

Registered pharmacy inspection report

Pharmacy Name: Chemipharm, 113 Lozells Road, Lozells,
BIRMINGHAM, West Midlands, B19 2TR

Pharmacy reference: 1038057

Type of pharmacy: Community

Date of inspection: 07/11/2023

Pharmacy context

This community pharmacy is located in Lozells which is an area on the outskirts of Birmingham city centre. Lozells is an ethnically diverse area with a high population of people of Afro-Caribbean, Bangladeshi and Pakistani backgrounds. The pharmacy dispenses a low number of NHS prescriptions, and it provides some NHS funded services such as the New Medicine Service (NMS).

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 generally manages the risks associated with its services to make sure people receive appropriate care. There are written procedures to make sure its team members work safely. The pharmacy team keeps people's information safe, and they understand their role in supporting vulnerable people.

Inspector's evidence

The pharmacy was very quiet throughout the inspection and most of the workload was undertaken by the responsible pharmacist (RP). The RP was the sole director of the company that owned the pharmacy, and he was the superintendent pharmacist (SI). The company also owned another pharmacy nearby.

A range of standard operating procedures (SOPs) were in place which covered the operational activities of the pharmacy and the services provided. The SOPs had been adopted by the pharmacy in April 2023 and had been signed by the SI to show that they had been reviewed. Roles and responsibilities for members of the pharmacy team were highlighted within the SOPs. Some SOPs were missing from the current folder. For example, SOPs for dealing with dispensing incidents and responding to complaints. This meant the pharmacy team might not have a procedure to refer to if they needed to.

The SI normally dispensed and self-checked prescriptions. He explained that if he was working with another team member, he would alert them to mistakes that they made during the dispensing process. He said that each mistake was discussed at the time so that it could be used as a learning opportunity. The pharmacy had some records of near miss mistakes that had occurred in the past however, there were no recent records of near misses. This meant the team might miss opportunities to identify patterns, trends, and new risks, and make sure these were managed appropriately.

The SI explained that the dispensing volume was low, so he had ample time to dispense and check prescriptions and said that he had developed a robust process for self-checking that worked for him. When prompted, the SI was aware of the NHS contractual requirement for reporting patient safety incidents but stated that he had not been made aware of any recent errors. The NHS reporting website had been bookmarked on the pharmacy computer.

A poster detailing how people could raise a complaint was available in the retail area. The SI explained that he would deal with any verbal feedback or complaints as they occurred, but the pharmacy had not received any recent complaints or concerns.

The pharmacy had up-to-date professional indemnity insurance. The RP notice was displayed, and the electronic RP met the requirements. Controlled drug (CD) registers were in order and two random balance checks of CD stock matched the balances recorded in the register. Regular balance audits for controlled drugs were carried out. Records of unlicensed specials were maintained appropriately. Private prescriptions were recorded in a record book and complied with requirements.

Confidential waste was stored separately from general waste and destroyed securely. The pharmacy team members had their own NHS Smartcards and they confirmed that passcodes were not shared. The

pharmacy was registered with the Information Commissioner's Office (ICO). The SI had completed training on safeguarding, although not for some time. The SI understood what safeguarding meant and gave an example of when he had made a safeguarding intervention when a regular patient was showing signs of dementia and what he had done to support her with taking her medicines.

Principle 2 - Staffing ✓ Standards met

Summary findings

The pharmacy has enough team members to manage the current workload and the services that it provides. The pharmacy's team members use their professional judgement to make sure medicines are appropriate for people.

Inspector's evidence

The pharmacy shared staff with the company's other pharmacy which was in close proximity. The regular pharmacist was the SI. A pharmacy technician and an apprentice worked across the two pharmacies and provided occasional support. The apprentice had recently enrolled on to the apprenticeship course and attended face-to-face training at college. Pharmacy team members mainly worked in the other pharmacy as it dispensed more prescriptions. The SI could manage the workload and number of people coming into the pharmacy due to the low footfall.

Principle 3 - Premises ✓ Standards met

Summary findings

The pharmacy generally provides a suitable environment for people to receive healthcare services. Some areas of the pharmacy are less well maintained which detracts from the professional image and the overall working environment.

Inspector's evidence

The premises were large and had previously been two different shops which had been knocked through to create extra space. The premises had also been a post office until it had moved. The area behind the old post office counter had been repurposed as a private consultation room, however, this room was not used. Private conversations took place in a quiet space of the retail area or a corridor next to the front counter if needed.

The fixtures and fittings in the shop were dated but generally in an adequate state of repair. The SI contacted local contractors if he required any maintenance work to be carried out. The dispensary was mostly clean and tidy with no slip or trip hazards evident. Significant improvements had been made since the last inspection to clear obsolete stock, old fixtures and fittings and paperwork from all areas of the premises.

The pharmacy was cleaned by the SI and a cleaning matrix was used to record when cleaning had been carried out. Hot and cold running water, hand towels and hand soap were available. Lighting was suitable for the services provided and the temperature was comfortable. Prepared medicines were held securely within the pharmacy premises and pharmacy medicines were generally stored securely.

Principle 4 - Services ✓ Standards met

Summary findings

The pharmacy offers healthcare services which are easy for people to access. It manages its services and supplies medicines appropriately. The pharmacy obtains its medicines from licensed suppliers, and the team stores them securely and at the correct temperature, so they are safe to use.

Inspector's evidence

The pharmacy was accessed via a small step from the pavement. A home delivery service was available, and this was restricted to patients that needed it due to mobility issues. The SI was observed speaking to patients in different languages throughout the inspection. Members of the team could speak to people in English, Bengali, Urdu and Punjabi. The pharmacy was open seven days a week.

Items were dispensed into baskets to help make sure prescriptions were not mixed up together. The SI took a mental break between dispensing and checking prescriptions when he carried out both processes and separated the two tasks. The SI was aware of the risks associated with the use of valproate during pregnancy, and the need for additional counselling.

The pharmacy dispensed medicines into multi-compartment compliance packs for some people who required additional support to take them in a safe manner. A paper record was kept for people who received the packs to detail what medicines they were taking and if any changes by the prescriber were made. The packs had dispensing labels attached and patient information leaflets were supplied each month. But the pharmacy did not routinely include the description of the medicines which may make it harder for people to identify them.

Medicines were obtained from a range of licensed wholesalers and a specials manufacturer. Medicines were stored in an organised manner on the dispensary shelves. Medicines were stored in their original packaging. Basic date checking records were kept showing when the pharmacy stock had been date checked. Some out-of-date medicines and products were found and removed from the shelves ready for safe disposal. The need for more thorough records or a matrix was discussed so that sections were not overlooked. Medicines that people had returned were stored separately from stock medicines in a designated area. The pharmacy was alerted to drug recalls via emails from the gov.uk.

The CD cabinet was secure and a suitable size for the amount of CD medicines held. Medicines were stored in an organised manner inside. Fridge temperature records were maintained, and records showed that the pharmacy fridge was working within the required temperature range of 2° and 8° Celsius.

Principle 5 - Equipment and facilities ✓ Standards met

Summary findings

The pharmacy has the equipment it needs to provide its services safely. The team uses this equipment in a way that keeps people's information safe.

Inspector's evidence

The pharmacy had access to a range of up-to-date reference sources, including the British National Formulary (BNF) and the children's BNF. Internet access was available. Patient records were stored electronically and there were enough computer terminals for the workload. A range of clean, crown stamped measures and counting triangles were available. Computer screens were not visible to members of the public as they were excluded from the dispensary. Cordless telephones were in use and staff were observed taking phone calls in the back part of the dispensary to prevent people using the pharmacy from overhearing.

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.