

Registered pharmacy inspection report

Pharmacy Name: Shore Pharmacy, 79 Russell Lane, Whetstone,
LONDON, N20 0BA

Pharmacy reference: 1040508

Type of pharmacy: Community

Date of inspection: 09/11/2020

Pharmacy context

The pharmacy is situated in a residential area, in a small parade of shops. It provides NHS and private prescription dispensing mainly to local residents. It provides multi-compartment compliance packs for a large number of people who collect their packs either from this pharmacy or another one close by, owned by the same company. The pharmacy has a home delivery service. And there is a post office in the pharmacy. The pharmacy was inspected during the COVID-19 pandemic and following information received about it purchasing large volumes of codeine linctus. Not all the standards for pharmacy premises were inspected on this occasion.

Overall inspection outcome

Standards not all met

Required Action: Improvement Action Plan; Statutory Enforcement

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 not all met	1.1	Standard not met	The pharmacy doesn't adequately identify and manage the risks around purchasing and sales of codeine linctus and Phenergan Elixir. And it doesn't have appropriate governance arrangements to protect potentially vulnerable people from buying them.
2. Staff	Standards not all met	2.2	Standard not met	The pharmacy has inadequate supervision and oversight of the staff and the medicines they sell.
		2.2	Standard not met	The pharmacy sells large quantities of codeine linctus and Phenergan Elixir, medicines that can be misused. And the sales of these are not monitored properly. So, people buying these medicines are put at risk.
3. Premises	Standards met	N/A	N/A	N/A
4. Services, including medicines management	Standards not all met	4.2	Standard not met	The pharmacy doesn't always provide its services safely. The pharmacy buys and sells large amounts of codeine linctus and Phenergan Elixir without adequate safeguards. So, it is harder for it to monitor any repeat sales to people.
		4.3	Standard not met	The pharmacy doesn't have adequate safeguards for purchasing or for the movement of codeine linctus and Phenergan Elixir to and from the pharmacy. So, it can't properly account for its stock of these medicines or monitor their sales.
5. Equipment and facilities	Standards met	N/A	N/A	N/A

Principle 1 - Governance Standards not all met

Summary findings

The pharmacy doesn't identify or manage all the risks with the services it provides. It doesn't adequately manage the sales of codeine linctus and Phenergan Elixir, which are medicines that can be misused. And it doesn't have appropriate governance arrangements to protect potentially vulnerable people from buying them. So, people may take this medicine and cause themselves harm. The pharmacy adequately manages the risks associated with the COVID-19 pandemic.

Inspector's evidence

The pharmacy was inspected during the COVID-19 pandemic. The pharmacy had assessed each team member to identify their personal risk of catching the virus and the steps needed to support social distancing and infection control. The pharmacy had a pandemic control standard operating procedure (SOP). The team members had access to Personal Protective Equipment (PPE) and wore face masks during the inspection. Throughout the inspection the team members mostly worked at separate stations in the dispensary which provided some level of social distancing. The pharmacy had COVID-19 information posters at the entrance, and it displayed separate posters reminding people to wear face coverings. Markings on the floor directed people where to stand to maintain social distancing requirements. The team kept a hand sanitiser on the pharmacy counter for people to use.

The pharmacist said that she only supplied codeine linctus to people who requested it after a recommendation from their GP or a supply against a prescription. There was no codeine linctus found in the shop, or on the dispensary shelves. There had been one prescription for it in recent months which showed on the patient medication record (PMR). The counter assistant said that he did not sell codeine linctus or Phenergan Elixir, but that if he did need to, he would ask questions in line with the over-the-counter protocol (WWHAM), in accordance with the SOPs. However, he was observed to sell a bottle of Night Nurse on request to someone after asking no questions at all about its use or need, and he did not give any advice to the person requesting it. The pharmacist did not intervene in the sale. The pharmacy had an electronic point of sale (EPOS) system and there did not appear to be any sales of codeine linctus or Phenergan Elixir recorded on it.

On examining the pharmacy's wholesaler invoices from October 2020, the inspector found large quantities of both codeine linctus and Phenergan Elixir had been purchased. Following the inspection, the superintendent pharmacist (SI) provided information that large quantities had also been sold from the pharmacy. The pharmacy's stock room was used as a warehouse for the group, for storing both over-the-counter and prescription-only medicines.

The pharmacy conspicuously displayed the responsible pharmacist notice. The responsible pharmacist record required by law was up to date and filled in correctly. The pharmacist had undertaken some formal training about safeguarding vulnerable children and adults and had access to the local telephone contacts for the safeguarding team. The rest of the team was aware that they should tell the pharmacist about any concerns they had.

Principle 2 - Staffing Standards not all met

Summary findings

The pharmacy sells large quantities of codeine linctus and Phenergan Elixir, which are both medicines that can be misused. But team members are not aware of the quantities of these medicines which are supplied. And there is an overall lack of supervisory control. Staff are not provided with formal on-going training and are not consistently following the training they have received. And they don't have performance reviews, which could mean that gaps in their knowledge or skills may not always be identified and supported. But otherwise, the pharmacy has enough qualified staff to provide its other services safely.

