

Registered pharmacy inspection report

Pharmacy name: The Chiefcornerstone Ltd

Address: 125 Uxbridge Road, Money Hill Parade, Rickmansworth, Hertfordshire, WD3 7DN

Pharmacy reference: 1032286

Type of pharmacy: Community

Date of inspection: 03/12/2024

Pharmacy context and inspection background

The pharmacy is in a parade of businesses in a residential area in Rickmansworth. It dispenses NHS and private prescriptions, sells over-the-counter medicines and offers healthcare advice. It supplies medicines in multi-compartment compliance packs for people who have difficulty managing their medicines. The pharmacy also provides NHS Pharmacy First and new medicines services. The pharmacy runs a community and online pharmacy business from the pharmacy's premises. It sells medicines and other items through websites www.theonlychemist.com and www.betterchemist.com.

This was a full inspection. The pharmacy was last inspected Dec 2017.

Overall outcome: Standards not all met

Required Action: Improvement Action Plan

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

Standards not met

Standard 1.1

- The pharmacy does not adequately assess and manage the risks involved in selling medicines

online. There are no documented risk assessments for the services provided by the pharmacy. For example delivery and supplying medicines outside the UK. The questionnaires which people complete contain the same questions for all medicines and are not tailored to a specific medicine or group of medicines. The pharmacy uses the same checks for packages being sent to people outside the UK and within the UK. And has not checked the laws covering the export or import of medicines if the intended recipient is outside the UK.

Standard 1.3

- The pharmacy does not have an adequate up-to-date sales protocols covering its face-to-face and online sales.

Standard 1.7

- The pharmacy allows its team member to prepare multicompartiment compliance packs at the medicines counter. This is so she can serve people at the counter more easily than if she was preparing the compliance packs in the dispensary and had to watch for people at the counter. This presents a risk of people and children coming to the counter and seeing who the packs are for and potentially having access to prescription only medicines.

Standard 2.2

- The pharmacy does not provide its team with additional training for parts of its online service nor ongoing training to keep their skills and knowledge up to date.

Standard 3.2

- The signposted consultation room is very untidy and does not present a professional image. People have to go through the dispensary to access the consultation room so they may be able to see patient sensitive information and medicines on the shelves may be at risk. The websites (www.theonlychemist.com and www.betterchemist.com) do not include all the required information in line with the GPhC Guidance for registered pharmacies providing services at a distance, including on the internet (March 2022).

Standard 4.2

- The pharmacy does not consistently manage its services, or deliver them safely and effectively. This includes preparing compliance packs at the medicines counter where people could see private information and access prescription only medicines. For checks made when selling medicines online, the responsible pharmacist manually checked through previous orders to detect duplicate orders and valid forms of identity. But did not describe checking the laws covering the export or import of medicines if the intended recipient is outside the UK and if the supply of a particular medicine is covered by local laws.

Standard 4.4

- The pharmacy does not routinely maintain its records to show what actions it takes to remove affected items and protect people when it receives alerts or recalls about medicines issued by the Medicines and Healthcare products Regulatory Agency (MHRA).

Standards that were met with areas for improvement

Standard 1.2

- The pharmacy does not regularly conduct audits to monitor the safety and quality of services. And this could include audits of near misses, advice given to people purchasing medicines, or decisions to make or refuse to supply a medicine.

Standard 1.8

- The pharmacy does not have a specific documented safeguarding policy to guide the team on the process to take in the event of a concern for vulnerable people associated with the online service. The pharmacy does not fully address any potential risks associated with vulnerable people using this service.

