

# Registered pharmacy inspection report

**Pharmacy Name:** Osterley Park Pharmacy, 165 Thornbury Road,  
Osterley, ISLEWORTH, Middlesex, TW7 4QG

**Pharmacy reference:** 1035049

**Type of pharmacy:** Community

**Date of inspection:** 14/11/2022

## Pharmacy context

This is an independent community pharmacy. It is on a parade of local shops and businesses in the village of Osterley in Isleworth. It provides a range of services including dispensing prescriptions. And it has a selection of over-the counter medicines and other pharmacy related products for sale. The pharmacy dispenses medicines into multi-compartment compliance packs for people who have difficulty managing their medicines.

## 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
<b>1. Governance</b>	Standards met	N/A	N/A	N/A
<b>2. Staff</b>	Standards met	N/A	N/A	N/A
<b>3. Premises</b>	Standards met	N/A	N/A	N/A
<b>4. Services, including medicines management</b>	Standards met	N/A	N/A	N/A
<b>5. Equipment and facilities</b>	Standards met	N/A	N/A	N/A

## Principle 1 - Governance ✓ Standards met

### Summary findings

The pharmacy has suitable procedures to identify and manage risk. It has written procedures in place to help ensure that its team members work safely and effectively. And it has insurance to cover its services. The pharmacy's team members know how to protect the safety of vulnerable people. And, in general, they keep people's private information safe.

### Inspector's evidence

The pharmacy had a system for recording its mistakes electronically. The responsible pharmacist (RP) was also the director and superintendent pharmacist (SP). And he worked at the pharmacy full time. He described how he highlighted and discussed 'near misses' and errors as soon as possible with the team member involved to help prevent the same mistake from happening again. And in response to a near miss mistake, he had separated look-alike sound-alike medicines (LASAs), such as enalapril 20mg tablets and escitalopram 20mg tablets. But while the team recorded its mistakes, it did not fully record what it had learned or what it would do differently next time. The RP agreed that if they had more details of what they had learned from their mistakes they could review them and monitor improvement more effectively. And it would provide the team with a better opportunity to prevent mistakes and continue to learn.

The pharmacy had put measures in place to keep people safe from the transfer of infections. The team had a regular cleaning routine, and it cleaned the pharmacy's work surfaces and contact points regularly. The pharmacy had hand sanitiser for team members and other people to use. And it had put screens up at its medicines counter. The pharmacy had a set of standard operating procedures (SOPs) to follow. And the SOPs were up to date. When SOPs were updated, the SP highlighted the changes in red to make it easier for staff to see what the changes were. Staff appeared to understand their roles and responsibilities. The medicines counter assistant (MCA) was also a dispensing assistant (DA). And she consulted the pharmacist when she needed his advice and expertise. She alerted the pharmacist after someone enquired about their prescription. The RP had placed his RP notice on display where people could see it. The notice showed his name and registration number as required by law.

People could give feedback on the quality of the pharmacy's services directly to the pharmacy's team members. They could also give feedback directly to the superintendent pharmacist (SP). Recent customer comments indicated that many people were unhappy if the pharmacy did not have their medicines in stock. Or when there were manufacturers' delays. And so, team members spent time contacting GPs to arrange alternatives so that people did not go without their medicines. They also encouraged people to allow more time between ordering their prescriptions and collecting them. They did this so that people gave the pharmacy team time enough to order their medicines, sort out any problems and then get their medicines ready. The pharmacy team could provide people with details of where they should register a complaint if they needed to. And if necessary, they could also obtain details of the local NHS complaints procedure online. But the RP SP generally dealt with people's concerns at the time. The pharmacy had professional indemnity and public liability arrangements so it could provide insurance protection for the pharmacy's services and its customers.

The pharmacy generally kept its records in the way it was meant to, including its controlled drugs (CD) register, its emergency supply records, its RP records and its private prescription records. The pharmacy

maintained and audited its CD running balances. And the quantity of a random sample checked by the inspector matched the total recorded in the CD register. The pharmacy generally kept its responsible pharmacist records up to date, but it had one omission where a locum RP had not signed out at the end of their shift. The pharmacy team agreed that all the pharmacy's essential records should have all the necessary details and that they should be up to date. The pharmacy had a CD destruction register for patient-returned medicines which was complete and up to date.

The pharmacy's team members understood the need to protect people's confidentiality. And they had completed training on confidentiality. They discarded confidential paper waste into separate waste containers before shredding it. The team generally kept people's personal information, including their prescription details, out of public view. But the prescription storage area was on a wall which people would pass to access the consultation room. The RP SP agreed that he should prevent people from potentially seeing other people's prescription information and that he should put further measures in place to achieve this. Team members had completed appropriate safeguarding training. And they knew to report any concerns to the pharmacist. The team could access details for the relevant safeguarding authorities online.

## Principle 2 - Staffing ✓ Standards met

### Summary findings

The pharmacy properly trains its team members for the tasks they carry out. The pharmacy team manages its workload safely and effectively. And team members support one another well. They are comfortable about providing feedback to one another so that they can improve the quality of the pharmacy's service

### Inspector's evidence

The inspector conducted the inspection during the pharmacy's usual trading hours. The RP SP worked alongside the MCA DA. And they were seen to work effectively with one another. They were seen assisting each other when required and discussing issues. And they supported one another to complete their tasks. They kept the daily workload of prescriptions in hand. And they attended to customers promptly. The MCA was able to ask the RP SP for information or advice when she needed it, or when she needed support with new processes. The pharmacy had a small close-knit team and staff could raise concerns and discuss issues when they arose. The RP SP could make day-to-day professional decisions in the interest of patients. He explained that during the pandemic the pharmacy had felt the pressures of a heavier-than-usual workload. And it had also had staff shortages. But team members worked extra when they could to help. And the pharmacy had not had any unplanned closures. Team members kept their knowledge up to date by reading training material.

