

Registered pharmacy inspection report

Pharmacy name: Mossspark Pharmacy

Address: 190 Mossspark Drive, GLASGOW, Lanarkshire, G52 1JS

Pharmacy reference: 1090494

Type of pharmacy: Community

Date of inspection: 20/05/2025

Pharmacy context and inspection background

This is a community pharmacy located in a residential area in Mossspark, Glasgow. 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 is an independent prescriber and provides a private weight management service one day per week. Team members provide advice on medicines use and minor ailments. The pharmacy provides aesthetics products, botulinum toxins and injectable medicines for weight loss against private prescriptions. It does not supply these products directly to people but supplies them directly to practitioners via collection in person or delivery.

This was a full routine inspection of the pharmacy. The pharmacy was last inspected in May 2015.

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 identify and manage all the risks for the services it provides. It has a basic documented written procedure for handling aesthetics prescriptions. But this does not address all aspects of the service, including higher-risk medicines such as injectable weight loss medicines and botulinum toxins. For example, it does not consider what additional information may be required to support the clinical check, such as using people's body mass index (BMI) to ensure weight loss injections are appropriate to supply. And what checks team member should make to ensure face-to-face consultations happen with prescribers for botulinum toxins.

Standard 1.2

- The pharmacy does not routinely audit or review the services it provides to ensure its processes are effective at keeping services safe. For example, it doesn't complete clinical audits of supplies to ensure they are appropriate and made in an appropriate timeframe. It doesn't have a process to monitor prescribers to show they continue to be eligible and safe to prescribe. And it doesn't carry out appropriate monitoring on the delivery of medicines that require temperature control. It does not have robust processes in place to identify trends and to prompt interventions. So, the pharmacy is unable to show how it continually monitors and improves the quality and safety of its services.

Standard 1.6

- The pharmacy records the details of the private prescriptions it supplies. But it does not always record accurate or complete information about prescribers, such as their name or address. This means the pharmacy does not keep the correct records as required by law.

Standard 4.2

- The pharmacy cannot demonstrate it always delivers its services safely. It does not have robust processes to ensure it always makes the appropriate checks when dispensing medicines. This includes ensuring prescribers have completed a face-to-face consultation to prescribe botulinum toxins. And obtaining the appropriate clinical information to provide injectable weight management medicines. It dispenses medicines against prescriptions without patient-specific directions, such as 'Use as directed by the prescriber'. This makes it difficult to complete an appropriate clinical check of the prescription and people may not be aware how to use their medicines appropriately.
- The pharmacy delivers some prescriptions to people for medicines that required cold storage. But it has not completed the necessary testing to ensure the packaging it uses appropriately maintains the correct temperature for these medicines. So, it cannot be sure these medicines remain suitable to use.

Standards that were met with areas for improvement

Standard 2.2

- Team members have completed some training for the services they provide. But they have not completed specific training about higher-risk aesthetics products that the pharmacy supplies. This may make it difficult to ensure medicines are being prescribed safely or to provide people the appropriate information.

Standard 4.3

- The pharmacy had some records of fridge temperatures. But it did not consistently monitor or record the temperature of the fridge containing higher-risk medicines such as injectable weight loss medicines and botulinum toxins. So, there may be a risk these medicines are not safe to supply.

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	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	
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	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
✓ 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.