

# Registered pharmacy inspection report

**Pharmacy Name:** Asda Pharmacy, ASDA Superstore, Acle New Road, Vauxhall, GREAT YARMOUTH, Norfolk, NR30 1SF

**Pharmacy reference:** 1035234

**Type of pharmacy:** Community

**Date of inspection:** 17/11/2023

## Pharmacy context

This pharmacy is located inside a large Asda supermarket in the town of Great Yarmouth. It provides a variety of services including dispensing NHS prescriptions, the New Medicine Service (NMS) and supervised consumption of medicines. It also provides medicines in multi-compartment compliance packs for people who have difficulty remembering to take 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

Overall, the pharmacy manages the risks associated with its services well. And its team members record and regularly review any dispensing mistakes. The pharmacy generally keeps the records it needs to by law. And people can provide feedback about its services.

### Inspector's evidence

The correct responsible pharmacist (RP) notice was on display in the pharmacy. There was a range of standard operating procedures (SOPs) that had been issued by the pharmacy's head office. These were available electronically and had been read by all team members. Team members were able to explain their roles and responsibilities within the pharmacy. Near misses (dispensing mistakes which were spotted before a medicine left the pharmacy) were recorded on paper sheets in the dispensary in good detail. The RP gave an example of a near miss where lercanidipine 20mg had been picked instead of 10mg. As a result, the two strengths were separated on the shelf to reduce the chance of it occurring again. Dispensing errors (mistakes which had reached a person) would be recorded electronically and in more detail. The RP said there had not been a dispensing error for some time.

Complaints and feedback were usually submitted online. Team members said that any complaints or feedback about the pharmacy could also be given in person or via a phone call and would be actioned in the same way. Complaints were usually resolved in store but could be escalated to head office if necessary.

Confidential waste was disposed of in a dedicated confidential waste bin. When full, the waste was bagged up and taken away by an external company for safe disposal. No confidential waste was found in the general waste bin. The team said that they sought the appropriate details from people collecting medicines or phoning the pharmacy for information. There was also a privacy notice on display explaining how the pharmacy used people's personal information. The RP confirmed that he had completed level two safeguarding training with the Centre for Pharmacy Postgraduate Education (CPPE). And the other team members had completed safeguarding training relevant to their roles. The team knew what to do if a vulnerable person presented in the pharmacy and the pharmacy had contact details of local safeguarding leads.

The pharmacy had current indemnity insurance. Balance checks were carried out regularly for controlled drugs (CDs), and records seen in the CD register were made in accordance with the law. A random check of a CD showed that the quantity in stock matched the running balance in the register. Records seen about private prescriptions dispensed were not complete, with several entries missing the name and address of the prescriber. This could make it harder for the team to contact the prescriber if they had an issue. The RP said this information would be included in future. The RP record was complete with all entries seen having a start and finish time.

## Principle 2 - Staffing ✓ Standards met

### Summary findings

The pharmacy has enough team members to manage its workload. And team members do the right training for their roles. Team members do not have a formal review of their progress. But they do some ongoing training to keep their knowledge and skills up to date. And they feel comfortable about raising any concerns.

### Inspector's evidence

On the day of the inspection, there was the RP, two dispensers and another team member who left at the start of the inspection. The pharmacy was quite busy with a regular queue of people, but team members worked well together to provide an efficient service. And they were up to date with dispensing. All team members had completed the appropriate training for their role or were currently enrolled on a course with an accredited training provider. Team members were provided with ongoing training from head office, but they had no formal appraisal or review of their progress. This could mean that team members' learning needs are not always fully identified and addressed. However, team members knew what they could and could not do in the absence of an RP. And they had no concerns about raising any issues and would usually go to the RP first or to head office if necessary. The pharmacy team was not set any targets.

## Principle 3 - Premises ✓ Standards met

### Summary findings

The pharmacy is generally clean and tidy and provides a safe and appropriate environment for people to access its services. People can have a conversation with a team member in a private area. And the pharmacy is kept secure from unauthorised access.

