General Pharmaceutical Council

Registered pharmacy inspection report

Pharmacy name: Ryans Pharmacy

Address: 126-128 Bradford Road, Brighouse, West Yorkshire, HD6 4AU

Pharmacy reference: 9012212

Type of pharmacy: Internet

Date of inspection: 11/08/2026

Pharmacy context and inspection background

This pharmacy is situated in Brighouse. It supplies all of its services at a distance. The pharmacy dispenses NHS prescriptions which are delivered to people's homes and to those residing in care homes. It offers some NHS services such as the New Medicine Service (NMS) and the Pharmacy First service. And it supplies medicines in multi-compartment compliance packs to help people take their medicines correctly.

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

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 standard operating procedures and team members can access them. But the procedures do not cover all the relevant topics. For example, in relation to the services provided to care homes. This means that team members may not always be working safely in line with

current best practice.

Standard 1.2

- The pharmacy has procedures in place to deal with dispensing incidents and near misses, but these are not always followed, and team members do not always record their errors. This could make it harder for the team to review mistakes and identify any patterns or trends, and it could be missing out on opportunities to make the pharmacy's services safer.

Standard 1.6

- The pharmacy does not maintain adequate records to demonstrate that medicines and controlled drugs are managed safely and in accordance with legal and professional requirements. Responsible Pharmacist (RP) records are editable, reducing assurance that entries are accurate, complete, and tamper evident. Records for higher-risk medicines are inadequately maintained, with required headers missing, which increases the risk of inaccuracies and makes effective auditing more difficult. In addition, patient-returned high-risk medicines are not recorded when received, limiting the pharmacy's ability to demonstrate appropriate handling and destruction arrangements for these medicines. Records of emergency supplies are not maintained appropriately, meaning the pharmacy may not be able to demonstrate that such supplies are made appropriately and in line with legal requirements.

Standard 2.2

- The pharmacy does not always ensure that its team members have completed or are enrolled on the required training courses for the activities they are undertaking, including dispensing medicines. This means the pharmacy cannot provide adequate assurances that team members have the right skills and knowledge to work safely.

Standard 4.2

- The pharmacy cannot demonstrate that its monitored dosage system (MDS) service is managed and delivered safely and effectively. Assembled trays are left unsealed prior to them being accuracy checked, increasing the risk of medicines being displaced, contaminated, or omitted before supply. Some compliance packs are not appropriately labelled, meaning patients and carers may not always have access to the information needed to support the safe administration of medicines. These weaknesses increase the risk of medication errors and reduce assurance that patients receive their medicines safely. In addition, trays are sometimes prepared by team members who have not received appropriate training or been assessed as competent for the process. This increases the risk of assembly errors going undetected and compromises the safety of the service. The pharmacy's systems and controls are not sufficiently robust to ensure the consistent and safe provision of MDS prescriptions.

Standard 4.3

- The pharmacy cannot provide assurance that it adequately monitors fridge temperatures required for the appropriate storage of cold chain medicines. This means it cannot always be certain that medicines requiring cold storage remain suitable for supply. In addition, records of expiry date checks are not maintained, which increases the risk that medicines may be overlooked, including those that are expired or approaching their expiry date. Patient-returned

high-risk medicines are not clearly separated and are found to be mixed with stock medicines, creating a risk that unsuitable medicines could be inadvertently supplied. Furthermore, medicines are not consistently stored on shelves in appropriate packaging or with adequate labelling, increasing the risk of selection errors, stock management issues, and the supply of medicines that may not be readily identifiable or suitable for use.

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 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	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	**Not 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	
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	**Not 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
✔ 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.