

Registered pharmacy inspection report

Pharmacy name: Jhoots Pharmacy

Address: 40 Grange Road, West Kirby, Wirral, Merseyside, CH48 4EF

Pharmacy reference: 9010609

Type of pharmacy: Community

Date of inspection: 05/08/2025

Pharmacy context and inspection background

This community pharmacy is situated in the town centre of West Kirkby, on the Wirral peninsula. The pharmacy dispenses NHS prescriptions, private prescriptions and sells over-the-counter medicines. The pharmacy supplies some people with medicines in multi-compartment compliance packs to help them take their medicines at the right time. The pharmacy recently changed ownership in May 2025.

This was a full intelligence-led inspection of the pharmacy following information received by the GPhC. The pharmacy was last inspected in January 2024 and all standards were met.

Overall outcome: Standards not all met

Required Action: Statutory Enforcement

Follow this link to [find out what the inspections possible outcomes mean](#)

Standards not met

Standard 1.1

- The pharmacy has electronic standard operating procedures. However, these can only be viewed through an active internet connection which is not currently available. The pharmacy team do not have access to a business continuity plan or have not been trained about what to do. A

pharmacist was not available, and support by head office was not provided. This meant the pharmacy team did not have access to procedures or information about what to do when the pharmacist was absent.

Standard 1.5

- There is no evidence to show the pharmacy has sufficient insurance in place for the activities it carries out or the services that it provides.

Standard 1.6

- The pharmacy has records for its higher-risk medicines. But the records are unreliable and inaccurate. So the pharmacy is unable to show what should be present at a particular moment in time.

Standard 1.7

- The pharmacy does not have an active means to destroy confidential waste. This has led to an accumulation of confidential waste on the premises. So there is a risk people's confidential information may be exposed or lost.

Standard 2.1

- The pharmacy does not have any employed staff, and a responsible pharmacist is not routinely present. This means the pharmacy is unable to provide its services safely and effectively.

Standard 2.5

- Members of the pharmacy team have raised concerns to the head office about the operation of the pharmacy. But there has not been any response to their concerns, and no action by the company has been taken. This means the company's whistleblowing policy is ineffective.

Standard 3.1

- The pharmacy does not have an active waste collection service, and this has led to a number of waste bin bags being stored in the dispensary. The accumulation of waste without means of removal risks the presence of vermin and does not meet the expectations of a healthcare setting.

Standard 4.3

- The pharmacy does not have processes to routinely complete expiry date checks and no records are kept of fridge temperatures. This means the pharmacy is unable to demonstrate its stock medicines are stored correctly and remain fit for purpose.

Standard 4.4

- Drug alerts are received by email, but the pharmacy cannot access the alerts without an active internet connection. This means the pharmacy cannot demonstrate whether the stock is safe to supply.

Standard 5.1

- The pharmacy does not have access to the internet. Pharmacy team members rely upon this access in order to access medical information materials, company procedures, and alerts about their medicines. Company support is only provided by email. Therefore, the pharmacy is without access to vital information and resources to enable the pharmacy to operate safely.

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	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	Met	
1.5 - Appropriate indemnity or insurance arrangements are in place for the pharmacy services provided	Not 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	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 not all 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	Not 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	Not 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 not all 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	Not 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	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	Not 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 not all 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	Not 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
✓ 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.