### General Pharmaceutical Council

### Registered pharmacy inspection report

### **Pharmacy name: Rainbow Pharmacy**

Address: Langley Road, South Wootton, KING'S LYNN, Norfolk, PE30 3UG

Pharmacy reference: 1090949

**Type of pharmacy: Community** 

Date of inspection: 20/03/2025

#### Pharmacy context and inspection background

This community pharmacy is located in rear of an Asda supermarket the town of Kings Lynn in Norfolk. It provides a variety of services including dispensing of NHS and private prescriptions, the New Medicines Service (NMS) and The Pharmacy First service under Patient Group Direction (PGD). It also provides medicines in multi-compartment compliance packs to people who need extra support taking their medicines.

This was a full inspection of the pharmacy. The pharmacy was previously inspected in October 2017.

Overall outcome: Standards met

Required Action: Improvement Action Plan

Follow this link to find out what the inspections possible outcomes mean

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

#### Standard 1.1

• The pharmacy does not regularly update its standard operating procedures (SOPs). All SOPs seen are overdue a review from 2017. So, team members may not be following the most up to date procedures. The RP provides assurances the SOPs would be updated as a priority and stated shortly after the inspection that this process had begun.

#### Standard 1.2

• The pharmacy does not document near misses (dispensing mistakes that occur before a medicine leaves the pharmacy). So, the team could be missing out on important learning opportunities and trends in near misses occurring in the pharmacy. However, the RP says that any near misses are verbally discussed with the team and that he keeps a mental note of near misses to look for any trends in near misses and has made changes in the pharmacy as a result of this.

#### Standard 1.6

• The pharmacy generally keeps the records it is required to. However, it does not undertake regular audits on its medicines which require secure storage. This is contrary to the pharmacy's own standard operating procedure, and several discrepancies between the recorded balance and quantity of stock kept were found during the inspection. This makes it harder for the pharmacy to show that it can account for these medicines. The pharmacy provided assurances that all the discrepancies found during the inspection would be investigated and any unresolved ones would be reported to the relevant person. The pharmacy sent evidence shortly after the inspection to show than an investigation was underway.

## Principle 1: The governance arrangements safeguard the health, safety and wellbeing of patients and the public

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	Area for improvement
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	
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

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

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

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	
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
<b>✓</b> 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.