

Registered pharmacy inspection report

Pharmacy Name: Whitworth Chemists Ltd, 7 Healaugh Park, Leven Park, YARM, Cleveland, TS15 9XN

Pharmacy reference: 1030018

Type of pharmacy: Community

Date of inspection: 27/08/2024

Pharmacy context

The pharmacy is in a small retail park in the town of Yarm. It dispenses NHS prescriptions and sells over-the-counter medicines. The pharmacy provides NHS services such as the Pharmacy First Service. And it offers seasonal vaccinations and private travel vaccinations. The pharmacy team provides medicines in multi-compartment compliance packs to help some people in the community take their medicines at the right time. And the pharmacy delivers medicines to people's homes.

Overall inspection outcome

✓ Standards met

Required Action: None

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

Summary of notable practice for each principle

Principle	Principle finding	Exception standard reference	Notable practice	Why
1. Governance	Standards met	N/A	N/A	N/A
2. Staff	Standards met	N/A	N/A	N/A
3. Premises	Standards met	N/A	N/A	N/A
4. Services, including medicines management	Standards met	N/A	N/A	N/A
5. Equipment and facilities	Standards met	N/A	N/A	N/A

Principle 1 - Governance ✓ Standards met

Summary findings

The pharmacy suitably identifies and manages risks with its services. It has written procedures relevant to its services and team members follow these to help them provide services safely. Pharmacy team members learn and improve from mistakes. They keep people's confidential information secure. And they know how to identify situations where vulnerable people need help. The pharmacy keeps the records required by law.

Inspector's evidence

The pharmacy had a set of up-to-date standard operating procedures (SOPs) to help pharmacy team members manage risk with providing services. These included for dispensing, Responsible Pharmacist (RP) regulations and controlled drug (CD) management. The SOPs made it clear to which of the different roles within the team they applied. Team members accessed SOPs via an electronic platform. This held a record of which SOPs the team member had read and when, as well as highlighting any that were outstanding. It showed all team members were up to date with reading the SOPs. The RP, who was also the pharmacy manager, explained that team members received notification of updates to procedures and quizzes to ensure their knowledge was up to date via email from the pharmacy's head office.

The pharmacy team recorded near miss errors, and from the records seen, this was done on a regular basis. These errors were mistakes identified before people received their medicines. Team members took responsibility for recording these errors when they were highlighted to them, as well as correcting the mistake. This meant they had the opportunity to reflect on what had happened. To support team members recording these in real time, they could use their mobile device to scan a printed barcode on the wall of the dispensary to directly access the pharmacy's online recording system. This meant that team members did not have to wait for one of the dispensary computers to become free or that those using the computer felt rushed to complete their task. The RP completed a documented analysis of these errors monthly to produce learning points for the team. These were shared with the team in informal meetings. The pharmacy also had a recorded procedure for managing dispensing errors. These were errors that were identified after the person had received their medicines. The team described learning and improvements which had been implemented following a previous dispensing error. Following the error, which involved similar sounding medications for Parkinson's disease, the team separated the two types of medicines out to different parts of the dispensary shelving. And they completed some learning around the different types of medication that are available for Parkinson's disease.

The pharmacy had a procedure for dealing with complaints. And it advertised this to people using its services, with a notice in the pharmacy retail area. The team aimed to resolve any complaints or concerns locally. If they were unable to resolve the complaint, they escalated it to the pharmacy's head office or superintendent pharmacist (SI). The pharmacy had current professional indemnity insurance. The Responsible Pharmacist had their RP notice on display which meant people could see details of the pharmacist on duty. Team members knew what activities could and could not take place in the absence of the RP. And they knew what their own responsibilities were based on their role within the team.

A sample of RP records checked during the inspection were completed correctly. The pharmacy kept complete records of private prescriptions and emergency supplies electronically within the dispensing

system. The team completed weekly checks of the running balance in the CD register against the physical stock, as well as a check each time a controlled drug was dispensed. Random balance checks against the quantity of stock during the inspection were correct. The pharmacy kept an electronic register of CDs returned by people, and there were recent records of these returns being destroyed.

The pharmacy had a privacy policy which it advertised to people using its services in the retail area. It had a procedure for keeping people's personal information safe and it kept confidential waste and general waste separate. Team members used a shredder to destroy confidential waste. They completed this activity daily to ensure a backlog did not build up. The pharmacy had a procedure for the safeguarding of vulnerable people. The team had completed safeguarding training to support them to work to this. One of the members of the team who had previously worked as a healthcare professional in another setting explained how they used their experience to support other team members where there may be a concern about a vulnerable person that used the pharmacy.