### Inspector's evidence

The front fascia of the pharmacy was in a good state of repair. The shop floor was generally clean and professionally presented. Pharmacy only (P) medicines were stored securely behind the counter. The dispensary area was generally clean and tidy and had just enough floor and desktop space for the team to work in. It had a small sink for preparing liquid medicines which was kept clean. The temperature and lighting of the pharmacy were adequate. Staff toilets were available in the general staff area of the store with access to hot and cold running water and handwash, and there was a breakroom for team members available there. The pharmacy had a consultation room for people who wished to have a conversation in private. It allowed for a conversation at a normal level of volume to be had without being heard from the outside. The room was a good size, was kept clean and was locked when not in use. The pharmacy was kept secure from unauthorised access.

## Principle 4 - Services ✓ Standards met

### Summary findings

The pharmacy provides its services safely. It gets its medicines from reputable sources and stores them appropriately. The pharmacy can cater to people with different needs. And it responds to safety alerts and recalls of medicines and medical devices appropriately. So, this helps make sure that it is giving people medicines that are fit for purpose.

### Inspector's evidence

The store had step-free access from the main entrance via an automatic door. The pharmacy was able to cater for people with different needs, for example by printing large-print labels for people with sight issues. It also had a hearing loop. There was enough space for people with wheelchairs and pushchairs to access the dispensary counter. The dispensary had separate areas for dispensing and checking medicines, and baskets were used to separate prescriptions and reduce the chance of prescriptions getting mixed up. Checked medicines seen contained the initials of the dispenser and checker and this provided an audit trail. The pharmacy also implemented a third check which occurred just before a medicine was given to a person to reduce the chance of dispensing mistakes reaching a person.

Prepared multi-compartment compliance packs seen contained all the required dosage and safety information as well as a description of the medicines added to the packs. This included a description of the colour, shape, and any markings on the medicines to help people identify their medicines. Team members confirmed that patient information leaflets (PILs) were always included with each supply of the packs. A team member said that they would contact the surgery regarding any queries they had with prescriptions such as unexpected changes to people's treatment.

The pharmacy obtained medicines from licensed wholesalers and invoices were seen confirming this. CDs requiring safe custody were stored securely and medicines requiring refrigeration were stored appropriately. Fridge temperatures were checked and recorded daily, and records seen were all in the required range apart from one recording where the temperature was slightly out of range. The RP said this was due to the pharmacy receiving a large number of prescriptions for fridge items that day. The fridge temperatures on the day of the inspection were all within the required range. Expiry date checks were done regularly on a rota basis with a different section being checked each time. A random check of medicines on the shelves revealed no expired medicines. Team members also recorded the opening dates of liquid medicines, so they knew when these were no longer fit for use. Safety alerts and recalls were received by email, alerts were printed and actioned as appropriate before being archived.

Team members were aware of the risks of sodium valproate, and the RP knew what to do if a person in the at-risk category presented their prescription at the pharmacy. Team members were shown where to apply a dispensing label to a box of sodium valproate so as not to cover any important safety information. The pharmacy administered flu vaccinations to people in the consultation room. It had access to an anaphylaxis kit for anyone who had a reaction to the vaccination. All the items in the kit were in date and fit for use.



## Principle 5 - Equipment and facilities ✓ Standards met

### Summary findings

The pharmacy has the necessary equipment it needs to provide safe and effective services. And it uses its equipment to protect people's privacy.

### Inspector's evidence

The pharmacy's computers had access to the internet allowing team members to access any online resources they needed. Computers were password protected and faced away from public view to protect people's privacy. Team members were observed using their own NHS smartcards. The pharmacy had a wired telephone in the dispensary which could make it more difficult for the team to have a conversation with a person in private. However, the phone was located in the back of the dispensary and team members knew to check if anyone else could overhear the conversation and to speak quietly if they needed to have a private conversation. The team confirmed that the electrical equipment had been safety tested earlier in the year. The pharmacy had a blood pressure monitor in the consultation room. The team confirmed that it was relatively new and did not currently require replacement or recalibration. The pharmacy had the appropriate calibrated glass measures for measuring liquid medicines. It also had tablet triangles for counting medicines and a separate one for counting cytotoxic medicines such as methotrexate to prevent cross-contamination.

### What do the summary findings for each principle mean?

Finding	Meaning
<span style="color: green;">✓</span> <b>Excellent practice</b>	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.
<span style="color: green;">✓</span> <b>Good practice</b>	The pharmacy performs well against most of the standards and can demonstrate positive outcomes for patients from the way it delivers pharmacy services.
<span style="color: green;">✓</span> <b>Standards met</b>	The pharmacy meets all the standards.
<b>Standards not all met</b>	The pharmacy has not met one or more standards.