

Registered pharmacy inspection report

Pharmacy name: Crystal Pharmacy

Address: Office, 3C High Street, Keighley, West Yorkshire, BD21 2AB

Pharmacy reference: 9011916

Type of pharmacy: Internet / distance selling

Date of inspection: 21/01/2025

Pharmacy context and inspection background

The pharmacy is in Keighley town centre. It is a distance selling pharmacy that provides aesthetics products, botulinum toxins and injectable medicines for weight loss against private prescriptions issued by UK based prescribers. It does this via its website, www.thecrystalpharmacy.co.uk. Prescribers and aesthetic practitioners use the website. It also supplies these products and medicines via a third-party company, which has its own website. It delivers to aesthetic practitioners and clinics. It does not supply direct to patients.

This was the first routine inspection of the pharmacy since it was registered in May 2022.

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 does not identify and manage all the risks for the services it provides. It does not have documented written procedures for all aspects of the service. For example, to support the team to understand the requirements of the clinical check, including checking dosage instructions

are appropriate and printed on the label. And there are no instructions about using people's body mass index (BMI) to support checking prescriptions for weight loss. The pharmacy does not document how and when the team make checks to ensure face-to-face consultations happen with the prescriber for botulinum toxins. And although it has written risk assessments (RA) for the treatments it supplies, these are incomplete for some areas. And there are differences between the maximum quantity of botulinum toxins that can be supplied in the RA and the process being followed.

Standard 4.2

- The pharmacy does not have sufficiently robust systems to ensure it always makes the necessary checks when dispensing medicines and to ensure they are appropriate for people to use. Clinical assessments are basic and relate more to confirming the accuracy of the medicine supplied rather than its clinical suitability. For botulinum toxins the team don't always ensure the instructions of how and where to administer are included on the label. And the label does not always include mandatory warning labels. The pharmacy doesn't always have information such as height and weight available when dispensing medicines used for weight loss. The team can access previous dispensing history, but this is difficult to do on the system, and is not completed for each medicine supplied. This makes it difficult to ensure the medicine is appropriate for the patient and the necessary monitoring of doses, frequency of prescribing, and weight loss is being completed. There is little intervention and consideration of risks when people are prescribed unlicensed medicines, for example Ozempic for weight loss.
- The pharmacy regularly delivers medicines which require cold storage. But it has not made the necessary checks to ensure the packaging it uses to deliver these medicines appropriately maintains these medicines at the correct temperature. So, it cannot be sure these medicines are suitable for use by practitioners.

Standards that were met with areas for improvement

Standard 3.1

- The pharmacy advertises its products and services on its website and on social media platforms. But it doesn't have a governance structure which uses the pharmacy practice, regulatory and clinical knowledge of the team, including the superintendent pharmacist. So, it is more difficult to ensure the pharmacy meets requirements relating to promoting medicines to the public.

Standard 4.3

- The pharmacy does not include key members of the team in purchasing arrangements, including the superintendent pharmacist. This makes it more difficult to ensure the appropriate due diligence checks are made on purchases. And to ensure there is suitable monitoring on the volume and products purchased and supplied.

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	Met	
1.6 - All necessary records for the safe provision of pharmacy services are kept and maintained	Met	
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

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	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	Area for improvement
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	Met	Area for improvement
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	
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.