General Pharmaceutical Council

Registered pharmacy inspection report

Pharmacy name: Specialist Pharmacy

Address: X House, Londoneast -UK, Business and Technical Park, Yewtree Avenue, Dagenham, RM10 7FN

Pharmacy reference: 9010630

Type of pharmacy: Community

Date of inspection: 27/10/2025

Pharmacy context and inspection background

This pharmacy provides its services at a distance, and the premises are not accessible to the public. It is located within an industrial park and its main business is compounding unlicensed medicines under a s10 exemption which it prepares in its laboratory. It supplies these and other unlicensed medicines against private prescriptions from pharmacist independent prescribers. The pharmacy also works with a third-party prescribing service, which uses the same pharmacist independent prescribers engaged by the pharmacy. And it receives prescriptions from external CQC registered clinics. The pharmacy mainly supplies dermal creams, hair loss treatments, bio-identical hormone replacement therapy, pain medicine and medication for men's health.

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 March 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 1.1

- The pharmacy has undertaken a risk assessment for its prescribing service. But the risk assessment does not consider individual medicines supplied by the pharmacy or its subscription model. And the assessment does not make it clear which mitigation corresponds to which risk. The pharmacy has also undertaken a compounding risk assessment. But it cannot sufficiently show that it has considered individual risks and how to mitigate each one. This risk assessment is overdue for review, and it does not cover all areas of the service. For example, it does not cover verification of the preparation method, calculation verification, product-specific risks, or relevant staff skills. It also does not include finding out if equivalent relevant licensed products exist and are available.

Standard 1.2

- The pharmacy cannot demonstrate that it routinely monitors the safety and quality of its prescribing service, for example by carrying out regular audits.

Standards that were met with areas for improvement

Standard 1.6

- The pharmacy generally keeps adequate records. But the pharmacy's prescribers do not routinely record their reasons for prescribing, including when prescribing unlicensed medicines. So, this makes it harder to know the clinical justification for prescribing a particular medicine to a person. In addition, it does not record the quantity and dosage of medicines it supplies against private prescriptions in its private prescription register. And its records about unlicensed products it compounds are incomplete. It does not record the source of ingredients or description of the container used.

Standard 3.1

- The pharmacy is linked to a third-party website, which advertises the use of medicines outside their licensed indications.

Standard 4.2

- The pharmacy uses online questionnaires as the primary way of getting information from people and keeps a record of people's answers. But it cannot always demonstrate how a few key clinical assessments are made before prescribing medicines. For example, the questionnaires used to prescribe Finasteride do not ask about family planning. And when prescribing Dapoxetine the pharmacy asks about blood pressure, but it does not ask about postural hypotension. In one instance, it could not demonstrate that it made an appropriate assessment after being consulted about side effects.
- The pharmacy issues ongoing treatment for long periods of time and although it contacts people during this time, it relies on people responding to emails. And still will issue medicines if they do not respond but will stop issuing medicines if a person has not responded by nine months. So, this could make it harder for the pharmacy to assure itself that people are taking their medicines safely and appropriately.

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	Standard not inspected	
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	Standard not inspected	
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	Standard not inspected	
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: 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	**Area For Improvement**
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 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	**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	Standard not inspected	
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.