## Principle 3 - Premises ✓ Standards met

### Summary findings

The pharmacy's premises provide a suitable environment for people to receive its services. And they provide enough space for those services. The pharmacy is sufficiently clean and secure. And it has made some sensible adjustments to help reduce the risk of the spread of viral infections. The team keeps its workspace and storage areas sufficiently tidy and organised.

### Inspector's evidence

The pharmacy was clean, tidy and adequately maintained. And it was bright, well-lit and modern looking. The team had a regular cleaning routine. And it cleaned the pharmacy's worksurfaces, floors and touch points regularly. The pharmacy's counter had a backwall behind it for displaying over-the-counter medicines. And screens along the countertop helped to prevent the spread of infections. The dispensary sat on a raised level behind the counter. It had workbenches along three sides with storage areas above and below. And it also had pull-out drawers for storing medicines. The pharmacy's consultation room was in the back shop area. People requiring a consultation were escorted behind the counter past a storage area at the side of the dispensary to a door which gave access to the back shop area and the consultation room. Team members had placed a retractable belt across the opening at the side of the counter to prevent unauthorised access. The storage area at the side of the dispensary contained completed prescriptions ready for collection. The RP SP and the inspector discussed the importance of ensuring that people could not view other people's prescription details. And they agreed that while people would not have much time to view the prescriptions as they walked past, it would be more appropriate to ensure that prescription details were hidden out of sight. In addition to the consultation room the back shop had a staff area and three other rooms. One of the rooms was used as an office. And the remaining rooms provided additional workspace and storage. The pharmacy also had a basement for storing bulkier items.

## Principle 4 - Services ✓ Standards met

### Summary findings

The pharmacy makes its services accessible for people. And it has suitable procedures in place to help ensure that it provides its services safely and effectively. The pharmacy team gets its medicines and medical devices from appropriate sources. And team members make the necessary checks to ensure that the pharmacy's medicines and devices are safe to use to protect people's health and wellbeing. The pharmacy team ensures that the medicines it supplies have the information that people need so they can take their medicines properly.

### Inspector's evidence

The pharmacy's entrance provided step-free access. And its customer area was free of clutter and unnecessary obstacles. It had a delivery service for people who found it difficult to visit the pharmacy. The service was provided by the pharmacist after hours and so was limited to a small number of people who had no other way of getting their medicines. The pharmacy could also order people's repeat prescriptions if required. The pharmacy team used baskets to hold individual prescriptions and medicines during dispensing. It did this to keep prescriptions and their corresponding medicines together.

The pharmacy provided medicines in multi-compartment compliance packs for people living at home who needed them. The pharmacy managed the service according to a four-week rota. Each month any changes to prescriptions were checked and verified. And people's records updated. The pharmacy also had a system for managing any changes made to people's prescriptions within the monthly cycle. The team labelled its compliance packs with a description of each medicine, including colour and shape, to help people to identify them. And its labelling directions gave the required advisory information to help people take their medicines properly. The pharmacy also supplied patient information leaflets (PILs) with new medicines, and with regular repeat medicines. So that people could find the information they needed if they wanted to. The pharmacist gave people advice on a range of matters. And he would give appropriate advice to anyone taking high-risk medicines. The pharmacy had additional leaflets and information booklets on a range of medicines including sodium valproate. The pharmacy had a small number of people taking sodium valproate medicines, none of whom were in the at-risk group. The RP was aware of the precautions he would need to take, and counselling he would give, if it were to be prescribed for someone new.

The pharmacy obtained its medicines and medical devices from suppliers holding the appropriate licences. It stored its medicines appropriately and in their original containers. And the stock on its shelves was tidy and organised. The pharmacy team date-checked the pharmacy's stocks regularly. And it generally kept records to help it manage the process effectively. A random sample of stock checked by the inspector was in date. Short-dated items were identified and highlighted. And any item with less than two months until its expiry was removed from stock. These short-dated items were only dispensed with the patient's agreement where they could be used before the expiry date. The team put its out-of-date and patient-returned medicines into dedicated waste containers. The team stored its CD and fridge items appropriately. And it monitored its fridge temperatures to ensure that the medication inside was kept within the correct temperature range. The pharmacy responded promptly to drug recalls and safety alerts. The team had not had any stock affected by recent recalls.

## Principle 5 - Equipment and facilities ✓ Standards met

### Summary findings

The pharmacy has the equipment and facilities it needs to provide services safely. And it keeps them clean. The team uses its facilities and equipment to keep people's private information safe.

### Inspector's evidence

The pharmacy had the appropriate equipment for counting tablets and capsules and for measuring liquids. And for dispensing into multi-compartment compliance packs. Its equipment was clean. Team members had access to a range of up-to-date reference sources. And they had access to PPE, in the form of sanitiser, face masks and gloves if they needed them. The pharmacy had several computer terminals which had been placed in the consultation room, compliance pack dispensing room and the dispensary. Computers were password protected. Team members used their own smart cards to maintain an accurate audit trail. And to ensure that team members had the appropriate level of access to records for their job roles.

### 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.