Principle 1: The governance arrangements safeguard the health, safety and wellbeing of patients and the public

Summary outcome: Standards not all met

Table 1: Inspection outcomes for standards under principle 1

Standard	Outcome of individual standard	Area for improvement/ Area of good or excellent practice
1.1 - The risks associated with providing pharmacy services are identified and managed	Not met	
1.2 - The safety and quality of pharmacy services are regularly reviewed and monitored	Met	Area for improvement
1.3 - Pharmacy services are provided by staff with clearly defined roles and clear lines of accountability	Not met	
1.4 - Feedback and concerns about the pharmacy, services and staff can be raised by individuals and organisations, and these are taken into account and action taken where appropriate	Met	Standard met
1.5 - Appropriate indemnity or insurance arrangements are in place for the pharmacy services provided	Met	Standard met
1.6 - All necessary records for the safe provision of pharmacy services are kept and maintained	Met	
1.7 - Information is managed to protect the privacy, dignity and confidentiality of patients and the public who receive pharmacy services	Not met	
1.8 - Children and vulnerable adults are safeguarded	Met	Area for improvement

Principle 2: Staff are empowered and competent to safeguard the health, safety and wellbeing of patients and the public

Summary outcome: Standards not all met

Table 2: Inspection outcomes for standards under principle 2

Standard	Outcome of individual standard	Area for improvement/ Area of good or excellent practice
2.1 - There are enough staff, suitably qualified and skilled, for the safe and effective provision of the pharmacy services provided	Met	
2.2 - Staff have the appropriate skills, qualifications and competence for their role and the tasks they carry out, or are working under the supervision of another person while they are in training	Not met	
2.3 - Staff can comply with their own professional and legal obligations and are empowered to exercise their professional judgement in the best interests of patients and the public	Met	
2.4 - There is a culture of openness, honesty and learning	Met	
2.5 - Staff are empowered to provide feedback and raise concerns about meeting these standards and other aspects of pharmacy services	Met	
2.6 - Incentives or targets do not compromise the health, safety or wellbeing of patients and the public, or the professional judgement of staff	Met	

Principle 3: The environment and condition of the premises from which pharmacy services are provided, and any associated premises, safeguard the health, safety and wellbeing of patients and the public

Summary outcome: Standards not all met

Table 3: Inspection outcomes for standards under principle 3

Standard	Outcome of individual standard	Area for improvement/ Area of good or excellent practice
3.1 - Premises are safe, clean, properly maintained and suitable for the pharmacy services provided	Met	
3.2 - Premises protect the privacy, dignity and confidentiality of patients and the public who receive pharmacy services	Not met	
3.3 - Premises are maintained to a level of hygiene appropriate to the pharmacy services provided	Met	
3.4 - Premises are secure and safeguarded from unauthorized access	Met	
3.5 - Pharmacy services are provided in an environment that is appropriate for the provision of healthcare	Met	

Principle 4: The way in which pharmacy services, including management of medicines and medical devices, are delivered safeguards the health, safety and wellbeing of patients and the public

Summary outcome: Standards not all met

Table 4: Inspection outcomes for standards under principle 4

Standard	Outcome of individual standard	Area for improvement/ Area of good or excellent practice
4.1 - The pharmacy services provided are accessible to patients and the public	Met	
4.2 - Pharmacy services are managed and delivered safely and effectively	Not met	
4.3 - Medicines and medical devices are: obtained from a reputable source; safe and fit for purpose; stored securely; safeguarded from unauthorized access; supplied to the patient safely; and disposed of safely and securely	Met	
4.4 - Concerns are raised when medicines or medical devices are not fit for purpose	Not met	

Principle 5: The equipment and facilities used in the provision of pharmacy services safeguard the health, safety and wellbeing of patients and the public

Summary outcome: **Standards met**

Table 5: Inspection outcomes for standards under principle 5

Standard	Outcome of individual standard	Area for improvement/ Area of good or excellent practice
5.1 - Equipment and facilities needed to provide pharmacy services are readily available	Met	
5.2 - Equipment and facilities are: obtained from a reputable source; safe and fit for purpose; stored securely; safeguarded from unauthorized access; and appropriately maintained	Met	
5.3 - Equipment and facilities are used in a way that protects the privacy and dignity of the patients and the public who receive pharmacy services	Met	

What do the summary outcomes 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.