

Registered pharmacy inspection report

Pharmacy name: Lodge Moor Pharmacy

Address: 66 Rochester Road, SHEFFIELD, South Yorkshire, S10 4JQ

Pharmacy reference: 1086125

Type of pharmacy: Community

Date of inspection: 21/04/2026

Pharmacy context and inspection background

This community pharmacy is in a parade of shops in a residential suburb of Sheffield, South Yorkshire. It changed ownership in July 2025. Its main services are dispensing NHS prescriptions, selling over-the-counter medicines, and providing advice to people. It also provides NHS consultation services including the New Medicine Service (NMS) and the Pharmacy First Service. The pharmacy supplies some medicines in multi-compartment compliance packs, designed to help people remember to take their medicines. And it offers a medicine delivery service.

This was a full routine inspection of the pharmacy. The pharmacy was last inspected in April 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 1.1

- The pharmacy does not manage all the risks for providing its services. Written procedures available to its team members do not include core information about the responsible

pharmacist's (RPs) role or the arrangements in place for the dispensing and general management of controlled drugs. This creates a risk of team members not working in accordance with regulatory requirements.

Standard 1.6

- The pharmacy does not keep some of its records in accordance with requirements. Its RP record contains inaccurate information about when a RP has been in charge of the pharmacy. And its team members do not make accurate records of the prescriber's details when entering the supply of private prescriptions into its Prescription Only Medicine register.

Standard 4.3

- The pharmacy does not have effective processes to ensure all medicines are safe to supply. It holds medicines outside of the manufacturer's original packaging and without the appropriate safety information included on the temporary packaging. Its fridge is over capacity, and some medicines may be vulnerable to damage due to being in contact with the walls of the fridge. And the batch number and expiry date of medicines it assembles into multi-compartment compliance packs are not always available to pharmacists completing the final accuracy check of these packs. This means the pharmacy may supply medicines which are not suitable for people.

Standard 4.4

- The pharmacy does not have appropriate arrangements to ensure it receives notification and acts on of all medicine recalls and patient safety alerts. There are no assurances that it is carrying out appropriate checks when concerns about the safety of a medicine are raised.

Standards that were met with areas for improvement

Standard 1.2

- Pharmacy team members regularly share learning following the mistakes they identify and correct during the dispensing process. But they do not always take the opportunity to record these mistakes. This means it may be more difficult to identify trends in mistakes and to act to reduce risk.

Standard 2.2

- The pharmacy does not always independently check the qualifications of new team members to ensure they have the right skills and knowledge for the role they are employed for. This has resulted in delays in enrolling a team member on a GPhC accredited training course to support them in working in their role.

Standard 3.1

- The pharmacy's website is professional in appearance and provides helpful information for people visiting the pharmacy. But details of the superintendent pharmacist advertised on the website are inaccurate and may cause confusion for people.

Standard 4.1

- The pharmacy's services are generally accessible to people. Physical access into the pharmacy is by some steps, and a doorbell facility to support people who require assistance with access has been removed. This may make it more difficult for people unable to use steps, such as those using a wheelchair, to access the pharmacy.

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	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	
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	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	Area For Improvement
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	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	Area For Improvement
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	Not 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
✓ 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.