

Registered pharmacy inspection report

Pharmacy name: Hobbs Pharmacy

Address: 679 Ripponden Road, OLDHAM, Lancashire, OL1 4JU

Pharmacy reference: 1090941

Type of pharmacy: Community

Date of inspection: 14/01/2025

Pharmacy context and inspection background

This busy community pharmacy is located next to a medical centre. Most people who use the pharmacy are from the local area. The pharmacy dispenses NHS prescriptions, and it sells a range of over-the-counter medicines. And it provides a seasonal flu vaccination service, a Covid-19 vaccination service and some other NHS funded services including the Pharmacy First Service. It supplies some medicines in multi-compartment compliance aid packs to help people take their medicines at the right time.

This was a full inspection of the pharmacy following information received by the GPhC.

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's standard operating procedures (SOPs) are not always available and there is no evidence that the SOPs have been read and accepted by current members of the pharmacy team. So, team members may not always work effectively or fully understand their roles and responsibilities.

Standard 1.2

- The pharmacy cannot demonstrate that records are made when things go wrong and there is no evidence of learning. This could make it harder for the team to review mistakes and identify any patterns or trends so there is a risk that errors might be repeated.

Standard 4.3

- The pharmacy does not store and manage all of its stock medicines appropriately. Dispensary shelves are untidy and some medicines are not stored in their original packaging or in containers with appropriate labelling. The pharmacy cannot provide assurance that the temperature of the medical fridge is appropriately monitored and there isn't a robust date checking procedure for stock. This means the pharmacy cannot always provide assurance that medicines are in a suitable condition to supply. And it does not properly restrict unauthorised access to some medicines.

Standards that were met with areas for improvement

Standard 1.6

- The pharmacy generally completes the records that it needs to by law but the responsible pharmacist (RP) record and some of the private prescription records are incomplete or inaccurate, which could make audit more difficult. And the name of the RP on duty is not always correctly displayed which could cause confusion.

Standard 1.7

- The pharmacy takes steps to keep people's private information safe. But confidential information is stored in the consultation room which is not always kept locked, so there could be a risk of unauthorised access.

Standard 2.2

- Pharmacy team members generally have the right training for their roles, but ongoing training is not regular or structured, which could make it harder for them to keep their knowledge and skills up to date.

Standard 4.1

- The pharmacy is generally accessible, but people cannot get through to the pharmacy easily by telephone which means some people have to make unnecessary visits to the pharmacy to speak to a member of the pharmacy team.

Standard 4.2

- When medicines are supplied in compliance aid packs, the team does not always check and seal the packs promptly after they have been filled. This could increase the risk of error or of the medicines being damaged. And the packs are not always supplied with packaging leaflets, or labelled with appropriate cautionary and advisory labels. This means people may not always have all of the information they need to take their medicines safely.

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 | 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 | 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 | Area for improvement |
| 4.2 - Pharmacy services are managed and delivered safely and effectively | Met | Area for improvement |
| 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. |