

Registered pharmacy inspection report

Pharmacy Name: Chana Chemist, 52 South Road, SOUTHALL,
Middlesex, UB1 1RQ

Pharmacy reference: 1035126

Type of pharmacy: Community

Date of inspection: 03/09/2020

Pharmacy context

The inspection was conducted during the COVID-19 pandemic. The pharmacy belongs to a small group of independently owned community pharmacies. It is in the centre of the built-up town of Southall and has extended opening hours. As well as dispensing prescriptions, the pharmacy provides medicines in multi-compartment compliance packs for many people in the community. It also provides a delivery service for the elderly and housebound. The pharmacy had limited its range of services since the beginning of the pandemic so that it could concentrate on supplying medicines to 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

The pharmacy satisfactorily identifies and manages the risks associated with the provision of its services. It adequately manages people's personal information. It reviews its procedures effectively to ensure it always protects people as well as it can. The pharmacy has adequate procedures to learn from its mistakes. And its team has working practices which reduce risks to people's safety during the COVID-19 pandemic. But it could be missing opportunities to reduce risks further.

Inspector's evidence

The number of cases of COVID-19 in the area was higher than the national average for the last seven days. But this had reduced significantly from the week before. The pharmacy team had introduced procedures to help reduce the risk of transmitting the virus in the pharmacy. And it had placed a limit on the number of people coming in, where no more than three people should be in the premises between the pharmacy counter and the photographic counter at one time. But it had had to relax these limitations as team members found it difficult to manage people who chose to ignore the notice on the door and come into the pharmacy anyway. The team had received complaints from people who did not understand and did not want to wait outside. It had also received complaints about the plastic screen which it had put up at the counter. And some people had been aggressive towards team members. But although the pharmacy had up to five people in it during the inspection the majority of people wore masks and generally kept an appropriate distance between one another.

Team members had access to personal protective equipment (PPE) although chose not to wear it. They washed or sanitised their hands regularly and cleaned down surfaces and equipment a minimum of three times per day. But while working they often stood relatively close to one another. So, while they managed the risk of transmitting the virus adequately, they could do more to ensure that risks were minimised further. The inspector reminded the responsible pharmacist (RP) of the pharmacy's responsibilities to report cases of Covid-19 transmission, which happened in the workplace, to the appropriate authorities.

The pharmacy had procedures for managing risks in the dispensing process. Team members discussed every incident, including their near miss mistakes, as soon as they were discovered. And they recorded them. They did this to help prevent the same or similar, mistakes from happening in future. Team members could describe the sequence of dispensing checks they made before passing to the RP for a final accuracy check. And it was evident that they took care to keep stock tidy and organised to prevent stock becoming mixed up. The pharmacy had a process for reflecting on and reviewing its mistakes, but it had not held a formal review meeting for a few weeks. So, while it was clear that the team recognised and acknowledged any apparent risks to safety, including any mistakes it made, it could be missing further opportunities to learn and improve.

Team members worked under the supervision of the responsible pharmacist (RP). The RP had a notice on display, showing his registration details. The team had access to a set of documented standard operating procedures (SOPs) to refer to. Team members had read the SOPs relevant to their roles. They were observed consulting the RP and the trainee technician when appropriate. The pharmacy team had a positive approach to customer feedback. It described how, as well as receiving some complaints about its social distancing policy, it had also received many positive comments from people throughout the

pandemic. Particularly when the local surgeries had been closed. People had expressed their gratitude to the team for helping them to order their prescriptions, for delivering their medicines and for providing them with advice. Pressure had eased in more recent weeks. The pharmacy generally kept records of any formal complaints or dispensing incidents. But the team preferred to deal with any customer concerns at the time. The pharmacy had professional indemnity and public liability arrangements so it could provide insurance protection for people and its services. Insurance arrangements were in place until 30 June 2021 when they would be renewed for the following year. The pharmacy team could access details for the local NHS complaints advocacy service and the Patient Advice and Liaison service (PALS) if necessary.

The pharmacy kept all its essential records and, in general, kept them in the way it needed to. The pharmacy's team members understood the need to protect people's confidentiality. They shredded any unused labels and old prescription tokens each day. The pharmacy stored its completed prescriptions in the dispensary where they were out of people's view. All team members had completed appropriate safeguarding training. And they could access details for the relevant safeguarding authorities online. Staff had not had any specific safeguarding concerns to report.

Principle 2 - Staffing ✓ Standards met

Summary findings

The pharmacy team manages the workload safely and effectively. And team members work well together. They are comfortable about providing feedback to their line managers, so that they protect one another and the public. And to maintain the quality of the pharmacy's services.

