

# Registered pharmacy inspection report

## Pharmacy name: Lafford Chemist

**Address:** 6/7/8 The Broadway, Plough Lane, Beddington, CROYDON, Surrey, CR0 4QR

**Pharmacy reference:** 1036516

**Type of pharmacy:** Community

**Date of inspection:** 21/10/2025

### Pharmacy context and inspection background

This pharmacy is set on a row of shops in Beddington. The pharmacy opens five days a week. It dispenses people's prescriptions, sells over-the-counter medicines and offers health advice. And it provides some other NHS services too.

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

**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 1.1

- The pharmacy has a range of written procedures that provide its team with information to perform tasks supporting the delivery of its services. And team members can demonstrate the procedures they follow. However, the procedures haven't been reviewed for some time so may contain out-of-date information. And some pharmacy team members haven't signed the procedures to show they have read and understood them and agreed to follow them.

## Standard 1.2

- The pharmacy team members discuss dispensing mistakes when these are identified. But they don't always record them. So, it may be harder for them to review them to spot any patterns and take action to help stop the same sort of things happening again.

## Standard 1.6

- The pharmacy largely keeps the records it needs to by law. But it 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. These things could make it harder for its team to respond to a query.

## Standard 4.3

- Some medicines are removed from their manufacturer's original packaging and put into containers which aren't labelled properly. This could be problematic in the event of a drug safety alert or recall.

## Standard 4.4

- The pharmacy receives drug safety alerts and recalls. But it doesn't keep records to show that these have been actioned. This makes it harder for the pharmacy to demonstrate it has taken appropriate action in response to them.

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

Summary outcome: **Standards 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	<b>Area for improvement</b>
1.2 - The safety and quality of pharmacy services are regularly reviewed and monitored	Met	<b>Area for improvement</b>
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	Met	<b>Area for improvement</b>
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	
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 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	
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	<b>Area for improvement</b>
4.4 - Concerns are raised when medicines or medical devices are not fit for purpose	Met	<b>Area for improvement</b>

## 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>Excellent practice</b>	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.
✓ <b>Good practice</b>	The pharmacy performs well against most of the standards and can demonstrate positive outcomes for patients from the way it delivers pharmacy services.
✓ <b>Standards met</b>	The pharmacy meets all the standards.
<b>Standards not all met</b>	The pharmacy has not met one or more standards.