General Pharmaceutical Council

# Registered pharmacy inspection report

## Pharmacy name: Osbon Pharmacy

**Address: 3 Goldstone Villas, Hove, East Sussex, BN3 3AT**

**Pharmacy reference: 9010604**

**Type of pharmacy: Community**

**Date of inspection: 28/10/2026**

### Pharmacy context and inspection background

This is a busy community pharmacy next to a medical centre in Hove. It provides NHS services such as dispensing, the Pharmacy First service, NHS contraceptive service, and Covid and Flu vaccinations. It provides medication in multi-compartment compliance packs for people who need this additional support. And most of these packs are dispensed by the company's offsite dispensing hub. The pharmacy offers a home delivery service to people's homes.

This was an intelligence-led inspection of the pharmacy following information received by the GPhC. Not all the Standards were inspected on this occasion. The pharmacy was last inspected in July 2017.

**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 1.2

- The pharmacy cannot sufficiently demonstrate that it records and learns from any dispensing mistakes it makes. For example, it cannot show that it records mistakes which are identified

before the medicine is handed out (near misses). So, this makes it harder for the pharmacy to identify any patterns or trends. And could mean it is missing out on opportunities to make the pharmacy's services safer.

### Standard 4.3

- The pharmacy does not always store its stock medicines appropriately. Several packs of medicines were found containing mixed batches, or the containers they were in were unlabelled. And loose strips of tablets were found on the dispensary shelves. This increases the risk of a dispensing error happening, and would make date checks or dealing with product recalls more difficult.
- The pharmacy cannot sufficiently demonstrate that it keeps its medicines requiring cold storage at the right temperatures. It does not record daily temperatures of both fridges, and not all staff know how to reset the thermometers on the fridges. The maximum temperatures on each fridge were out of range during the inspection. So, staff have less assurance that the medicines in the fridges are fit for purpose.

## 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 | **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 | Standard not inspected | |
| 1.6 - All necessary records for the safe provision of pharmacy services are kept and maintained | Standard not inspected | |
| 1.7 - Information is managed to protect the privacy, dignity and confidentiality of patients and the public who receive pharmacy services | Standard not inspected | |
| 1.8 - Children and vulnerable adults are safeguarded | Standard not inspected | |

## 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 | Standard not inspected | |
| 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: Not assessed

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 | Standard not inspected | |
| 3.2 - Premises protect the privacy, dignity and confidentiality of patients and the public who receive pharmacy services | Standard not inspected | |
| 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 | Standard not inspected | |
| 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 | Standard not inspected | |
| 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 | **Not met** | |
| 4.4 - Concerns are raised when medicines or medical devices are not fit for purpose | Standard not inspected | |

## 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: Not assessed

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 | Standard not inspected | |
| 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 |
|---|---|
| ✔ 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. |