Inspector's evidence

This was a busy high street pharmacy. It had a regular RP and a support team consisting of a pharmacy manager who was also a trainee technician, a dispensing assistant, two trainee dispensing assistants and two medicines counter assistants (MCAs). The RP had yet to complete a workplace risk assessment with individual team members. But he would do so within the next few weeks. And he had established that team members felt safe while working at the pharmacy. Team members worked effectively together and felt able to raise any concerns they may have with the RP or their more senior line managers. They worked at their assigned tasks and assisted each other when required. The team was up to date with the workload of prescriptions and it attended to its customers promptly. The RP could make his own professional decisions in the interest of patients. And felt able to raise concerns with the company directors and the superintendent. He had felt supported to achieve the improvements introduced over the previous year. The team did not have any specific targets other than to manage the daily workload while keeping each other, and people using the pharmacy, safe.

Principle 3 - Premises ✓ Standards met

Summary findings

The pharmacy's premises are clean and well maintained. They provide a safe, secure and professional environment for people to receive healthcare services.

Inspector's evidence

The pharmacy had a bright modern appearance and customer areas were clean and tidy. It shared its premises with its photographic business. The photographic business included developing and printing and occupied approximately one third of the shop floor area. The pharmacy had a spacious shop floor and a consultation room for private consultations. It also had a seating area for customers waiting. The consultation room was not currently in general use due to the pandemic. The pharmacy had a staffroom and toilet in the back-shop area. Staff toilet facilities were clean with hand washing facilities.

The dispensary was on a raised plinth, situated alongside the counter, and staff could pass easily between the two. The pharmacy had a dispensing and checking bench and a central island which provided additional dispensing work surface. It had open shelves, for storing stock. The dispensary had a clear workflow. And used its central island or, if appropriate, the consultation room, for dispensing multi-compartment compliance packs. It also had a sink with hot and cold running water. The team had improved the general organisation of its stock and the prescription storage area in recent months. And while a few compliance packs were still stored in tote boxes on the floor, they had been stored so they were tidy and organised.

Principle 4 - Services ✓ Standards met

Summary findings

The pharmacy provides its services safely. The pharmacy team gets its medicines and medical devices from appropriate sources. And it stores them safely. 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.

Inspector's evidence

The pharmacy's external entrance had an automatic door and step-free access suitable for wheelchair users. The shop floor area was uncluttered and wide enough for wheelchair users to move around. The consultation room was also suitable for wheelchair access. In general, the pharmacy delivered its services in accordance with its SOPs. The pharmacy worked closely with its other branch close by, which it could rely on for team support and items of stock when needed. It also had contingency plans in place, where the two branches would be able to support one another to ensure people got their medicines, if either pharmacy had to close or was unable to manage the workload. The pharmacy had a prescription ordering service which had seen an increase during the pandemic when surgeries had closed.

The pharmacy provided multi-compartment compliance packs for people who needed them. Team members labelled compliance packs with a description of each medicine, including colour and shape, to help people to identify them. And they included patient information leaflets (PILs) with new medicines on a regular basis. The labelling directions on compliance packs gave the required advisory information to help people take their medicines properly. Pharmacists gave advice on a range of matters. They were aware of the guidance about pregnancy prevention to be given to people in the at-risk group who took sodium valproate. And would give appropriate advice to anyone taking other high-risk medicines.

The pharmacy obtained its medicines and medical devices from suppliers holding the appropriate licences. The team stored its medicines, appropriately and in their original containers. And stock on its shelves was tidy. This helped the team's efficiency and made it easier for team members to find and select the correct item. Since the previous inspection the pharmacy team had improved the pharmacy's storage capacity through improved stock management. The pharmacy team date-checked its stock regularly. It stored items in a CD cabinet and fridge as appropriate. And it monitored its fridge temperatures daily to ensure that the medication inside was kept within the correct temperature range. In general, short-dated stock was identified and highlighted. The pharmacy responded promptly to drug recalls and safety alerts and kept appropriate records. The team had not found any stock affected by recent recalls from July 2020.

The pharmacy team had not been scanning products with a unique barcode in accordance with the European Falsified Medicines Directive (FMD). It had the FMD hardware and software but was not using it as yet. The team found that most stock items could not yet be scanned so felt its benefits were limited.

Principle 5 - Equipment and facilities ✓ Standards met

Summary findings

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

Inspector's evidence

The pharmacy used crown marked measures for measuring liquids. And it had the appropriate equipment for counting tablets and capsules. All its dispensing equipment was clean. Team members had access to a range of up-to-date reference sources. And they had access to appropriate PPE. Team members washed or sanitised their hands periodically throughout the day.

The pharmacy had two computer terminals. One was in the dispensary and one in the consultation room. The computer in the consultation room was used for compliance pack dispensing and by the pharmacist during consultations. Staff assembled around the dispensary computer several times during the inspection, compromising social distancing guidelines. It was clear that team members had to interrupt one another during the dispensing process, so that they could answer customer queries, access records or place orders. The introduction of an additional computer in the dispensary would assist with social distancing and help to reduce risks to team members. And it would also help to reduce interruptions and improve efficiency. Both computers had a facility for keeping patient medication records (PMRs). They were password protected and their screens could not be viewed by people. Team members used their own smart cards when working on PMRs. And the RP had placed a notice on display to remind staff of the importance of using their own cards. So that they could maintain an accurate audit trail and ensure that access to patient records was appropriate and secure.

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.