

Enter and View Report

Whitehouse Pharmacy, Penkridge

12th & 14th May 2025



Healthwatch Staffordshire

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Report on Enter and View Visit Undertaken by Healthwatch Staffordshire on 12th & 14th of May 2025

Service Visited:

Whitehouse Pharmacy

Market Street, Penkridge, Staffordshire, ST19 5DH

01785 712829

Authorised Representatives undertaking the visit:

Christine Sherwood & Jackie Owen

Image of Pharmacy Station inside Whitehouse Pharmacy.



The Service:

Whitehouse Pharmacy has been serving the local community of Penkridge since 1986 and is located on Market Street. It is situated in a grade II listed building. The pharmacy offers a variety of services, including a pharmaceutical dispensary, Pharmacy First services, and features a private consultation room. Additionally, it provides a photographic processing service and stocks various general items.

The owner of Whitehouse Pharmacy also manages six other branches throughout Staffordshire, including one in Wolverhampton, collectively known as The Northwood Pharmacy Group. The company also offers a trusted private pharmacy service called "The Bank of Wellbeing," which includes a wide range of paid-for services.

Services provided by the community pharmacy include blood pressure checks, disposal of unwanted medication, a minor ailments scheme (covering conditions such as cystitis and earache), flu & Covid vaccinations, a stop smoking service, dispensing of medicine, contraception (including emergency options), and sore throats to name a few.

The pharmacy processes between 400 and 600 prescriptions each day and is open Monday to Friday from 9 am to 5:30 pm and Saturday from 9 am to 1 pm. It is conveniently located in the main high street of Penkridge, surrounded by various businesses, including a bakery, clothing stores, markets, local cafés, and a bank.

Inside, the pharmacy has ample space, featuring a front counter for purchasing shop-bought items and photo imaging. There is a small consultation room in the centre, while the rear houses the pharmacy counter and seating for up to four people. All fixtures and fittings are in good condition, and the flooring is well-maintained. The double fronted bay windows showcase the "Pharmacy First" service and have promoted skin cancer awareness in the adjacent window this month. Comfortable furnishings in the main areas create a welcoming environment.

Purpose of the Visit:

As part of Healthwatch Staffordshire's responsibilities, authorised representatives will conduct Enter and View visits to health and social care facilities. These visits aim to assess how these services are managed and to make recommendations for improvement. The Health and Social Care Act 2012 empowers authorised representatives to observe service delivery and engage with patients, families at various locations, including hospitals, residential homes, GP practices, dental surgeries, optometrists, and pharmacies.

Additionally, with this Enter & View, we aim to gain an overview of the "Pharmacy First" initiative, which is now a significant part of the NHS strategy to enhance primary care accessibility in the UK. This initiative empowers community pharmacists to assess, advise, and treat patients for seven common conditions without requiring a GP appointment.

However, we have heard that there are challenges related to GP engagement, public awareness, training, and resource availability. While the initiative offers many benefits, we are keen to address these challenges regarding inter-professional collaboration, public awareness, and the sustainability of community pharmacy resources. We want to learn how this initiative has been implemented, how often the general public accesses this service, what barriers may be affecting patients, and how this impacts the general running of the pharmacy.

While these visits are not specifically designed to identify safeguarding issues, any concerns that arise will be reported according to Healthwatch Staffordshire's safeguarding policy.

Methodology:

Was to engage with and speak to:

- Speak with the Superintendent pharmacist to gather information about various aspects of how the facility operates. This includes details such as the number of staff employed, their interactions with the public, and the challenges and successes of running a pharmacy. Additionally, discuss staff training, the induction process, and how complaints are managed. We will ask for their perspective on how the Pharmacy First service is performing in reality.

- Engage with patients to understand their views on the service. Inquire whether they feel safe and satisfied with the services provided, and if they believe their voice is being heard when speaking to staff. Gather insights about their experiences with the Pharmacy First service.
- Talk to staff about staffing levels, training opportunities, and whether they feel adequately supported in their roles.
- Conduct observations of the environment and interactions among patients, staff, pharmacists, and visitors at all levels.

Physical environment:

Whitehouse Pharmacy is located on a small side street off a main road in Penkridge, conveniently situated near Stafford and the borders of Cannock. The building was purchased in 1986. It is a spacious property featuring double fronted bay windows on either side of the electronically opening sliding door with level access suitable for wheelchair users, families with pushchairs and for people with mobility issues. Inside, there is a consultation room for patients to speak privately.

