General Pharmaceutical Council

Registered pharmacy inspection report

Pharmacy name: Manor Pharmacy

Address: Wigan & Leigh College, Management Centre, Leigh Stadium, LEIGH, Lancashire, WN7 4JY

Pharmacy reference: 1123705

Type of pharmacy: Community

Date of inspection: 09/07/2026

Pharmacy context and inspection background

This pharmacy is located on a local sports village site shared with a college, supermarket, sports hall, swimming pool, GP practice and local stadia for professional and amateur sports teams; in Leigh. The pharmacy dispenses NHS prescriptions and private prescriptions. And it sells some over-the-counter medicines. The pharmacy also provides the NHS hypertension service, Contraception, New Medicine Service (NMS) and the NHS Pharmacy First Service. And it also provides flu and Covid-19 booster vaccination services.

This was a full routine inspection of the pharmacy. The pharmacy was last inspected in November 2019.

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 1.7

- Some assembled prescriptions awaiting collection are stored in a way that patient confidential

information is visible to members of the public using the pharmacy's services.

Standard 4.2

- The pharmacy supplies medicines in multi-compartment compliance packs to support people in managing their medicines; however, the compliance packs seen do not contain clear dosage instructions, appropriate cautionary and advisory labels, or a clear audit trail identifying who prepared and checked them. This means the pharmacy cannot demonstrate that compliance packs are assembled and supplied safely.

Standard 4.3

- The pharmacy cannot provide assurance that the medicines fridge temperature is being monitored effectively. As a result, it cannot always be certain that medicines requiring cold storage have been kept in the correct conditions and remain suitable for supply. The pharmacy has some arrangements in place to manage higher-risk medicines, but its storage and stock management processes are not always sufficiently robust. This increases the risk of stock discrepancies, makes it more difficult to maintain accurate oversight of higher-risk medicines, and reduces the opportunity to identify and address potential issues at an early stage to help keep pharmacy services safe and effective. In addition, records of expiry date checks are not maintained. This increases the risk that some medicines may be overlooked, including those that are expired or approaching their expiry date.

Standards that were met with areas for improvement

Standard 1.2

- The pharmacy has procedures in place to deal with dispensing incidents and near misses, but these are not always followed, and team members do not always record their errors. This could make it harder for the team to review mistakes and identify any patterns or trends, and it could be missing out on opportunities to make the pharmacy's services safer.

Standard 1.6

- The pharmacy generally maintains the records required by law; however, the Responsible Pharmacist (RP) record and some private prescription records are incomplete or inaccurate. Which could lead to confusion and make investigations more difficult. The pharmacy does not always carry out balance checks on higher-risk medicines or promptly investigate discrepancies. As a result, it may not identify stock losses, record-keeping errors, or potential medicines-related incidents in a timely manner.

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 5.2

- Dispensary equipment appeared mostly clean. But some glass measuring cylinders contained

small amounts of residue from oral liquid medicines that had been previously measured.

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	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	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	**Not 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	**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	**Area For Improvement**
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
✔ 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.