

Registered pharmacy inspection report

Pharmacy Name: Asif's New Pharmacy, 249-251 London Road,
Hadleigh, BENFLEET, Essex, SS7 2RF

Pharmacy reference: 1030987

Type of pharmacy: Community

Date of inspection: 22/11/2023

Pharmacy context

The pharmacy is located on a busy high street in a town centre in a largely residential area. It receives most of its prescriptions electronically. The pharmacy provides NHS dispensing services, the New Medicine Service, COVID vaccinations, flu vaccinations and blood pressure checks. It also provides medicines as part of the Community Pharmacist Consultation Service. The pharmacy supplies medicines in multi-compartment compliance packs to a large number of people who live in their own homes and need this support. And it provides substance misuse medications to a small number of people. This was a targeted inspection following concerns raised with the GPhC and not all standards were inspected on this visit.

Overall inspection outcome

Standards not all met

Required Action: Improvement Action Plan; Statutory Enforcement

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 not all met	1.1	Standard not met	The pharmacy does not always identify or manage the risks associated with all its services. It orders large volumes of medicines liable to abuse, and it cannot adequately account for them.
		1.7	Standard not met	The pharmacy does not always keep people's personal information appropriately secure.
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 not all met	4.2	Standard not met	The pharmacy does not always provide its services safely. It orders excessive amounts of codeine linctus and promethazine elixir and is unable to properly account for them. And it has limited systems to ensure that these medicines are supplied safely.
		4.3	Standard not met	The pharmacy does not always store its medicines securely. And it cannot sufficiently demonstrate that it stores all its medicines requiring cold storage appropriately.
5. Equipment and facilities	Standards met	N/A	N/A	N/A

Principle 1 - Governance Standards not all met

Summary findings

The pharmacy does not adequately manage all the risks associated with its services. It orders large amounts of codeine linctus and other medicines liable to abuse, and it is unable to adequately account for them. This increases the risks to the wider public. The pharmacy does not always appropriately protect people's personal information. It largely keeps the records it needs to by law. But it does not always ensure its responsible pharmacist record is filled in properly. So, it could be harder for the pharmacy to show who had been the responsible pharmacist if there was a query.

Inspector's evidence

As stated in the context, this was a targeted inspection and focused mainly on how the pharmacy was managing and supplying some higher-risk over-the-counter medicines. The pharmacy had up to date standard operating procedures (SOPs) and team members had signed to show that they had read, understood, and agreed to follow them. The pharmacy's SOP 'the safe and effective sale of medicines' had been updated recently to include codeine linctus as a medicine that should only be sold by the pharmacist.

The right responsible pharmacist (RP) notice was clearly displayed, and the RP record was largely completed correctly. But there were several days recently where the RP record had not been completed. The RP said that he would speak with the superintendent pharmacist (SI) as he was working at the pharmacy for those days and ensure that it was completed. Controlled drug (CD) registers examined were filled in correctly, and the CD running balances were checked at regular intervals. The recorded quantity of one CD item checked at random was not the same as the physical amount of stock available. The responsible pharmacist said that he would undertake an investigation to establish why the balance did not match the stock. The pharmacy had current professional indemnity insurance. The private prescription records appeared to be completed correctly.

Confidential waste was shredded, computers were password protected and the people using the pharmacy could not see information on the computer screens. Team members were using the SIs smartcard to access NHS electronic services. And the SI was not working on the day of the inspection. The sticker with the SIs personal identification number for the smartcard was attached to the card. People's personal information on some bagged items waiting collection was clearly visible from the counter. This had been brought to the attention of the RP and SI during a recent visit, but it had not been addressed. The bagged items were removed from this area and the RP provided assurances again that the broken door to the cabinet where these were kept would be fixed.

Principle 2 - Staffing ✓ Standards met

Summary findings

The pharmacy has enough team members to keep up to date with its workload. And they do the right accredited training for their roles.

