

Registered pharmacy inspection report

Pharmacy name: Jhoots Pharmacy

Address: 31-33 Wheelgate, MALTON, North Yorkshire, YO17 7HT

Pharmacy reference: 1038956

Type of pharmacy: Community

Date of inspection: 30/01/2025

Pharmacy context and inspection background

The pharmacy is in a parade of shops on a high street in Malton town centre. Pharmacy team members dispense NHS prescriptions and sell a range of over-the-counter medicines. The current owners commenced operation of the pharmacy in May 2024.

This was a reinspection of the pharmacy following an inspection in October 2024 where the pharmacy was found to be not meeting standards 1.1, 1.2, 1.6, 1.7, 2.2 and 2.5. This inspection focussed on those standards which had previously not been met. The pharmacy had not improved on any of the standards focussed on, and they remain unmet. A statutory enforcement improvement notice has been served on the pharmacy.

Overall outcome: Standards not all met

Required Action: Statutory Enforcement

Follow this link to [find out what the inspections possible outcomes mean](#)

Standards not met

Standard 1.1

- The pharmacy has failed to address the risks identified in the last inspection in the form of unmet standards. So, these risks to patient safety are ongoing. Staff do not have access to standard

operating procedures and do not know how to perform key tasks. This includes for activities such as near miss and error management and disposal of confidential waste. In addition, the pharmacy has experienced a time where, due to no responsible pharmacist, it has been unable to open to provide services. Pharmacy team members have little knowledge of the pharmacy's business continuity arrangements. And the pharmacy has not adequately mitigated the risk of people being unable to appropriately access their medicines when they need them.

Standard 1.2

- Pharmacy team members do not have adequate arrangements to record and learn from errors. They do not know how to report dispensing errors to the right people. They do not analyse their mistakes. And they do not make changes to their practices to help make the pharmacy's services safer.

Standard 1.6

- The responsible pharmacist record held in the pharmacy is not an accurate and contemporaneous record of the responsible pharmacist working on any given date.

Standard 1.7

- The pharmacy does not have a suitable system in place to destroy confidential waste. Its confidential waste is held in the pharmacy and team members do not know how to dispose of it safely. There is no shredder or confidential waste collection organised. This increases the risk of it accumulating and being disposed of inappropriately.

Standard 2.2

- The pharmacy has not enrolled its pharmacy team member on appropriate training for their role, in accordance with GPhC minimum training requirements. And it has not provided an induction programme for them to learn in their role properly. This has not been rectified since the last inspection.

Standard 2.5

- The pharmacy fails to support its team members when they raise legitimate requests and concerns. This includes repeated requests to access standard operating procedures and support to implement the required actions from the GPhC's improvement action plan.

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 | Standard not inspected | |
| 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 | Standard not inspected | |
| 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 | Standard not inspected | |

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 | Standard not inspected | |
| 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 | Standard not inspected | |
| 2.4 - There is a culture of openness, honesty and learning | Standard not inspected | |
| 2.5 - Staff are empowered to provide feedback and raise concerns about meeting these standards and other aspects of pharmacy services | Not 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 | Standard not inspected | |

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: Not assessed

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 | Standard not inspected | |
| 3.2 - Premises protect the privacy, dignity and confidentiality of patients and the public who receive pharmacy services | Standard not inspected | |
| 3.3 - Premises are maintained to a level of hygiene appropriate to the pharmacy services provided | Standard not inspected | |
| 3.4 - Premises are secure and safeguarded from unauthorized access | Standard not inspected | |
| 3.5 - Pharmacy services are provided in an environment that is appropriate for the provision of healthcare | Standard not inspected | |

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: Not assessed

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 | Standard not inspected | |
| 4.2 - Pharmacy services are managed and delivered safely and effectively | Standard not inspected | |
| 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 | Standard not inspected | |
| 4.4 - Concerns are raised when medicines or medical devices are not fit for purpose | Standard not inspected | |

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: Not assessed

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 | Standard not inspected | |
| 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 | Standard not inspected | |
| 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 | Standard not inspected | |

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. |