely takes place at the pharmacy. So, team members may be missing out on important opportunities to learn about any new medicines, services or changes the pharmacy is introducing.

### Standard 3.1

- The pharmacy has enough space for the team to work in. But some areas of the pharmacy including parts of the floor and desktop areas are cluttered which could increase the risk of team members tripping and injuring themselves and prescriptions or medicines getting mixed up leading to dispensing mistakes.

### Standard 4.2

- The pharmacy supplies multicompartment packs to people which include the dose and a description of the medicines inside. But packs do not have the required warning information and the pharmacy does not routinely supply the patient information leaflets (PILs) with the packs. So, people could be missing out on important information about their medicines.

### Standard 4.4

- The pharmacy receives safety alerts and recalls of medicines and medical devices and it actions them appropriately. But action taken for alerts is not recorded and alerts are not archived after actioning. So, the pharmacy team may not always be sure what action was taken for a safety alerts or recall.

## 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 | Met | **Area For Improvement** |
| 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 | **Not 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 | |
| 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 | **Area For Improvement** |
| 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 | **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 | 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. |