### General Pharmaceutical Council

### Registered pharmacy inspection report

### **Pharmacy name: Wellbeing Pharmacy**

Address: 29 Noble Close, Heartsease, NORWICH, Norfolk, NR7 9RJ

Pharmacy reference: 1035339

Type of pharmacy: Community

Date of inspection: 22/09/2025

#### Pharmacy context and inspection background

This community pharmacy is located in a residential area in the city of Norwich in Norfolk. It provides a variety of services including dispensing of NHS and private prescriptions, the New Medicines Service (NMS) and the Pharmacy First service under Patient Group Directions (PGDs). It also provides medicines in multi-compartment compliance packs to people who need extra support taking their medicines. The pharmacy was taken over by the new owners in June 2025.

This was a full routine inspection of the pharmacy The pharmacy was previously inspected in October 2015.

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 1.8

• The pharmacy team members do not demonstrate an appropriate knowledge of safeguarding and do not know what to do if a vulnerable person presents in the pharmacy. So, team members may miss opportunities to support vulnerable people.

#### Standard 2.2

Pharmacy team members have not completed the appropriate training for their roles with an
accredited training provider. One team member has not been enrolled on a course and has been
working for the pharmacy for over three months. And another team member started training and
subsequently paused this and has not been restarted on a training course. So, team members
may not have the required knowledge and skills to work safely and efficiently in the pharmacy.

#### Standard 2.4

• 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 4.4

• The pharmacy cannot demonstrate that it is able to appropriately receive and action safety alerts and recalls of medicines and medical devices. During the inspection, the team could not provide any evidence to show that alerts were being received in the pharmacy and team members did not know how to action safety alerts and recalls. So, there is a risk that safety alerts and recalls are not being actioned appropriately or in a timely manner. This increases the risk that people receive a medicine or medical device that is not fit for purpose.

#### Standards that were met with areas for improvement

#### Standard 1.2

Some team members are not fully aware of the process in the pharmacy to report dispensing
errors (dispensing mistakes that are spotted after a medicine leaves the pharmacy). So, errors
may not be reported in the correct way and opportunities for learning may be missed. However,
the team reports that it has not had a dispensing error since the ownership of the pharmacy
changed and near misses (dispensing mistakes that are spotted before a medicine leaves the
pharmacy) are routinely being recorded as well as learning points identified.

#### Standard 1.4

• Some pharmacy team members are not fully aware of the pharmacy's process for dealing with complaints. So, there is a risk that complaints are not dealt with appropriately. However, team members did explain that any complaints they received would be escalated to the area manager.

#### Standard 3.2

• The pharmacy has a consultation room for people to have private conversations. However, the room is somewhat cluttered and messy which does detract from the overall look of the pharmacy. And some unsecured items are stored in the room, but these are not easily visible and are located away from the patient consultation area. The team confirmed that no one is ever left alone in the room and the room can be locked when not in use. The room is also well lit and private.

#### Standard 4.1

The incorrect opening times for the pharmacy are listed online and some online services still list
the pharmacy under its previous trading name. The current owner's own website also does not
list the pharmacy as one of its branches. So, this could cause confusion for people trying to find
and access the pharmacy. However, the pharmacy is clearly recognisable as being under the
current ownership from the outside and the correct opening times are listed on the entrance
door.

#### Standard 4.2

- The pharmacy team dispenses valproate medicines in multi-compartment compliance packs for a small number of people. Although the pharmacy does not have any people who are in the at-risk group, team members are not aware of the guidelines for supplying this medicine in its original pack. And team members are not sure whether individual risk assessments have been done for people receiving this medicine in their packs.
- The pharmacy does not routinely supply the patient information leaflets (PILs) with multi-compartment compliance packs. So, people could be missing out on important information about their medicines. The pharmacy has given assurances that all packs will be supplied with PILs going forward.

## 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	
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	Area for improvement
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	
1.8 - Children and vulnerable adults are safeguarded	Not met	

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

Summary outcome: Standards not all 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	Not 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	Not 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	Area for improvement
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	Area for improvement
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	Met	
4.4 - Concerns are raised when medicines or medical devices are not fit for purpose	Not 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	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
<b>✓</b> 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.