General Pharmaceutical Council

Registered pharmacy inspection report

Pharmacy name: Leeds Pharmacy

Address: 203 Kirkstall Lane, Headingley, LEEDS, West Yorkshire, LS6 3EJ

Pharmacy reference: 1039754

Type of pharmacy: Community

Date of inspection: 10/08/2026

Pharmacy context and inspection background

This community pharmacy is in the large Leeds suburb of Headingley. The pharmacy's main activities are dispensing NHS prescriptions and selling over-the-counter medicines. It supplies multi-compartment compliance packs to help many people take their medicines. The pharmacy provides other NHS services including Pharmacy First, oral contraception and the hypertension case finding service. The pharmacy also offers a private weight-loss service.

This was a routine inspection of the pharmacy which focused on the core Standards relating to patient safety. Not all the Standards were inspected on this occasion. The pharmacy was last inspected in September 2016 and changed ownership in April 2024.

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 2.2

- The pharmacy delivers medicines to several people's homes, and it provides some training to its team members undertaking this service. But it hasn't enrolled these team members on

accredited training as required. This means they may not appropriately trained for the activities they perform.

Standard 4.2

- The pharmacy supplies many people with their medication in multi-compartment compliance packs but it does not label these packs in accordance with legal requirements. The labelling of these packs does not include the pharmacy's name and address, the date of dispensing, the precise directions for use of the medicine and precautions relating to the use of the medicine.

Standard 4.3

- The pharmacy does not always store and manage its medicines appropriately. It transfers medicines from original packs into alternate packaging without regard for batch numbers and expiry dates. It does not consistently record the date of opening of medicines with limited use once opened. And it does not routinely keep fridge temperature records. This means team members cannot be sure all medicines are suitable to use.

Standards that were met with areas for improvement

Standard 1.6

- The pharmacy generally keeps its legal records correct and accurate. However, it does not maintain a complete responsible pharmacist record as not all the pharmacists consistently make a record to show the days and times they are the responsible pharmacist.

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	
1.2 - The safety and quality of pharmacy services are regularly reviewed and monitored	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	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	Met	**Area For Improvement**
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 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	Standard not inspected	
2.5 - Staff are empowered to provide feedback and raise concerns about meeting these standards and other aspects of pharmacy services	Standard not inspected	
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: 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	Standard not inspected	
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	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: 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	

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	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
✔ 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.