Inspector's evidence

The pharmacy was run with one pharmacist who worked a regular five-and-a-half-day week. This was the same as the opening hours of the pharmacy. There was a part-time dispenser and a full-time medicines counter assistant. Both had completed the formal training required for their roles. There was also a post office worker, who had no role in the pharmacy business.

The pharmacist reported that once the staff had completed their formal training, and passed the assessments, they had not been provided with any more formal training material. But all the pharmacy staff had access to pharmacy magazines.

The inspector asked both the dispenser and the counter assistant what questions they would ask if someone requested to buy codeine linctus or Phenergan Elixir. Both, independently, said that they did not usually sell either item. But if they did they would ask the WWHAM questions and refer the sale to the pharmacist. However, the counter assistant was observed not to ask any questions of a customer before selling medicines to them. This was pointed out to him by the inspector, and he knew which questions he should have asked. The matter was brought to the attention of the responsible pharmacist who had not intervened in this sale. She said that she regularly reminded the assistant of their duty to ask and act on the WWHAM questions.

Following the inspection the SI reported large quantities of both medicines had been sold from the pharmacy over the few months prior to the inspection. The pharmacist and counter assistant both said that the medicines were not on the shop shelves.

There was evidence found during the inspection that stock of Phenergan Elixir had arrived into the pharmacy on a particular day recently. But the staff who had been present on that day were asked about it, and neither could not confirm what had happened to it. One member of staff said that they were not responsible for what happened in the shop area. And the other member of staff said that they had been busy and so didn't know what had been happening in the shop area.

The staff said that they did not have formal annual appraisals. But the management team visited the pharmacy regularly and the staff were able to discuss issues with them. There were no targets set by the owner for the pharmacist.

Principle 3 - Premises ✓ Standards met

Summary findings

The premises are clean and provide a safe, secure and suitable environment for people to receive healthcare. But the pharmacy could do more to keep some areas tidier.

Inspector's evidence

The shop area was clean and tidy but the area behind the counter had some deliveries piled up in boxes. The dispensary was clean and generally tidy. There was a separate bench where multi-compartment compliance packs were being prepared, but there was a bit of clutter around the computer. The dispensary sink was clean, but the draining board was cluttered.

The pharmacy had a consultation room, which the public could access through a door to the right of the Post Office unit. There was also a door from the consultation room to the dispensary. The door from the consultation room to the shop was kept locked whilst the room was in use. The room was clean, and could protect people's privacy.

To the rear was a storeroom which was quite cluttered. This was reported to be a warehouse used to store medicines for other shops in the group. Medicines were often ordered by the pharmacy but transferred to other pharmacies in the group.

Principle 4 - Services Standards not all met

Summary findings

The pharmacy doesn't always provide its services safely. It doesn't have adequate safeguards in place to manage sales of codeine linctus or Phenergan Elixir. So, it is harder for it to monitor any repeat sales to people. And it doesn't adequately monitor the movements of codeine linctus and Phenergan Elixir within the pharmacy group. So, it is harder for the pharmacy to account for its stock and monitor sales of these medicines. Otherwise, the pharmacy mostly manages and delivers its services safely and effectively. The pharmacy safely manages the dispensing of people's medicines. The pharmacy sources, stores and manages its other medicines appropriately.

Inspector's evidence

There was a step up into the pharmacy from the pavement. And there was a heavy front door. Staff said that they opened the door for people if they needed help. The pharmacy's services were advertised in the window.

The pharmacy had a dispensing audit trail to identify who had dispensed and checked each item. It was generally used but a few items looked at did not show who had dispensed the item. The team members usually marked who had checked the medicines. The pharmacy did not always use baskets intended to ensure that prescription items were kept together and were easy to move from one area of the dispensary to another.

A large number of people were being supplied their medicines in multi-compartment compliance packs. These packs were labelled with the information the person needed to take their medicines in the correct way. The packs also had tablet descriptions to identify the individual medicines. There was a list of packs to be dispensed each week, with each person having a summary sheet showing any changes to their medicines and where the medicines were to be placed in the packs.

The pharmacy got its medicines from licensed wholesalers and stored them on shelves in a tidy way. But the movement of codeine linctus and Phenergan Elixir to other premises was not monitored or recorded, so the ability to audit stock within the group was limited. There were no records of what stock had been moved to other branches. There were coloured dots on some boxes to indicate items which were short dated. Regular date-checking was done. Drug alerts were received, actioned and filed appropriately to ensure that recalled medicines did not find their way to people who used the pharmacy.

Principle 5 - Equipment and facilities ✓ Standards met

Summary findings

The pharmacy has the right equipment for its services. It makes sure its equipment is safe to use.

Inspector's evidence

There were various sizes of glass, crown-stamped measures, with separate ones labelled for specific use, reducing the risk of cross-contamination. The pharmacy had a separate triangle marked for use with methotrexate tablets ensuring that dust from them did not cross-contaminate other tablets. The pharmacy had access to up-to-date reference sources. This meant that people could receive information which reflected current practice.

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.