While there is limited parking directly outside the building, public parking is available within the town area. The fixtures and fittings in the areas are of good quality, reflecting the pharmacy's commitment to creating a welcoming & safe environment. The shelves are well-stocked and neatly organised.

Access to the rear of the shop is easy, and this is where the pharmacy counter is located. An adjacent alleyway that runs down the side of the pharmacy allows for deliveries without the need to enter the shop. A separate staff room can be found away from the shop, and CCTV monitors the alleyway at the rear of the building.

Both the pharmacist and the owner are dedicated to helping the local community. They take pride in the services they offer to enhance patients' experiences, support community health, and improve overall well-being. The building features a sign prominently displayed above

the shop frontage, which is visible from the main road, with the entrance located at the front.

The front of the building has a very small slope leading into it and a tarmac public pathway.

Internally, during opening hours, patients can enter through the front door, where ample staff members are available to greet them. There are notices, posters, and leaflets displaying important information, including details about Pharmacy First and its services. At the pharmacy station in the rear, a QR code is available on a poster for submitting compliments or complaints, along with a prompt to provide feedback regarding the patient's experience.

The shop is bright, clean, and well-maintained. The corridor space leading to the consultation room is spacious enough to accommodate wheelchairs, pushchairs and other mobility equipment.

Patient Feedback

During our initial visit, we spoke to two members of the public. We then returned to the pharmacy on the morning of 14th May, 2025, and spoke with twelve other people.

We asked patients the following questions:

Did they use the pharmacy service for prescriptions?

All of the 14 people we targeted use the pharmacy for this service.

Did they receive all the items they had come to collect?

Six people commented that there are times when they may not receive every item due to shortages or because the branding differs from what was specified by the GP. Sometimes items were out of stock so there may be some delay in getting medication whilst waiting for items to arrive.

Are there any issues with some items?

One person mentioned that an alternative medication did not suit them, but the pharmacy helped facilitate a change. Another individual noted that

when their medication is changed, the pharmacy calls them a couple of times to check how they are doing with the medication and if they are experiencing any side effects, stating, “I cannot fault the service.” Additionally, another person remarked that the pharmacy contacts them directly if there are any issues with stock supply.

Do they ever use the Pharmacy First service?

Out of the fourteen people interviewed, two had used the Pharmacy First service. One of them described it as a fantastic service, while the other individual said it saved them time trying to see a GP and helped them get sorted right away.

Do they know about the Pharmacy First Service?

Two individuals had not heard of it when first asked, but once it was explained what it was, they realised they were familiar with it, though they had never had a need to use it.

What is their overall experience of the pharmacy?

Overall, no one had anything negative to say about the pharmacy. Comments included, “I like the pharmacy; I pop in most times I come into town,” while another person simply stated, “I had no issues.”

Do they feel they are listened to and treated well?

One individual stated that “the staff are brilliant and friendly”, even pointing out specific members of staff in the shop that they particularly appreciated. There were no negative comments from patients about the service received; in fact, most were very complimentary about the staff and the advice and help they received when seeking it from the pharmacy staff.

Staff Feedback

During our visit, we spoke with four members of the staffing team, excluding the Superintendent Pharmacist and the owner. Each member held various job titles essential to the pharmacy's operations.

The staff we spoke to had all been employed at the pharmacy for several years, they were welcoming and enthusiastic about their work, clearly demonstrating compassion for the local community and their commitment to public service. They mentioned that it can often be extremely busy, and they sometimes struggle with staffing levels and the availability of hours to complete tasks.

Training opportunities were also discussed; staff are required to complete training outside of their working hours if they wish to progress in their careers. This training involves a level of knowledge that is not always recognised but is crucial for supporting the public, which opened our eyes to the challenges faced by the team, as noted by the Healthwatch representatives.

Additionally, the introduction of the Pharmacy First initiative has intensified some pressures due to the government's expectations. Trained staff members are responsible for not only supporting their colleagues one-on-one and covering shifts during holidays but also administering vaccinations, guiding patients on product selections, and administering EpiPens. Other tasks include managing the retail side of the pharmacy, ensuring a safe environment and adherence to health and safety regulations, processing purchases, and keeping the space well-stocked, clean, and accessible.

Despite these challenges, the staff expressed enjoyment in their roles and a sense of teamwork. Those who have been at the pharmacy for several years possess significant knowledge about the community and the patients who use the facility.

