

Registered pharmacy inspection report

Pharmacy name: Healthful Pharmacy Rothesay

**Address: 63 Victoria Street, Rothesay, Isle of Bute, Argyll and Bute, PA20
OAP**

Pharmacy reference: 9012593

Type of pharmacy: Community

Date of inspection: 07/10/2025

Pharmacy context and inspection background

This is a community pharmacy on a main street in Rothesay, Isle of Bute. Its main activity is dispensing NHS prescriptions. And it provides medicines in multi-compartment compliance packs to help people take their medicines at the right times. The pharmacy provides a medicines' delivery service and the NHS Pharmacy First service.

This was a full reinspection following an inspection in April 2025 where the pharmacy did not meet Standards 1.1, 1.5, 1.6, 2.2, 4.2 and 4.3. Since the last inspection, team members have been enrolled on the appropriate accredited training for their roles. And most team members have read the written procedures. But team members are still not following all documented procedures, including for newly implemented private services. And although private prescription entries have improved, the pharmacy isn't completing entries for its new private services. Storage of its higher risk medicines has improved, but its expiry date checking process is not robust.

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 written procedures to cover all services the pharmacy offers. This includes for popular services such as, the NHS Pharmacy First service. And it cannot demonstrate all team members have read them. Team members do not always follow the written procedures for the tasks they perform and this creates risk. This includes supplying medicines privately under patient group directions (PGDs), maintaining an audit trail on dispensing labels and recording actions taken following a deviation in temperature readings of pharmacy fridges. This means team members may not be working in the most consistent and safest way.

Standard 1.6

- The pharmacy does not always maintain accurate records as required by law. It does not record all supplies of medication made privately through patient group directions (PGDs) and these supplies are not always recorded in the patient medication record.

Standard 4.3

- The pharmacy does not manage all of its medicines as it should, including effectively checking and making records of medicines' expiry dates. And ensuring medicines it stores out with the original packaging are labelled appropriately.

Standard 4.4

- The pharmacy does not have a robust process for managing medicine recalls and safety alerts. There is no defined process to receive them, or an audit trail to show the action team members take. So, there is a risk not all medicines are safe to supply.

Standards that were met with areas for improvement

Standard 1.2

- The pharmacy maintains records of mistakes identified during the dispensing process. But it does not keep robust records of investigations following dispensing mistakes. So, team members may miss opportunities to learn from things that go wrong.

Standard 4.2

- Team members do not maintain a robust audit trail to show who is involved at each stage of the dispensing process. And they do not provide warning instructions for each medicine when it is supplied in a multi-compartment compliance pack. So, people may not have accurate information regarding their medicines. This is not in line with written procedures and may make it more difficult to resolve any queries that arise.

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 | Area for improvement |
| 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 | |
| 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 | 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 | 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 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. |