General Pharmaceutical Council

Registered pharmacy inspection report

Pharmacy Name: Superdrug Pharmacy, 2 Market Place, LOUGHBOROUGH, Leicestershire, LE11 3EP

Pharmacy reference: 1034203

Type of pharmacy: Community

Date of inspection: 25/01/2024

Pharmacy context

This is a community pharmacy situated in the town centre. Most of its activity is dispensing NHS prescriptions and selling medicines over the counter. The pharmacy delivers medicines to people's homes. And it supplies medicines in multi-compartment compliance packs to some people.

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

Overall, the pharmacy identifies and manages the risks associated with the provision of its services. The pharmacy manages people's electronic personal information safely. And it keeps the records it needs to by law. The pharmacy has procedures to learn from its mistakes.

Inspector's evidence

The pharmacy had a set of electronic standard operating procedures (SOPs) which were routinely updated by the head office. The locum pharmacist could not access the online record for SOPs. The pharmacy had paper SOPs in a folder, but they were all due a review. The locum pharmacist said that he had read the current SOPs which had been sent to him by the company. Staff were seen dispensing medicines and handing medicines out to people safely. Staff understood how to sell medicines safely and knew the advice to give during a sale. Staff knew that prescriptions were valid for six months apart from some controlled drugs (CDs) which were valid for 28 days. Some, but not all prescriptions containing CDs were highlighted to remind staff of their shorter validity. This might mean that some medicines were supplied beyond their 28-day validity.

The pharmacy had processes for learning from dispensing mistakes that were identified before reaching a person (near misses) and dispensing mistakes where they had reached the person (errors). The pharmacist discussed near misses with the member of staff at the time they were found, and then recorded them in the electronic near miss log. Records showed that near miss logs were reviewed monthly. The December review had looked at the causes of the near misses and indicated that learning points had been shared with the team.

The responsible pharmacist (RP) certificate on display showed the name of the previous pharmacist. The pharmacist changed the notice to display the correct name. They had signed into the RP log. The pharmacy maintained the necessary records to support the safe delivery of pharmacy services. These included the RP record, the private prescription book, and the CD register. Team members completed checks of the physical stock against the register's running balance weekly. Patient-returned CDs were recorded in a designated register.

The pharmacy had a complaints procedure and an information governance policy. Access to the electronic patient medication record (PMR) was password protected. Confidential information was stored and destroyed securely. Professional indemnity insurance was in place. The pharmacy understood safeguarding requirements and could explain the actions they would take to safeguard a vulnerable person. The pharmacy team had completed safeguarding training but did not know what to do if someone 'asked for Ani.' There were posters displayed in the consultation room about the 'safe space initiative' and about 'ask for Ani.' The team said they would read them.

Principle 2 - Staffing ✔ Standards met

Summary findings

The pharmacy’s team members work together to manage the day-to-day workload within the pharmacy. They are suitably trained for the roles they undertake. The pharmacist can raise concerns if needed.

Inspector's evidence

During the inspection, the pharmacy team consisted of a locum pharmacist and a locum pharmacy technician. The pharmacy’s regular pharmacist was at a training day and the regular dispenser worked part-time. The team managed that day’s workload of the pharmacy.

The pharmacist knew how to raise a concern if they had need to. They had work contact numbers for both the regular pharmacist and the area manger. Both the pharmacist and the pharmacy technician were up to date with their continual professional development requirements. The pharmacist had completed most of the training they needed to provide the new ‘Pharmacy First’ NHS service, but the pharmacy technician had not completed any training about the service.

Principle 3 - Premises ✔ Standards met

Summary findings

The pharmacy premises are mainly suitable for the services provided. The consultation room provides reasonable privacy to people who want a private conversation with a team member. The pharmacy keeps its premises safe, secure, and appropriately maintained.

Inspector's evidence

The premises were comprised of a large retail area to the front and the pharmacy at the rear. The dispensary was elevated above the medicines counter and the pharmacist was positioned so they could intervene in conversations at the medicines counter if required. The dispensary was small in size but was generally kept reasonably tidy. There was air conditioning to provide suitable ambient temperatures, and hot and cold running water was available. One small-sized consultation room was available for people to have a more private conversation with pharmacy staff. It did not have a ceiling, which meant that conversations may not always be kept private. Team members explained that music played in the retail space provided some degree of privacy. Unauthorised access to the pharmacy was prevented during working hours and when closed.

Principle 4 - Services ✔ Standards met

Summary findings

The pharmacy’s healthcare services are suitably managed. The pharmacy gets its medicines and medical devices from reputable sources. It stores them safely and it knows the right actions to take if medicines or devices are not safe to use to protect people’s health and wellbeing. But the pharmacy doesn't always identify prescriptions for people where additional advice might be appropriate. This might mean the pharmacy misses opportunities to make sure people have a good understanding of the medicines they are taking.

Inspector's evidence

The pharmacy had an automatic door and flat access which provided good access for people with a disability or a pushchair to get into the pharmacy. The pharmacy team had access to signposting information so they could direct people to local health services if required. Pharmacy medicines were stored out of reach of the public. There was a notice on display reminding staff of the medicines which required referring to the pharmacist. This included painkillers containing codeine. The pharmacy technician was seen asking the pharmacist for advice where she was not sure if the sale of an over-the-counter medicine was appropriate. The pharmacy knew the advice about pregnancy prevention that should be given to people in the at-risk group who took sodium valproate and had implemented the latest advice. The pharmacist gave some advice to people using the pharmacy's services. This included advice when they had a new medicine or if their dose changed. But the locum pharmacist did not highlight these medicines so the team might miss opportunities to counsel patients when the medicines are handed out. The locum pharmacist was not sure of the services that the pharmacy provided so people might not be able to access all the services that the pharmacy usually provided.

The pharmacy used a dispensing audit trail which included use of 'dispensed by' and 'checked by' boxes on the medicine label to help identify who had done each task. Baskets were used to keep medicines and prescriptions for different people separate to reduce the risk of error. The pharmacy supplied medicines in multi-compartment compliance packs to people living in the community to help them take their medicines at the right time.

Medicines were stored on shelves and in cupboards in their original containers. The pharmacy team had a process for date checking medicines. A check of a small number of medicines did not find any that were out of date. CDs were stored appropriately. Some stock medicines which required cold storage were pushed to the back of the fridge. This could reduce air flow and increased the risk that they might not be stored at the right temperature. A record of invoices showed that medication was obtained from licensed wholesalers. The pharmacist explained the process for managing drug alerts which included a record of the action taken.

Principle 5 - Equipment and facilities ✔ Standards met

Summary findings

The pharmacy has the equipment and facilities it needs for the services it provides. It maintains its equipment so that it is safe to use.

Inspector's evidence

The pharmacy used suitable measures for measuring liquids. The pharmacy had up-to-date reference sources. Records showed that the fridges were in working order and stored medicines within the required range of 2 and 8 degrees Celsius. The pharmacy's portable electronic appliances had last been tested in October 2023 to make sure they were safe.

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.