Staff members are encouraged to escalate any concerns regarding a patient to the Superintendent Pharmacist or a senior team member. They also have effective communication with the GP surgery, allowing them to refer patients when necessary and raise concerns. Furthermore, the pharmacy has protocols in place for reporting safeguarding issues to the appropriate authorities, and all staff have received training on this important matter.

Introduction with the Superintendent/Manager

When we first arrived at the pharmacy, we met with the Superintendent Pharmacist, who runs the branch, and received a brief introduction from the owner of the premises.

The Superintendent and all the staff we encountered were very welcoming and friendly. The Superintendent has a wealth of experience, having worked at this branch for 15 years.

We learned that most of the medication is sourced from the UK and that the owner strives to secure the best prices from wholesalers. The company uses a Hub & Spoke model internally, which allows for a central location (the Hub) where prescriptions are processed and prepared for patients, while local pharmacies (the Spoke) will provide the direct patient care. This model helps make more efficient use of pharmacists' time, enabling them to spend more time speaking with patients. It can lead to cost savings and a reduction in errors. The only caveat is that this model cannot handle controlled drugs or refrigerated items, which must be managed within the local pharmacy.

We had the privilege of observing the Hub process in action and were amazed to learn that the Hub prepared 33,000 prescriptions last month for the Northwood practices. The pharmacy also prepares medication trays, completing around 500 each month for the company.

Additionally, the pharmacy administers flu and COVID vaccinations and receives some referrals from GPs regarding the "Pharmacy First" initiative. However, there is room for improvement in utilising this referral channel, as targets are not being met, which impacts the financial viability of the community pharmacy. The "Pharmacy First" service tends to be used by walk-in customers, and while it functions well, it does not allow for continuity in updating patient records between GPs and the pharmacy, if patients are not referred in.

The pharmacy offers a home delivery service for medications; however, due to financial constraints, there is now a charge of £2.00 per delivery to the patient.

We also learned that accessing medication prescribed by a GP can sometimes be an issue due to shortages of certain drugs. Every medicine has an approved generic name; however, when produced by different companies, each will assign a brand (trade) name. This can lead to confusion for patients, as they may not fully understand the differences. Some patients may experience slight side effects based on how each company formulates the medication. If a patient indicates that certain brands do not agree with them, the pharmacist will check their internal WhatsApp group to see if any other branches have stock. If they cannot locate the product this way, the patient will need to obtain a separate prescription to take to an alternative pharmacy.

Another challenge the pharmacy faces is that local community pharmacies are closing, leading to some suppliers denying credit. This is problematic because pharmacies are funded by the NHS & Department of Health and Social Care and commissioned by the Staffordshire and Stoke on Trent Integrated Care Board and pay pharmacies in arrears, typically every three months. Without sufficient equity, cash flow can become an issue. As a result, this business owner has decided to implement a private pharmacy service to help alleviate some of these problems. "The Bank of Wellbeing" in Penkridge.

The staffing typically includes a pharmacist, two dispensary assistants, four counter assistants, and one technician per day. The company occasionally employs a locum pharmacist when needed, however, they will prioritise using staff from other branches to maintain continuity. The Superintendent we spoke to also performs troubleshooting and training for the company, which may require her to move around.

Staff members have access to e-learning through NHS England and have completed training on palliative care, sepsis, and sexual health. They have also participated in training with local organisations, such as the Heart Foundation and a local charity for CPR and First Response. There are additional asthma training modules that need to be completed in the future. Staff members have one-on-one meetings monthly and annual appraisals. New employees initially train at the Penkridge branch, where they use a traffic light system to

monitor progress and provide feedback. Staff are shadowed and receive follow-up reviews every four weeks.

Furthermore, both pharmacists and technicians must re-register annually, which requires completing six learning activities: two planned, two unplanned, and one reflective practice. This registration process costs the business an average of £500+ per year. The premises also incur a declaration fee for the General Pharmaceutical Council, averaging £400 annually.

Complaints are usually handled directly, but may escalate to the head office and the owner. They must be submitted in writing, and the company has a five-day window to acknowledge the complaint before starting any investigation. The Department of Health and Social Care inspector will contact the service directly to inquire about the investigation's outcome. The pharmacy also displays a QR code for patients to provide feedback to NHS UK and monitors social media sites, such as Penkridge Matters, as well as input from the local Patient Participation Group to assess patient experiences. The high volume of customers suggests they are delivering good service.

