

Registered pharmacy inspection report

Pharmacy Name: Right Medicine Pharmacy, Unit 3 Seaforth Buildings, Seaforth Road, MUIR OF ORD, Ross-Shire, IV6 7TA

Pharmacy reference: 1042856

Type of pharmacy: Community

Date of inspection: 17/10/2019

Pharmacy context

This is a community pharmacy in the centre of Muir of Ord. It dispenses NHS prescriptions including supplying medicines in multi-compartment compliance packs. The pharmacy offers a repeat prescription collection service and a medicines' delivery service. It also provides substance misuse services and dispenses private prescriptions. The pharmacy team advises on minor ailments and medicines' use. And supplies a range of over-the-counter medicines. It offers a smoking cessation service and travel and seasonal flu vaccinations. And the pharmacist has the qualifications to treat common clinical conditions.

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	Good practice	1.1	Good practice	The pharmacy has systematic review arrangements in place. And this ensures that the quality, safety and effectiveness of its services continue to improve.
		1.2	Good practice	The pharmacy embeds continuous improvement in its culture. The pharmacy team ensures it learns when things go wrong. And it takes its time to discuss and identify risks so that the safety and effectiveness of its services continue to improve.
		1.7	Good practice	The pharmacy has a systematic approach to information governance. It provides regular training. And it carries out regular reviews to confirm that its arrangements meet data protection requirements.
		1.8	Good practice	There is a clear culture of safeguarding the safety and wellbeing of children and vulnerable adults.
2. Staff	Good practice	2.2	Good practice	The pharmacy team members complete regular training. And the pharmacy provides time during the working day to support them to do so.
		2.4	Good practice	The pharmacy team members work effectively. And they are comfortable talking about their weaknesses and the importance of shared learning. They focus on continuous improvement. And they want to provide good outcomes for people.
3. Premises	Standards met	N/A	N/A	N/A
4. Services, including medicines management	Good practice	4.1	Good practice	The pharmacy identifies the specific needs of the local community. And provides access to extra services to meet those needs.
		4.2	Good practice	The pharmacy team manages its services to ensure they optimise efficiency and effectiveness. And it ensures its services provide good outcomes.

Principle	Principle finding	Exception standard reference	Notable practice	Why
5. Equipment and facilities	Standards met	N/A	N/A	N/A

Principle 1 - Governance ✓ Good practice

Summary findings

The pharmacy team members work to professional standards. They provide safe services and look after people's welfare. The pharmacy keeps records of mistakes when they happen. And the team members are proactive at identifying risks and carrying out service improvements. The pharmacy keeps the records it needs to by law. And it provides regular training to keep confidential information safe. It understands its role in protecting vulnerable people. And team members complete regular training to ensure they are up-to-date with safeguarding requirements. People using the pharmacy can raise concerns. And team members know to follow the company's complaints handling procedure. This means that they listen to people and put things right when they can. The pharmacy encourages people to provide feedback about its services. And they make changes to their processes when they need to.

Inspector's evidence

The pharmacy used standard operating procedures (SOPs) to define the pharmacy processes and procedures. The team members had signed to confirm they followed the procedures. And to show they understood their roles and responsibilities. The pharmacy had displayed the responsible pharmacist notice. And it showed the name and registration number of the pharmacist in charge. The pharmacy team signed dispensing labels to show they had completed a dispensing task. And the pharmacist checked prescriptions and gave feedback to dispensers who failed to identify their own errors. The dispensers recorded their own near-misses on the company's electronic system. And the pharmacist produced a report at the end of the month that showed the patterns and trends. The pharmacy team discussed ways of managing dispensing risks at a monthly meeting. And they identified and implemented service improvements when they could. The company carried out mock GPhC inspections. And the area manager had carried out an inspection a few weeks before the GPhC inspection.

