

9012610- EnforcementActionSummaryImprovement- Oushk Pharmacy-20250702.docx

Pharmacy trading name: Oushk Pharmacy

Pharmacy address:

Suite 1, Orient House, Newton Street, Hyde, Greater Manchester, SK14 4RY

Premises registration number:

9012610

Enforcement action taken:

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

Effective date:

02/07/2025

Premises standards failed:

1.1, 1.2, 1.6, 4.2 and 4.3

Summary:

An inspection of the pharmacy on 27 May 2025 identified several concerning issues. The pharmacy was not able to demonstrate that safeguards were consistently used to make sure the medicines it supplies for weight loss through its online prescribing service are clinically appropriate for the people requesting them. As such, the provision of the pharmacy's weight loss service falls below the standards expected and poses an increased risk to patient safety.

Improvements required:

1. The pharmacy must review its risk assessments to ensure they cover the risks of prescribing and supplying high volumes of medicines. And that they cover the pharmacist's dual role of prescriber and responsible pharmacist (RP). It must demonstrate that the appropriate action is taken to mitigate all the risks identified.

2. The pharmacy must provide assurance that all prescribers have adequate time to clinically assess every consultation and make detailed contemporaneous notes.
3. Consultation notes should be accessible on the patient's records and should clearly explain the reasons for prescribing decisions and any arrangements for follow-up and monitoring. The pharmacy must be able to demonstrate that:
 - Prescribers independently verify the information that a person provides. When supplying weight loss treatment this must include information on the person's weight, height, and BMI. The prescriber must not solely rely on the information provided on the online questionnaire.
 - Any checks to confirm the person's weight and height must be documented on their record. This should be for every new patient to the pharmacy, including those transferring from another provider. If a person provides previously dispensed medication as evidence of treatment, this on its own, is not appropriate to base prescribing decisions on. The pharmacy must independently verify information about people's BMI at regular intervals throughout their treatment and document this on their record.
 - Prescribers make clear records explaining their justification for prescribing, in exceptional circumstances where they have been unable to verify information.
4. The pharmacy must be able to demonstrate that prescribers document all of their prescribing decisions and consultation records, including how information was verified, so that the history of, and reasons for, prescribing decisions are easily available. These should also include follow up plans and monitoring.
5. The pharmacy must carry out regular audits which include reviews of clinical decision making against prescribing policies and guidelines to make sure prescribing is consistently safe and appropriate.
6. The pharmacy must ensure that a person's GP is informed when medicines for weight loss are supplied, and that people explicitly consent to this. Records must be available to confirm this has been done. The pharmacy must be able to demonstrate that prescribers make clear records explaining their justification for prescribing, in circumstances where there is no consent to share information with the person's GP.
7. The pharmacy must make sure that team members have appropriate access to the pharmacy's SOPs, and there is a record that they have read and understood them. And the pharmacy should be able to demonstrate that it is monitoring compliance with the SOPs.
8. The pharmacy must ensure that it maintains an accurate responsible pharmacist (RP) record used for the contemporaneous records of the RP working at the pharmacy on any given date and time.
9. The pharmacy must make sure that team members know how to monitor the temperatures of the medical fridges, and the pharmacy must be able to demonstrate that the storage temperatures are always maintained between 2-8 degrees Celsius.

10. The pharmacy must provide assurance that it regularly tests the effectiveness of the packaging used to supply injections which require cold storage, to ensure they remain at the required temperature during delivery. This must include tests during all weather conditions that supplies will be made. Deliveries must be monitored to ensure deliveries are made within the timescale tested and there should be a policy to deal with occasions where unexpected delays have occurred.

Deadline for compliance:

31/07/2025

Outcome:

Met