Inspector's evidence

There was one pharmacist, three trainee dispensers, one trained MCA and one trainee MCA working during the inspection. The pharmacy was up to date with its dispensing and team members communicated effectively to ensure the workload was well managed.

The MCA appeared confident when speaking with people. She explained that she would refer to the pharmacist if a person asked to purchase a medicine which could be misused or abused. And she was aware of the restrictions on sales of medicines containing pseudoephedrine. She knew which questions to ask to establish whether the medicines were suitable for the person they were intended for.

Principle 3 - Premises ✓ Standards met

Summary findings

People can have a conversation with a team member in a private area. The premises provide a safe, secure, and clean environment for the pharmacy's services.

Inspector's evidence

The pharmacy was secured from unauthorised access. It was bright, clean, and tidy throughout which presented a professional image. Pharmacy-only medicines were kept behind the counter. There was a clear view of the medicines counter from the dispensary and the pharmacist could hear conversations at the counter and could intervene when needed. Air conditioning was available, and the room temperature was suitable for storing medicines.

The pharmacy had several consultation rooms. These were accessible to wheelchair users and were in the shop area. They were suitably equipped and well-screened. Conversations at a normal level of volume in the consultation room could not be heard from the shop area.

Principle 4 - Services Standards not all met

Summary findings

The pharmacy does not provide all its services safely. It has limited systems to ensure that supplies or sales of certain higher-risk medicines are made safely. And it is unable to satisfactorily account for the large quantities of codeine linctus and promethazine elixir that it orders. The pharmacy does not keep all its medicines secure. And it cannot sufficiently demonstrate that it stores all its medicines requiring refrigeration at the appropriate temperatures. However, the pharmacy gets its medicines from reputable suppliers. People with a range of needs can access the pharmacy's services.

Inspector's evidence

There was step-free access to the pharmacy through a wide entrance. Team members had a clear view of the main entrance from the medicines counter and could help people into the premises where needed. Services and opening times were clearly advertised and a variety of health information leaflets was available.

The RP said that he sold around four or five bottles of codeine linctus each week to people who said that their GP had recommended it. But he did not undertake any checks to ensure that the GPs had recommended it for use. And the pharmacy did not keep a record of any sales which had been refused. The RP said that he only sold this medicine to people over the age of 18. The pharmacy had recently received unusually large quantities of codeine linctus and promethazine elixir which are medicines that are known to be liable to abuse or misuse. But there was little evidence of them being sold or supplied in these volumes. And the levels of stock the pharmacy held did not reflect the quantities ordered. When the volumes of the orders placed were put to the RP and on a previous visit to the SI, they said that they did not know that those quantities had been ordered.

Most fridge temperatures were checked daily, and maximum and minimum temperatures were recorded, although a second fridge in the storeroom was showing temperatures outside the appropriate range. And a fridge used to store vaccinations did not have a thermometer so the pharmacy could not be sure that these were being stored at the right temperatures.

The pharmacy obtained its stock from licensed wholesale dealers. Stock was stored in an organised manner in the dispensary. But the pharmacy did not keep all its medicines securely. Expiry dates were checked regularly, and short-dated items were marked. There were no date-expired items found in with dispensing stock during a spot check and medicines were kept in their original packaging. CDs requiring safe custody were stored in accordance with legal requirements, and they were kept secure. Denaturing kits were available for the safe destruction of CDs. Returned CDs were recorded in a register and destroyed with a witness, and two signatures were recorded.

Principle 5 - Equipment and facilities ✔ Standards met

Summary findings

The pharmacy has the equipment it needs to provide its services safely. It uses its equipment to help protect people's personal information.

Inspector's evidence

Suitable equipment for measuring liquids was available and separate liquid measures were used to measure certain medicines only. Triangle tablet counters were available and clean. A separate counter was marked for cytotoxic use only. This helped avoid any cross-contamination. Up-to-date reference sources were available in the pharmacy and online. The phone in the dispensary was portable so it could be taken to a more private area where needed.

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.