Principle 2 - Staffing ✓ Standards met

Summary findings

The pharmacy has a team with an appropriate range of experience and skills to safely provide its services. Team members work well together and within the scope of their competence. And they have opportunities to complete ongoing training so they can develop their knowledge. Pharmacy team members know how to raise concerns, if needed.

Inspector's evidence

At the time of the inspection, the RP was the regular pharmacist and manager of the pharmacy. They were supported by two qualified dispensers. Other team members who were not present during the inspection were another three qualified dispensers. The team appeared small for the pharmacy's location and workload; however the team were observed to be calmly managing their work throughout the inspection even during busier periods. Team members worked overtime to cover periods of absence within the team. A trained delivery driver also worked part time for the pharmacy.

The competence and skill mix of the team appeared appropriate for the nature of the business and the services provided. The RP explained that they highlighted how one of the qualified dispensers in the team had gained their qualification working in another pharmacy that did not offer over-the-counter medicines. For this reason, this team member was undertaking the medicines counter assistant course to have the required competence to cover the range of roles needed when working in the pharmacy. And the dispenser explained how the RP supported their learning and development. Other team members completed various training via the company's online portal to support their development.

The pharmacy team asked appropriate questions when selling medicines over the counter and referred to the RP at appropriate times. Team members had a good knowledge of medicines that had the potential for misuse. And they were confident challenging requests for over-the-counter medicines that they deemed inappropriate.

The pharmacy team felt comfortable discussing when things went wrong openly with the wider team. Team members knew how to raise concerns. This would typically be with the pharmacy manager, but they also had access to the superintendent. And they were confident that any concerns raised would be listened to and appropriate actions taken to improve the services the pharmacy was providing. Although the pharmacy team was set targets relating to the delivery of services, team members explained that these were fair and meeting them was compatible with providing a safe service to the people who use the pharmacy.

Principle 3 - Premises ✓ Standards met

Summary findings

The pharmacy premises are clean, secure, and provide a suitable environment for the services provided. And the pharmacy has a consultation room to meet the needs of people requiring privacy when using its services.

Inspector's evidence

The pharmacy was in a good-sized premises. It consisted of a large retail area and an adequate dispensary. The appearance of the pharmacy was generally professional. Although this was undermined by a number of ceiling tiles requiring replacement. The RP explained that this had been previously reported to the pharmacy's head office and was awaiting resolution. The retail area of the pharmacy was open plan and had seating for people to use when waiting. The pharmacy counter provided a barrier to prevent unauthorised access to the dispensary.

The dispensary appeared a suitable size for the workload being undertaken. There was a room set behind the dispensary where multi-compartment compliance packs were assembled and checked. Walkways were kept clear to minimise trip hazards. And there was sufficient storage space for stock, assembled medicines and medical devices. The layout of the dispensary supported the supervision of medicines sales and queries. The lighting and temperature were suitable to work in and to provide healthcare services. The dispensary had a sink with access to hot and cold water for professional use and hand washing. There were staff and toilet facilities that were hygienic.

The pharmacy had a private consultation room which was accessed from the retail area of the pharmacy. The consultation room was a good size and suitably constructed for the purpose it served. The pharmacy team kept the hygiene of the premises to an adequate standard, with team members completing cleaning tasks as required.

Principle 4 - Services ✓ Standards met

Summary findings

The pharmacy sources its medicines from recognised suppliers. And it stores and manages them appropriately. Pharmacy team members complete regular checks to ensure medicines are suitable for supply. And they respond appropriately when they receive alerts about the safety of medicines. Team members appropriately manage the delivery of services safely and effectively. And they take opportunities to provide people with advice on higher-risk medications.

Inspector's evidence

The pharmacy had level access from the car park. The pharmacy team explained how they supported people with mobility issues to access the pharmacy's services. This included offering some people kerbside collections, where team members would take medicines out to people in their cars parked outside the pharmacy. The pharmacy provided a medicines delivery service. The assembled bags of medicines for delivery were stored separately in preparation for the delivery driver. The driver used an application on their work phone which kept an audit trail of the deliveries completed. This also allowed the team at the pharmacy to view the live progress of deliveries for the day, to help them deal with any queries. The driver returned any failed deliveries back to the pharmacy on the same day, after posting a note to people whose deliveries could not be completed.

