

We are sharing the latest themes and insights from our work, to inform and empower our registrants and pharmacy owners to deliver trusted, safe, and effective care<sup>1</sup>.

### Inspections

We conducted 399 inspections in Q1, 111 fewer than in the previous quarter, due to reasons including a temporary reduction in inspector capacity during the recruitment and onboarding of new inspectors.

Concern referrals have continued to reduce from 858 in Q3, to 258 in Q1 (*Figure 1*). This follows continued improvements in the triage process.

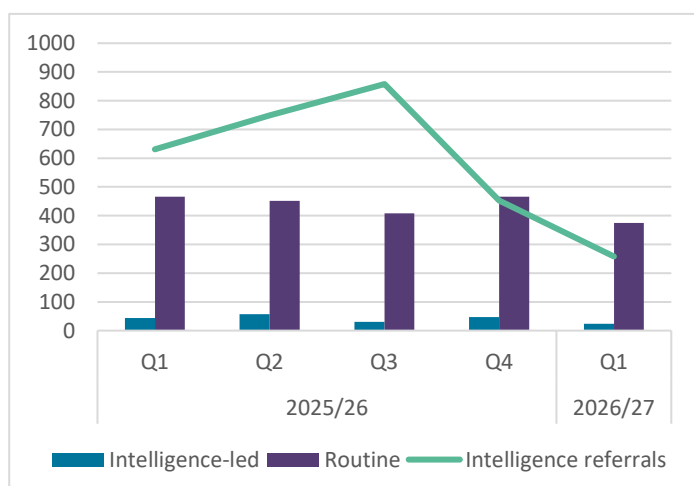


Figure 1: Number of intelligence-led inspections, routine inspections and concern referrals from Q1 2025/26 - Q1 2026/27

The outcomes of routine inspections indicate that internet pharmacies met standards less frequently (77%) in the last quarter, following an increase in previous quarters. All Hospital and Prison pharmacies inspected met all standards again as did 90% of Community pharmacies.

The standards most frequently not met by pharmacies continued to be standard 1.1 (Risk identification and management) and standard 4.3 (Sourcing and safe, secure management of medicines and devices). Reasons were largely unchanged, mostly due to missing or inadequate

standard operating procedures and risk assessments, failures to follow established procedures, poor fridge temperature monitoring, and insufficient expiry date checks.

Positive findings continued to be most frequently associated with standard 2.2 (Staff skills and qualifications), attributed to staff having protected learning and development time.

Standards 1.6 (Record keeping) and 4.2 (Safe and effective service delivery) were again the most commonly identified areas for improvement in Q1. These findings primarily related to maintaining accurate records of consultations, responsible pharmacists, and private prescriptions.

We encourage pharmacy staff to review our **decision making framework**, updated in January, as a useful resource to support pharmacies meet standards.

### Fitness to Practise

The number of FtP concerns increased from 1,737 in Q4 to 2,088 in Q1, ending the downward trend seen in the last two quarters (*Figure 2*). The increase was largely driven by three areas of concern; Concerns about dispensing delays, including late deliveries, stock shortages and poor communication, which doubled from Q4 to 128 in Q1, concerns about medication issues such as refusal increased from 157 in Q4 to 242 in Q1, and concerns about EPS nominations also doubled from Q4 to 131 in Q1.

Of the EPS nomination concerns, 70% related to reports that a patient's nominated pharmacy had been changed without their consent. A **regulate article** about this was updated in February 2026.

<sup>1</sup> Data correct as of 10<sup>th</sup> July 2026, FtP data updated on 28<sup>th</sup> July 2026

Despite the overall increase in concerns, reports about dispensing errors and customer service decreased in Q1 (15% decrease and 12% decrease respectively).

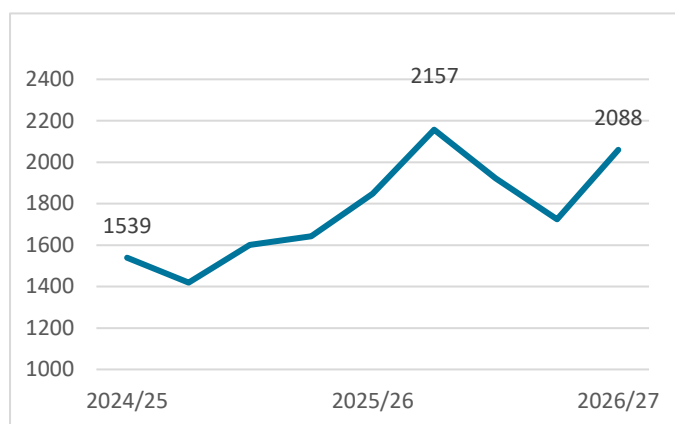


Figure 2: Number of FtP concerns, 2024/25 Q1 - 2026/27 Q1

The proportion of concerns referred for investigation reached a peak in Q1 (184, 10%) suggesting that the introduction of the **Acceptance Criteria** is continuing to reduce the number of inappropriate referrals.

If a concern indicates that a pharmacist's or pharmacy technician's behaviour or practice poses a serious risk to patient safety, we may apply to the FtP Committee (FtPC) for an interim order (IO) while we investigate. This is a temporary restriction placed on a registrant to ensure safety for the registrant and public. In Q1, there were 12 new IOs.

Cases can be closed by the Investigating Committee (IC) or referred on to the FtPC<sup>2</sup>. In Q1, four were closed at IC and 20 were referred to FtPC. Cases closed by FtPC in Q1 (12), primarily involved misconduct, including theft of medication, illegal supply, and sexual misconduct. These continue to be some of the most frequent categories over the past year. Dishonesty mostly resulted in suspension, and misconduct mostly resulted in warnings.

## Queries

Similar to the last year, there were 10,556 queries received by our contact centre this quarter.

Queries relating to foundation training increased sharply following the opening of applications, increasing from 24 in Q4 to 486 in Q1.

Insufficient patient counselling has been a reoccurring theme in both clinical enquiries and inspection findings. In response we have published a **Regulate article** on higher-risk medicines and potential drug interactions, and will monitor its impact on future enquiry volumes.

Our clinical team has been reviewing more cases relating to Look-alike, Sound-alike (LASA) medicines this quarter. Active monitoring of pharmacy-associated deaths also identified two LASA-related deaths in Q1 relating to incorrect prescribing of Atenolol instead of Allopurinol, and Oxybutynin instead of Oxycodone. We have previously shared a case study on how a pharmacy reduced LASA mistakes in our **pharmacy team toolkit**.

Overall, nine deaths were reported in Q1 through Preventing Future Death (PFD) reports, media and legal reports, and Fatal Accident Inquiry (FAI) reports. Dispensing and prescribing errors were among the most common themes identified.

## Media and Engagement

The number of queries from media outlets has declined for the third consecutive quarter, weight management medication continues to be the most frequently asked about subject (14 out of 44 queries).

We held 29 stakeholder meetings and regional roundtables. Registrants shared concerns about pressures in pharmacy, staff wellbeing, patient safety, the use of AI, and the evolving role of pharmacy professionals. The insights gathered have contributed towards a range of actions, including the publication of **guidance** for newly qualified prescribing pharmacists, reviews of our standards and education approach, the launch of our **annual registrant survey**, and shaping an anti-racism roundtable planned for September 2026.

<sup>2</sup> See our website for more detail on how we **manage concerns**