### General Pharmaceutical Council

### Registered pharmacy inspection report

### **Pharmacy name: Medichem Pharmacy**

Address: Units 34-35 Woodley Precinct, Woodley, STOCKPORT, Cheshire,

**SK6 1RJ** 

Pharmacy reference: 1107409

Type of pharmacy: Community

Date of inspection: 25/06/2025

### Pharmacy context and inspection background

This extended hours community pharmacy is located in a pedestrianised shopping area surrounded by residential housing. Its main activity is dispensing NHS prescriptions for people living locally, and it manages people's repeat prescriptions. It also provides a large number of people with their medicines in multi-compartment compliance packs. The pharmacy provides other NHS services which includes the New Medicine Service (NMS), COVID-19 and influenza vaccination and Pharmacy First. It offers private services including weight loss treatments, ear wax removal and a home delivery service.

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 September 2020 and all standards were met.

Overall outcome: Standards met

Required Action: None

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

Standards that were met with areas for improvement

Standard 1.2

- The checker usually initials dispensing labels, which helps to clarify who was responsible for each prescription medication they supplied. And this assists with investigating and managing mistakes. However, the dispenser does not always initial these labels, which could limit their opportunities to learn and improve.
- The pharmacy team keep track of any mistakes they find when preparing medicines. Mistakes are recorded and discussed with the person involved. These records are reviewed regularly and shared with the team. However, the records do not always clearly explain why each mistake happened. So, the pharmacy might miss chances to spot common problems and make the process safer.

#### Standard 1.6

- The pharmacy keeps a digital record of who the responsible pharmacist (RP) is. However, the RP often does not sign out when there is a change in RP. This means it could be difficult for the pharmacy to know who was responsible at a certain time.
- The pharmacy keeps records of all controlled drug (CD) transactions and running balances for most CDs. However, it does not keep a methadone running balance. A CD destruction register is in place, but entries are not always made when CDs are returned to the pharmacy. This means it might not always be able to account for all its CDs.
- The pharmacy's weight loss consultation records include the patient's body mass index (BMI). The pharmacist usually talks with the patient about their weight loss support plan, but this is not documented. And records lack evidence of checks during the consultation to confirm the person's BMI, their medical history or GP notification. This makes it more difficult for the pharmacy to demonstrate how it supplies these medicines safely and support the persons ongoing care.

#### Standard 4.2

- The pharmacy has written procedures for supplying medicines containing valproate. But these have not been updated to consider the most recent additional guidance on restrictions for new patients and people in the at-risk group.
- The pharmacy team refers to the prescription before it supplies compliance packs to check they have been correctly assembled. However, the team prepares the packs before it receives the prescription using the previous month's information. This could increase the risks of mistakes happening if there are any changes to the person's medicines and these are overlooked.

## 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	
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	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	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	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

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

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	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	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.