The pharmacist managed the incident reporting process. And the pharmacy team knew when incidents happened and what the cause had been. For example, they knew about an error when a slow-release formulation was supplied instead of the immediate release version. The pharmacy team had discussed the incident and they had agreed to obtain additional checks before they issued controlled drugs and refrigerated medicines. The pharmacy used a complaints policy to ensure that staff handled complaints in a consistent manner. And it displayed a complaints and feedback notice in the waiting area. The pharmacy had acted on feedback and had made service improvements as a result. For example, when someone who was expecting two prescriptions and was given only one. The pharmacy team had discussed the feedback. And had introduced extra checks. The pharmacy team had re-organised the retrieval area. And they had decided to separate prescriptions when people's surname began with Mack to manage the risk of hand-out errors.

The pharmacy maintained the legal pharmacy records it needed to by law. And the pharmacist in charge kept the responsible pharmacist record up to date. The pharmacy had public liability and professional indemnity insurance in place. And it was valid until April 2020. The pharmacy team kept the controlled drug registers up to date. And they checked and verified the balance of controlled drugs on a weekly basis. The pharmacy team recorded the controlled drugs that people returned for destruction. And the pharmacist and a team member recorded their name and signature against each destruction record. The pharmacy provided a delivery service to housebound and vulnerable people.

And made sure that people signed for their medication to confirm receipt. A sample of private prescriptions were up to date and met legal requirements. And specials records were kept up to date with details of who had received each supply. The pharmacists used patient group directions to improve access to medicines and advice. And a sample trimethoprim patient group direction was valid until October 2020.

The pharmacy displayed a data processing notice which provided people with information about its data protection arrangements. The pharmacy trained team members on a regular basis to comply with data protection arrangements. And they knew how to safeguard personal information. The pharmacy disposed of confidential information in designated bags that were collected for off-site shredding. And archived spent records for the standard retention period.

The protecting vulnerable group (PVG) scheme was used to help protect children and vulnerable adults. And the company had registered the pharmacists with the scheme. The pharmacy trained the pharmacy team to comply with safeguarding arrangements. And provided contact details so that team members knew who to contact if they had a concern about a child or an adult. The team members recognised the signs and symptoms of abuse and neglect. And they referred to the pharmacist when a carer returned with someone's multi-compartmental pack with the weekend doses intact.

Principle 2 - Staffing ✓ Good practice

Summary findings

The pharmacy monitors its staffing levels. And it ensures it has the right number of suitably skilled pharmacy team members throughout the week. The pharmacy team members reflect on their performance. And identify and discuss their learning needs at regular review meetings to keep up to date in their roles. The pharmacy encourages and supports the pharmacy team to learn and develop. And this has led to the introduction of new and novel services. The pharmacy team members support each other in their day-to-day work. And they can speak up at regular meetings. And make suggestions for improvement to keep services safe and effective.

Inspector's evidence

The pharmacy had experienced a significant increase in the number of NHS prescriptions it dispensed since a change of ownership two years ago. And the company had almost doubled the number of team members to manage the extra demand for services. A new pharmacist manager had taken up post in February 2019. And the company had appointed an extra part-time dispenser in January 2019. The medicines counter assistant had worked at the pharmacy for around seven years. And she had been enrolled on the NVQ pharmacy services level 2 course around January 2019 and now working full-time in the dispensary. A new trainee medicines counter assistant (MCA) had been appointed the week before the inspection replacing someone who had left. A new part-time delivery driver had been appointed to provide the new delivery service when the company took over.

The dispenser assisted with most of the inspection. And this was due to the locum pharmacist working at the pharmacy for the first time. The locum pharmacist worked in the company's other branches. And she was familiar with the policies and procedures in the pharmacy. The following team members were in post; one full-time pharmacist, one full-time trainee dispenser, one part-time dispenser, one trainee medicines counter assistant and one part-time delivery driver. The pharmacy managed annual leave requests. And team members were expected to provide cover for each other. For example, part-time team members changing their working days when needed. The area manager was trained and accredited to work in the dispensary. And she was providing extra support on the day of the inspection for a dispenser who had taken leave.