The Pharmacy First initiative was a voluntary program for pharmacies and was an excellent idea; however, its practical implementation has been challenging due to inconsistent referrals from surgeries. This has resulted in the pharmacy not meeting government-set targets, leading to potential forfeited payments. In the past year, this pharmacy received only seven direct GP referrals. We were also informed about the GP Connects system, which allows pharmacies to view patients' records and care summaries. However, it appears that some GPs have not activated this system, which hampers continuity of care for patients.

Summary:

Overall, we can conclude that Whitehouse Pharmacy is doing an excellent job supporting its local community and staff. The Superintendent shows a clear dedication to both the team and the community. However, frustrations arise regarding financial viability, some stock issues, and limited referrals from GPs to effectively utilise the Pharmacy First initiative.

The staff members feel positive about the services they provide, appreciating the team spirit and support from the manager. Time constraints, especially during busy periods when administering vaccinations, limit the staff's ability to complete operational tasks associated with the shop. Nevertheless, their determination, empathy, and compassion for patients are evident. Feedback from the patients we interviewed was positive and focused on patient-centred care, with some staff going above and beyond.

The facility itself is clean, fully accessible for wheelchairs and pushchairs, and filled with leaflets, posters, and prompts to help educate the public. It is conveniently located in Penkridge town and has been a part of the community for many years.

The opening of the ["Bank of Wellbeing"](#) also deserves commendation, as it offers bespoke services to the people of Penkridge and surrounding areas. This facility is beautifully set up, very clean, clinical, and organised; we believe it is a true asset to the local community. Services offered include weight management, blood test screening, vaccinations, a travel clinic, ear wax removal, cryotherapy, a skin clinic, a Women's Health clinic and much more.

Recommendations:

At this stage, the service appears to be good, and it reflects positively on all the staff, patients, as well as the management team.

However, we have identified a few areas for improvement:

1. **Communication with GPs**: We recommend contacting GPs to understand the barriers related to patient referrals. Promoting the benefits of the NHS strategy and the aim to free up minor ailment appointments so that GPs can focus more on complex cases. Maintaining open and honest communication is essential for collaboration between the services.
2. **Maintenance Issues**:
 - The external paintwork at the front of the building is cracked and peeling in several areas.
 - The staff bathroom lacks a towel rail.
3. **Staff Room**:
 - The chairs are somewhat worn, with noticeable stains and marks.
4. **Highlight Your Successes**: Promote positive achievements to the public and other pharmacies. Consider showcasing life-saving initiatives, such as the EpiPen cases and the Bank of Wellbeing service.
5. **Community Engagement**: Distribute questionnaires to gather feedback, rather than relying solely on social media or Patient Participation Group (PPG) information. Also, consider how to accommodate patients with learning difficulties, cultural differences, or other communication challenges.
6. **Patient Education**: Consider creating a leaflet or newsletter explaining the obstacles pharmacies face, such as issues with generic versus brand medications, medication shortages, and guidance on how to request direct referrals from GPs to the pharmacy. This could help the public better understand the daily operations of the service and the need to adhere to specific protocols.

7. ****Out of Stock medication**** is prominent nationally for pharmacists. Why can't pharmacists change scripts to ensure a product/alternative could be given to a patient?

Overall, we suggest that Whitehouse Pharmacy share its exceptional practices with other facilities to further strengthen the relationships formed by the management team, staff, owners, and the local community. Everyone we spoke to, including patients and staff, appreciates the pharmacy's positive presence, which likely contributes to the walk-in recommendations to the Patient First initiative made through word of mouth within the community.

Healthwatch would like to acknowledge and commend the efforts of all staff and congratulate them on their work. We also extend our gratitude for your hospitality and the patient feedback and comments provided.

Feedback from the Superintendent.

"Nice to understand what Healthwatch does for the public, and it was a nice opportunity to demonstrate what we do for our patients, which very often isn't documented or recognised. Good to understand how they investigate complaints, and useful for any future concerns we have regarding our patients and how they are treated in the NHS. Thank you "

Caroline

Next Step

The report will now be published on our website for the general public to read, and copies will be forwarded to Whitehouse pharmacy, shared with the Integrated Care Board, Care Quality Commission (CQC) & General Pharmaceutical Council (GPhC), and it will also be added to the next Healthwatch E-Bulletin.

Disclaimer, please note that this report relates to findings observed on the specific dates set out above. Our report is not a representative portrayal of the experiences of all patients, and staff, only an account of what was observed and contributed at the time of this visit.