General Pharmaceutical Council

Registered pharmacy inspection report

Pharmacy name: The Skin Pharmacy

Address: Robena Business Centre, Unit 1, 86 Bradford Road, Dewsbury,

West Yorkshire, WF13 2EF

Pharmacy reference: 9012054

Type of pharmacy: Internet / distance selling

Date of inspection: 26/03/2025

Pharmacy context and inspection background

The pharmacy is in a business premises near Dewsbury town centre. It does not provide NHS services. It provides a private prescribing service to help people treat and manage acne, rosacea, anti-ageing, and skin texture. Pharmacy team members dispense the private prescriptions generated by the pharmacy's prescriber. The pharmacy provides people with access to its services via a website, www.uncouth.co.uk.

This was the first routine inspection of the pharmacy since it was registered in February 2023.

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 have documented standard operating procedures (SOPs) for all aspects of the service. For example, to help manage the risks of prescribing. And to manage the risks in the dispensing process, including the prescriber also dispensing and checking the medicines. And to

- manage risks in the delivery of medicines to people.
- The pharmacy has an overarching risk assessment (RA) for its service and some risk review documents. But the information is incomplete, and it does not provide enough information to give assurances that the mitigations identified are effective and are regularly monitored. This includes not having a risk assessment for each treatment or medicine. And not documenting the training and skills required to prescribe and dispense these medicines.
- The pharmacy provides some information in its overarching RA to help support safe prescribing. But it doesn't have a standalone prescribing policy and the information it does have is insufficient. It does not provide clear frameworks for the prescriber to use to help manage the risks of prescribing for each medicine in each clinical area and for the pharmacy to check supplies are safe and appropriate. This means there is no clear direction on maximum quantities, frequencies of supply and when a supply is inappropriate.

Standard 1.2

• The pharmacy does not audit or monitor the prescribing and supplies it makes to ensure it provides them safely. And without complete documented prescribing policies and standard operating procedures (SOPs), it does not have access to the right information to be able to conduct any audits effectively.

Standard 1.6

- The pharmacy does not maintain a record of private prescriptions it has dispensed for people, as required by law.
- The prescriber keeps records of their consultations and any following communications with people about their prescriptions and medicines. But they do not keep accurate records to help justify and reflect on their decisions when they choose not to prescribe for someone.

Standard 4.2

• The pharmacy does not have robust systems in place to independently verify the identity of people accessing its services and the information they provide including photographs submitted and about their age. It does not make sufficient checks to ensure that the medicines it delivers are received and in the right condition.

Standards that were met with areas for improvement

Standard 2.2

 The pharmacist prescriber has received peer-to-peer coaching from a consultant dermatologist to help ensure their competence to prescribe for the conditions treated by the pharmacy. But they do not have any training certificates or records of any coaching or self-directed learning to help provide assurances of their competence.

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	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	Not 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	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 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	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	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	
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.