General Pharmaceutical Council

Registered pharmacy inspection report

Pharmacy name: Keyworth Pharmacy

Address: 5 The Square, Keyworth, NOTTINGHAM, Nottinghamshire, NG12 5JT

Pharmacy reference: 1093263

Type of pharmacy: Community

Date of inspection: 04/11/2025

Pharmacy context and inspection background

This community pharmacy is amongst other retail businesses and close to a medical centre in the Nottinghamshire town of Keyworth. Its services include dispensing NHS prescriptions and selling over-the-counter medicines. It provides NHS consultation services such as Pharmacy First and the New Medicine Service (NMS). It supplies some medicines in multi-compartment compliance packs, designed to help people remember to take their medicines. And it offers a medicine delivery service. The pharmacy has a private clinic onsite from which it offers a wide variety of services including travel health, ear wax removal, diet and lifestyle consultations including weight management. And a range of holistic and therapy services.

This was a routine inspection of the pharmacy which focused on the core Standards relating to patient safety. Not all the Standards were inspected on this occasion. The pharmacy was last inspected in November 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 has several versions of written procedures describing its dispensing process. The version read by team members does not reflect the current use of specific barcode technology at the pharmacy. And the updated version of procedures is not readily available to the team. This has led to inconsistent ways of working which increases risk.
- The pharmacy has a range of written procedures to support it in managing its private clinic services. But there are no accompanying formal risk assessments to show any due diligence checks on the third-party companies it procures equipment from when introducing novel services. And to show how the pharmacy identifies and manages risk when conducting these services, particularly when some tasks are delegated to team members other than the prescriber.

Standard 1.2

- The pharmacy does not undertake its own audits of the private clinic services it provides to support it in regularly monitoring these services. So, the pharmacy does not have a robust process to check that its private services continue to be delivered appropriately.
- The pharmacy team does not always record mistakes identified and corrected during the dispensing process. This means there are missed opportunities to identify patterns and act to reduce the risk of similar mistakes occurring.

Standard 1.6

- The pharmacy does not make and maintain records as required. Responsible pharmacists do not always complete records to show when they have finished their shift. And team members do not always make a record of all required information when completing the Prescription Only Medicine (POM) Register, including full details of the prescriber and the patient's address. And on occasions an entry in the POM register is missing when medicines are not entered onto the patient medication record appropriately.
- Pharmacists do not always make full and clear records when providing private consultation services to show the checks and ongoing monitoring they apply when providing these services. They do not always follow the pharmacy's written procedure when administering vitamins to people as they do not routinely record product information such as batch numbers and expiry dates within consultation records.
- The prescriber does not consistently document the information discussed during consultations, including the rationale for prescribing decisions. This limits the ability to demonstrate that appropriate checks have been carried out to ensure people understand how to use their medicines safely and know what follow up is required. And the current process for prescribing does not ensure that a legally valid prescription is produced for dispensing.

Standard 4.2

- The pharmacy does not have appropriate safeguards in place when providing its private clinic services. Not all pharmacy professionals have immediate access to its written procedures for these services to refer to. The pharmacy provides prescribing services without producing valid private prescriptions. And there is a lack of visibility of delegated responsibilities for some services, particularly for weight loss services. Furthermore, incomplete consultation records

means pharmacy professionals do not always have the ability to check previous records for people returning for further treatments to ensure continued treatment remains safe.
- Pharmacy team members involved in dispensing medicines using barcode technology do not have clear roles and responsibilities to support them in providing the dispensing services safely and consistently. Some team members do not scan and label each medicine individually as set out within the pharmacy's written procedures. And the pharmacy does not ensure that those completing a manual accuracy check of some medicines have completed suitable learning to support them in completing checks safely. This way of working increases the risk of a mistake occurring during the dispensing process.

Standard 4.3

- The pharmacy does not make frequent checks to ensure all products requiring cold storage are stored at the correct temperature. There are regular missing entries for the fridge temperature records and no record is in place for one of the pharmacy's fridges.
- The pharmacy has inadequate management arrangements for storing some of its medicines as it does not store all stock medicines safely in the manufacturer's original packaging.

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	Standard not inspected	
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	
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	Standard not inspected	
2.5 - Staff are empowered to provide feedback and raise concerns about meeting these standards and other aspects of pharmacy services	Standard not inspected	
2.6 - Incentives or targets do not compromise the health, safety or wellbeing of patients and the public, or the professional judgement of staff	Standard not inspected	

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	Standard not inspected	
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	Standard not inspected	

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	Standard not inspected	
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	Standard not inspected	

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.