

# Registered pharmacy inspection report

## Pharmacy name: George Wilson

**Address:** Pemberton Health Centre Pharmacy, Sherwood Drive, Pemberton, WIGAN, Lancashire, WN5 9QX

**Pharmacy reference:** 1087472

**Type of pharmacy:** Community

**Date of inspection:** 18/03/2025

### Pharmacy context and inspection background

This community pharmacy is situated in a health centre. It is located in the residential area of Pemberton, Wigan. The pharmacy dispenses NHS prescriptions, private prescriptions and sells over-the-counter medicines. It also provides a range of services including seasonal flu and COVID vaccinations, and the NHS Pharmacy First service. The pharmacy supplies some people with medicines in multi-compartment compliance packs to help them take their medicines at the right time.

This was a full intelligence-led inspection of the pharmacy following information received by the GPhC. The pharmacy was last inspected in May 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 4.3

- The pharmacy uses electronic data loggers to monitor the temperature of the fridges that is uses to store cold chain medicines. But its team members had not identified a fault with the data

logger which meant the temperatures had not been recorded for at least three months. The pharmacy had purchased a new additional fridge but the team had not installed a data logger or kept a record to show temperatures were being checked. So the team are unable to demonstrate that these medicines have been stored under correct conditions and remain safe to use.

- The pharmacy has a date checking process in place. But team members are unable to locate the records to demonstrate checks are completed. The pharmacy team had fallen behind with checking the expiry dates of stock medicines and a small number of medicines on the dispensary shelves were found to be out of date. So there is a risk of expired medicines being supplied.

#### **Standard 4.4**

- The pharmacy's superintendent receives drug alerts by email and shares the details with members of the team. But in their absence, there is no delegated person to take responsibility of ensuring these are checked and actioned. And members of the team could not locate the records to show what action they had previously taken. So the pharmacy is not able to show it has sufficient processes in place to respond to urgent drug recalls and safety alerts.

### **Standards that were met with areas for improvement**

#### **Standard 1.2**

- The pharmacy has a process available to record and monitor its services. And the pharmacist discusses mistakes that are identified during the dispensing process. But members of the pharmacy team do not keep records of their mistake to enable a review or record details about the action they had taken. So they may not be able to always identify underlying trends, or show what improvements they are making to their services.

#### **Standard 1.7**

- The pharmacy has multiple information governance policies. But members of the team are not able to identify which is the current policy or show it had been read and understood. This means the pharmacy may not be able to demonstrate the team fully understand their roles and responsibilities in protecting people's information.

#### **Standard 4.2**

- The pharmacy team speak to people who use their services, particularly when they are starting a new medicine or take a higher risk medicine. But they do not record the counselling advice they provide. This would help with continuity of care and allow for information to be available during clinical reviews.

## 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	<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	
1.7 - Information is managed to protect the privacy, dignity and confidentiality of patients and the public who receive pharmacy services	Met	<b>Area for improvement</b>
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 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	Met	<b>Area for improvement</b>
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	<b>Not met</b>	
4.4 - Concerns are raised when medicines or medical devices are not fit for purpose	<b>Not met</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.