

Registered pharmacy inspection report

Pharmacy name: H.A. Crook Pharmacy

Address: 23-25 Chester Road East, Shotton, Flintshire, DEESIDE, Clwyd, CH5 1QA

Pharmacy reference: 1087168

Type of pharmacy: Community

Date of inspection: 19/08/2026

Pharmacy context and inspection background

This pharmacy is situated next to a GP surgery in the residential area of Shotton, Flintshire. It dispenses NHS prescriptions, private prescriptions and sells over-the-counter medicines. It also provides a range of services including NHS Wales Common Ailments Service (CAS), Discharge Medicines Review (DMR), Emergency Medicines Supply (EMS), Pharmacist Independent Prescribers Service (PIPS) and a private weight loss service via a patient group direction (PGD). The pharmacy supplies medicines in multi-compartment compliance packs to some people to help them take their medicines at the right time.

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

Overall outcome: Standards met

Required Action: Not Required

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

Standards that were met with areas for improvement

Standard 1.2

- The pharmacy records dispensing errors, but it does not consistently document investigations and learning from these errors. This reduces assurance that the safety and quality of services are routinely reviewed and that effective actions are taken to prevent recurrence.

Standard 1.6

- The pharmacy keeps the records it needs to by law. But team members do not always complete the private prescription record fully. For example, some entries do not include complete and accurate prescriber details. This reduces assurance that the pharmacy's records are complete and accurate if they are needed to respond to queries, concerns or incidents.

Standard 1.7

- The pharmacy does not always store confidential paper records securely. This increases the risk of unauthorised access to sensitive information and reduces assurance that privacy and confidentiality are consistently protected.

Standard 4.3

- The pharmacy supplies some people with medicines in multi-compartment compliance packs. But it does not always provide them with patient information leaflets or medicine descriptions. This means people may not always have the information they need to help them understand how to take their medicines safely. The pharmacy's records also do not always show who has dispensed and checked the packs. This reduces assurance that the dispensing process can be appropriately audited.

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	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	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	Area For Improvement
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	Area For Improvement
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	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.