

# 1085356- EnforcementActionSummaryImprovement- Cape Hill Pharmacy-20250917.docx

**Pharmacy trading name:** Cape Hill Pharmacy

**Pharmacy address:** Cape Hill Medical Centre, Raglan Road, Smethwick, West Midlands, B66 3NR.

**Premises registration number:**

1085356

**Enforcement action taken:**

Issuing of an improvement notice - (Article 13 of the Pharmacy Order 2010)

**Effective date:**

17/09/2025

**Premises standards failed:**

1.1, 1.2 & 1.3

**Summary:**

At a reinspection of the pharmacy on 2 September 2025, it was identified that the pharmacy does not suitably identify and manage the risks associated with its services. It lacks robust governance arrangements, and it could not demonstrate that there is a sufficient assessment of risk when introducing new services. As such, the current operation of the pharmacy falls below the standards expected and poses an increased risk to patient safety.

**Improvements required:**

1. You must establish and document clear lines of accountability for team members and senior management within the pharmacy. You must demonstrate that team members have received training on this and that they have access to the contact details for the Superintendent Pharmacist.

2. You must review and update all standard operating procedures to ensure alignment with current professional standards and guidance. You must keep a training record to demonstrate that pharmacy team members have read the procedures and agreed to follow them.
3. You must implement a formal risk assessment process to follow prior to the introduction of any new pharmacy service. You must commit to completing this risk assessment in advance of any new service commencing. The risk assessment should be signed by the Superintendent Pharmacist to prevent the implementation of services without appropriate authorisation, and a copy should be retained for reference.
4. You must ensure that all team members, including locums, are informed of the imposed Condition upon starting work and confirm their understanding. You must keep evidence as a record this has been done.

**Deadline for compliance:**

31/10/2025

**Outcome:**

Met