The company provided protected learning time for trainees. And the trainee dispenser had agreed to make the most of this time during her performance development review (PDR) in June 2019. The company had recently changed its PDR arrangements. And it now held four review meetings throughout the year instead of one at the start of the year. The meetings ensured that team members made progress against their objectives. And that they developed and improved in their roles. The trainee dispenser had asked if she could be trained about the products used in smoking cessation services and this had been agreed.

The company provided a range of training resources. And the team members kept records of training in their individual folders. The trainee dispenser had completed a personal training needs analysis using the company's electronic learning hub. And she was selecting shorter courses, such as colds and flu, as she was already undergoing dispenser training. A sample training record was seen. For example, the trainee dispenser had learned how to treat tick bites. And had learned that gabapentin and pregabalin

had been classified as controlled drugs. The pharmacist independent prescriber was accredited to provide travel clinics and vaccination services. And was providing a common clinical conditions service. The company had held its annual conference in October 2019. And invited all its team members to attend. The team members took notes, and shared learnings with colleagues who were unable to attend. For example, they discussed a session that provided information about a new liquid formulation of Nytol.

The superintendent issued a regular newsletter to update the pharmacy teams about changes and emerging risks. The pharmacy held weekly meetings to discuss these. For example, when team members left, or when new team members started working with the company. The team members discussed safety information such as moving omeprazole 20mg capsules to the 'fast moving' shelves to manage mix-ups with omeprazole tablets. The pharmacy team members felt empowered to raise concerns and provide suggestions for improvement. For example, they had identified the need to separate Hypromellose eye drops due to similarities in packaging.

The company used performance targets to develop its services. And team members were identifying people who would benefit from using the chronic medication service (CMS). The team members did not feel undue pressure to increase the pharmacy services. And only discussed services with people who would gain clear benefits.

Principle 3 - Premises ✓ Standards met

Summary findings

The premises are clean. And provide a safe, secure and professional environment for patients to receive healthcare.

Inspector's evidence

A well-kept waiting area presented a professional image to the public. And the pharmacy provided seating and healthcare information leaflets for self-selection. The pharmacy had allocated areas and benches for the different dispensing tasks. And team members dispensed multi-compartment compliance packs on a separate bench. The pharmacist supervised the medicines counter from the checking bench. And could make interventions when needed. The pharmacy had effective lighting. And the ambient temperature provided a comfortable environment from which to provide services. The pharmacy provided a consultation room, and a separate hatch. And both were professional in appearance.

Principle 4 - Services ✓ Good practice

Summary findings

The pharmacy provides access to a wide range of services. And the pharmacist has the qualifications to provide treatment for common clinical conditions. The pharmacy displays its opening times and service information in the window. And provides patient information leaflets inside the pharmacy. The pharmacy has up-to-date working instructions in place for its services. And this ensures the pharmacy supports the team members to work in a safe and effective way. The pharmacy dispenses multi-compartment compliance packs. And it supplies extra information to support people to take their medicines. The pharmacy sources, stores and manages its medicines. It updates the pharmacy team about high-risk medicines. And this means that team members know when to provide people with extra information.

Inspector's evidence

The pharmacy had ramped access which provided unrestricted access for people with mobility difficulties. The pharmacy displayed its opening hours in the pharmacy window. And displayed a range of leaflets in the waiting area and in the consultation room. The pharmacy had changed ownership in 2017. And a new pharmacist had introduced new services to meet the needs of the local community. The pharmacy team had briefed the surgery about its services. For example, they knew about the pharmacy first service and when to refer people to the pharmacist. The GPs provided medical services from the local surgery. But, they also provided a satellite surgery in Beauy. And this meant that local GP services weren't provided every day. The pharmacist independent prescriber had the qualifications to provide a common clinical conditions service. And provided access to prescription only medications (POMS) such as antibiotics when needed. The pharmacist asked people to complete a questionnaire after they had been seen. And they all had provided feedback about how much they valued it. The pharmacy was promoting its new travel vaccination service. And the pharmacist had mostly provided supplies of anti-malarial medication. The pharmacist was providing the seasonal flu vaccination service. And the consultation room was equipped with the resources that were needed to do so.

