

Registered pharmacy inspection report

Pharmacy name: Lochview Pharm Ltd

Address: Main Road, DALMALLY, Argyll, PA33 1AX

Pharmacy reference: 1089111

Type of pharmacy: Community

Date of inspection: 09/09/2025

Pharmacy context and inspection background

This is a community pharmacy in the village of Dalmally, Argyll. Its main activity is dispensing NHS prescriptions. And it provides medicines in multi-compartment compliance packs to help people take their medicines at the right times. The pharmacist provides the NHS Pharmacy First service and team members offer advice on minor ailments and medicines' use. The pharmacy works with a third-party prescribing service to supply higher-risk medicines to people via private prescriptions. And it delivers these medicines via a national courier service.

This was a full intelligence-led inspection of the pharmacy following information received by the GPhC. The pharmacy was last inspected in February 2019.

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 has some written procedures to support team members in their roles. But team members have not signed to show they have read and understood them. And there is no record

of review by the current Superintendent Pharmacist. The pharmacy does not identify and manage all the risks for the private services it provides. For example, there are no documented risk assessments or procedures for working with third-party prescribing services to ensure the prescriptions they receive are appropriate and safe to supply to people.

Standard 1.2

- The pharmacy does not audit or review the private dispensing services it provides. It cannot show that its policies and procedures are effective at keeping services safe. It holds some records of interventions on the timeliness of supplies. But there are no ongoing checks to ensure prescribers continue to be eligible to prescribe. And there are no scheduled audits to identify prescribing trends, or check that prescribing decisions follow national guidelines. So, the pharmacy is unable to show how it continually monitors and improves the safety and quality of its services.
- Team members do not consistently record or review mistakes identified during the dispensing process. So, team members may miss opportunities to learn from things that go wrong.

Standard 4.2

- The pharmacy cannot demonstrate it always provides services safely. It doesn't always have all the information required for the pharmacist to adequately complete the clinical check on prescriptions received from the private third-party prescribing service. Team members working in the pharmacy do not have access to delivery records to check medication is successfully delivered. And there are no verification checks at the point of delivery to ensure it is received by the correct person. The pharmacy has delivered some medicines that required cold storage previously, but it did not perform testing on the packaging to ensure it maintained the appropriate temperature and that medicines remained safe to use.

Standard 4.3

- The pharmacy maintained records of fridge temperatures. But records showed the fridge was operating out with the recommended limits of between 2 and 8 degrees Celsius. So, it cannot be sure medicines requiring refrigeration are safe to use.

Standards that were met with areas for improvement

Standard 1.6

- The pharmacy maintained a Responsible Pharmacist record but it was not always complete with times of when the pharmacist ceased duties at the end of the working day as required by law.

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	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	
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	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	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
✓ 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.