

Registered pharmacy inspection report

Pharmacy name: Online Pharmacy 4U

Address: 28 The Village, Maisies Way, South Normanton, Alfreton, Derbyshire, DE55 2DS

Pharmacy reference: 9012620

Type of pharmacy: Internet

Date of inspection: 23/09/2025

Pharmacy context and inspection background

This pharmacy is situated in a closed unit. Members of the public do not usually visit the pharmacy in person. Instead, the pharmacy delivers or posts medicines to people. The pharmacy dispenses NHS prescriptions and supplies a large number of medicines in multi-compartment compliance aid packs to people in care homes and the community to help them take their medicines at the right time. The pharmacy sells a large number of over-the-counter medicines, and it has a prescribing service provided by a nurse prescriber who works remotely. The pharmacy has four websites (www.online-pharmacy4u.co.uk, www.onlinepharmacy-4u.co.uk, www.myweightlosscentre.co.uk and www.ukmedsonline.co.uk)

This was the first routine inspection of the pharmacy since it relocated from nearby premises in January 2025.

Overall outcome: Standards not all met

Required Action: Statutory Enforcement

Follow this link to [find out what the inspections possible outcomes mean](#)

Standards not met

Standard 1.1

- The pharmacy is not able to demonstrate that it completes appropriate risk assessments or sufficient due diligence checks when working with a nurse prescriber. And appropriate checks are not made to seek assurances regarding the safety of the prescribing service or the prescriber's scope of competency. Furthermore, some members of the pharmacy team have not read the pharmacy's Standard Operating Procedures (SOPs). And there is evidence that team members do not consistently follow the written procedures, prescribing policies and risk assessments which raises concerns about the robustness of the pharmacy's clinical governance arrangements.

Standard 1.6

- The pharmacy's records are not adequately maintained. Consultation notes do not always contain enough information to make it clear how a prescribing decision is made which could affect the person's ongoing care. The pharmacy offers a service which prescribes and supplies some medicines that require blood tests and specialist knowledge to prescribe safely. But there is a lack of evidence to show what checks have been completed and what safeguards are in place within the consultation notes to help demonstrate these medicines are safe and appropriate for people to use.
- Controlled drug (CD) registers, the private prescription register, and the responsible pharmacist (RP) record contain some incorrect and missing entries. Private prescriptions are being supplied from scanned copies without the original prescriptions being obtained. This makes it more difficult to verify prescription authenticity and increases the risk of prescriptions being dispensed more than once.

Standard 4.2

- The pharmacy is not able to demonstrate that it carries out sufficient checks to make sure the medicines it supplies through the prescribing service are clinically appropriate for the people requesting them.
- The pharmacy does not always confirm people's medical conditions or verify their health information before prescribing medicines for long-term conditions and for medicines requiring ongoing monitoring. National Care Records (NCRs) are not accessed for the online prescribing service despite this being stated in its policies as a method of verifying the information that is provided. And there is no evidence of independent verification of people's body mass index (BMI) for the weight management service.
- Medicines liable to misuse and medicines which have a higher risk of fatality or serious harm if taken in overdose are available on the websites without adequate safeguards in place.
- The pharmacy is not able to demonstrate a sufficient and robust ID verification system is available to make sure supplies of medicines are made safely and to the correct person requesting them.
- The pharmacy cannot demonstrate that people's usual healthcare professional are consistently notified when using the pharmacy's prescribing service which means there may be a lack of care continuity.
- The prescriber has no direct contact with patients, and the pharmacy cannot effectively demonstrate how people are counselled about their medication or signposted for further support.
- Repeat supplies of medicines are checked manually, as there is no automated system to identify inappropriate requests or duplicate supplies which means they could be overlooked.

Standards that were met with areas for improvement

Standard 1.2

- The pharmacy carries out some audits of its supplies of prescriptions only medicines and higher risk pharmacy (P) medicines to assess compliance against guidelines and the pharmacy's internal procedures. But it is not clear how effective the audit process is as findings are not always followed up and acted on.

Standard 1.4

- The pharmacy has a procedure to handle complaints, which can be found on its websites, but it does not always deal with complaints in a timely manner, and it is not always receptive to feedback about its staff and the services, so may miss out on opportunities to improve.

Standard 1.5

- The pharmacy has some indemnity insurance in place, but it is not clear if it covers all aspects of the pharmacy's services including the remote prescribing of medicines by a nurse prescriber.

Standard 1.7

- The pharmacy takes some steps to keep people's private information safe and there are appropriate written procedures in place. But some people working in the pharmacy have access to confidential information, and they have not read the procedures or signed a confidentiality clause. This means there is a risk that they may not fully understand the importance of people's personal details secure.

Standard 4.3

- The temperature of the pharmacy's main stock fridge is monitored to ensure it remains within the required temperature range. But, the temperature of a back-up fridge which is used occasionally is not always monitored. And the pharmacy relies on information supplied by the manufacturers of cool packs used to supply medicines requiring refrigeration, rather than carry out any tests themselves. This increases the risk that medicines which require refrigeration might not always be stored and delivered within the required temperature range.

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	Area for improvement
1.5 - Appropriate indemnity or insurance arrangements are in place for the pharmacy services provided	Met	Area for improvement
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	Area for improvement
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	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.