The pharmacy offered a private travel clinic. This mainly consisted of administering the recommended vaccines for visiting certain countries and offering preventative medication for malaria, if appropriate. The clinic was run on an appointment only basis, as only the regular pharmacist had undertaken the necessary training and familiarisation with the Patient Group Directions (PGDs) to deliver the service. The pharmacy kept records of the consultations carried out as part of this clinic and from the examples checked these contained full details of medicines supplied including batch numbers and expiry dates.

The pharmacy provided a large number of people with their medicines dispensed in multi-compartment compliance packs. Team members ordered people's prescriptions in advance of the compliance pack being due, which allowed enough time to receive the prescriptions back, order any necessary stock and deal with any queries. They also kept an audit trail of which ordered prescriptions had been received back to easily highlight if any were outstanding. The pharmacy used a record for each person that listed their current medication, dosage, and dose times. This was referred to throughout the dispensing and checking of the packs. The team also maintained other audit trails such as for medication changes and hospital admissions on this record. From a sample of packs checked, the full dosage instructions, warnings, and medication descriptions were included. And patient information leaflets were routinely supplied with these packs.

The pharmacy team dispensed prescriptions using baskets, which kept prescriptions and their corresponding medicines separate from others. Pharmacy team members signed dispensing labels during dispensing and checking. This maintained an audit trail of the team members involved in the process. They used stickers to highlight if a prescription contained a fridge item, to ensure correct storage temperatures were maintained. And the team attached notes to bags to inform people that they had reached the end of their batch of repeat dispensing prescriptions. This reminded people to request their next batch of prescriptions to help ensure they did not run out of medicines.

The RP provided counselling on a range of higher-risk medicines when supplying them to people. They attached notes to prescriptions and filed them in a designated area if they contained medications that required further advice and counselling. This meant that these prescriptions could only be handed out after the RP had the opportunity to speak to the person collecting. The pharmacy team showed a good understanding of the requirements for dispensing valproate for people who may become pregnant and of the recent further updates involving valproate and other medicines with similar risks. The team dispensed prescriptions for these medicines in the manufacturer's original packs. The RP kept records on the pharmacy's PMR of significant conversations and interventions that took place in relation to higher-risk medicines.

When the pharmacy could not entirely fulfil the complete quantity required on a prescription, team members created an electronic record of what was owed on the PMR system. And they gave people a note detailing what was owed. This meant the team had a record of what was outstanding to people and what stock was needed. The team checked outstanding owings daily and were managing these well. The pharmacy had a procedure for checking expiry dates of medicines. Team members checked defined sections of the dispensary and recorded when the expiry dates of medicines in a section had been checked. This ensured that the team had an audit trail of expiry dates checked and the details of any medicines that were expiring soon. This allowed the team to remove the stock they knew to be expiring at an appropriate time to avoid it being used. Evidence was seen of medicines highlighted due to their expiry date approaching or because the shelf life was reduced after being opened. The pharmacy kept unwanted medicines returned by people in segregated containers, while awaiting collection for disposal.

The pharmacy obtained medicines from licensed wholesalers and specials manufacturers. The pharmacy held medicines requiring cold storage in three medical fridges equipped with thermometers. Team members monitored and recorded the temperatures of the fridges daily. These records showed cold-chain medicines were stored at appropriate temperatures. A check of the thermometer during the inspection showed temperatures were within the permitted range. The pharmacy held its CDs in a secure cabinet. It had a documented procedure for responding to drug safety alerts and manufacturer's recalls. It received these via an online platform, and this also held records of any actions taken in response to these alerts.

Principle 5 - Equipment and facilities ✓ Standards met

Summary findings

The pharmacy has the equipment it needs to provide its services. Team members use the equipment in a way that protects people's private information.

Inspector's evidence

Pharmacy team members had access to a range of hard-copy reference materials and internet access for up-to-date information and further support tools, including for the delivery of the travel clinic. There was equipment available for the services provided which included an otoscope, a digital thermometer, and a blood pressure monitor with several cuff sizes. And the RP advised that it was the company's policy to replace these annually to ensure these remain fit for purpose. Electrical equipment was visibly free from wear and tear and appeared in good working order. The pharmacy had a range of clean counting triangles and CE marked measuring cylinders for liquid medicines preparation. The team used separate equipment when counting and measuring higher-risk medicines. They used personal protective equipment, such as disposable gloves when handling medicines.

The pharmacy's computers were password protected and access to people's records was restricted by the NHS smart card system. Computer screens were protected from unauthorised view and a cordless telephone was available to take private conversations in quieter areas. The pharmacy stored completed prescriptions and assembled bags of medicines away from public reach in a restricted area.

What do the summary findings 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.