The pharmacy team attached questionnaires to prescription bags when people were suitable for the chronic medication service (CMS). And they spoke to people about their medicines and referred people to the pharmacist when they needed support. The team members carried out CMS dispensing tasks on a Monday when the pharmacy was quieter. And they checked that people were collecting their medicines on time or if they were having compliance difficulties. For example, they had identified that someone was taking omeprazole only when they thought they needed it. And the pharmacist had counselled the person and compliance had improved. The pharmacist used a wide range of prescription bag stickers. And this ensured that the pharmacy team carried out the necessary tasks. For example, a methotrexate sticker ensured that team members asked people if they were attending for regular blood tests. And a 'check strength' sticker ensured that team members highlighted when there had been prescription changes.

The dispensing benches were organised. And the pharmacy team used dispensing baskets to keep prescriptions and medicines contained throughout the dispensing process. The pharmacy dispensed multi-compartment compliance packs for around 30 people who needed extra support with their

medicines. And the pharmacy team had read and signed a valid SOP. The pharmacy team used trackers to manage the work-load. And this made sure that people received their medication on time. The team members isolated packs when they were notified about prescription changes. And they kept a record of changes in the patient's notes. The pharmacy supplied patient information leaflets and annotated descriptions of medicines in the pack.

The pharmacy used clear bags instead of paper prescription bags for controlled drugs and fridge items. And this allowed the pharmacist to easily carry out additional checks at the time of supply. The team members kept the pharmacy shelves neat and tidy. And purchased medicines and medical devices from recognised suppliers. The pharmacy team had recently created a separate storage area for fast-moving stock. And they had ensured there was ample space to do so. This allowed the team members to carry out visual checks. And to order stock in a timely manner. The team members kept controlled drugs in two well-organised cabinets. And they carried out regular stock management activities such as highlighting short dated stock and part-packs during regular checks. The team members monitored and recorded the fridge temperature. And demonstrated that the temperature had remained between two and eight degrees Celsius.

The pharmacy accepted returned medicines from the public. And disposed of them in yellow containers that the health board collected. The pharmacy team acted on drug alerts and recalls. And recorded the outcome, and the date they checked for affected stock. For example, they had checked for aripiprazole in September 2019 with no stock found. The pharmacy had implemented the necessary equipment and software to support the systems needed to comply with the Falsified Medicines Directive (FMD). And the company had trained the pharmacy team, so they had the knowledge and skills to carry out the relevant activities. The company were making systems changes to improve compliance with FMD. And these would be fully implemented by the end of 2019. The pharmacy team had been trained to understand the requirements of the valproate pregnancy protection programme. And they knew about the initiative and where to find the safety leaflets and cards. The pharmacist monitored prescriptions for valproate. And added flash notes to the PMR to confirm that people had been provided with safety messages.

Principle 5 - Equipment and facilities ✓ Standards met

Summary findings

The pharmacy has the equipment it needs to provide safe services. And it keeps it clean and well-maintained.

Inspector's evidence

The pharmacy had access to a range of up-to-date reference sources, including information about travel vaccinations. It uses crown-stamped measuring equipment. And the measure for methadone were highlighted and separated, so it was used exclusively for this purpose. The pharmacy kept cleaning materials for hard surface and equipment cleaning. And the pharmacy sink was clean and suitable for dispensing purposes. The pharmacy stored prescriptions for collection out of view of the waiting area. And it arranged computer screens, so they could only be seen by the pharmacy team. The pharmacy team members used a portable phone. And they took calls in private when necessary.

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.