

Registered pharmacy inspection report

Pharmacy Name: Asda Pharmacy, Asda Superstore, Leechmere Road
Industrial Estate, Grangetown, SUNDERLAND, Tyne and Wear, SR2
9TT

Pharmacy reference: 1073433

Type of pharmacy: Community

Date of inspection: 30/07/2024

Pharmacy context

This is a pharmacy within a supermarket located in Grangetown, Sunderland. Its main activity is dispensing NHS prescriptions and selling over-the-counter medicines. It also provides a range of NHS services including Pharmacy First and seasonal flu vaccinations.

Overall inspection outcome

✓ **Standards met**

Required Action: None

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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 suitably identifies and manages risks with its services. It has the written procedures it needs relevant to its services and team members follow these to help them provide services safely. Pharmacy team members keep people's confidential information secure. And they know how to identify situations where vulnerable people need help. They keep the records required by law.

Inspector's evidence

The pharmacy had a set of up-to-date standard operating procedures (SOPs) to help pharmacy team members manage risk with providing services. These included for dispensing, Responsible Pharmacist (RP) regulations and controlled drug (CD) management. The team accessed SOPs via an electronic platform. This held a record of which SOPs the team members had read and when, as well as highlighting any that were outstanding. This showed that the team was up to date with reading the SOPs. Team members demonstrated a clear understanding of their roles and worked within the scope of their role.

The pharmacy team recorded near miss errors, and from the records seen, this was done regularly throughout the month. These errors were mistakes identified before people received their medicines. The RP took responsibility for recording these errors and the team member who made the error corrected it. This meant they had the opportunity to reflect on what had happened. The pharmacy also had a procedure for managing dispensing errors. These were errors that were identified after the person had received their medicines. All team members were informed of the dispensing incident, and they discussed how to prevent such errors from happening. The pharmacists regularly reviewed the near miss records and dispensing incidents to produce learning points for the team. Team members had good knowledge of changes to processes and stock placement in response to near misses and dispensing errors.

The pharmacy had a procedure for dealing with complaints. And it advertised this to people using its services, with a notice at the pharmacy counter. The team aimed to resolve any complaints or concerns at the pharmacy. If they were unable to resolve the complaint, they escalated it to the general manager of the supermarket or the pharmacy superintendent office, depending on the nature of the complaint. And comments left on review platforms were monitored to ensure appropriate responses were provided to people.

The pharmacy had current professional indemnity insurance. The Responsible Pharmacist had their RP notice on display which meant people could clearly see details of the pharmacist on duty. Team members knew what activities could and could not take place in the absence of the RP. A sample of RP records checked during the inspection were found to meet requirements. The private prescription records showed that the pharmacy dispensed a significant number of private prescriptions. A sample of the records for these showed that accurate details of the prescriber who signed the prescription were not always captured. The importance of maintaining accurate records of the prescriptions supplied was discussed with the RP during the inspection. A sample of CD registers were checked during the inspection and met legal requirements. A pharmacist completed weekly checks of the running balance in the CD register against the physical stock. A random balance check against the quantity of stock during the inspection was correct. The pharmacy kept a register of CDs returned by people, and there

were records of these returns being destroyed.

Pharmacy team members understood what to do to keep people's personal information safe and they separated confidential waste from general waste, into a designated bin. Confidential waste was collected every two weeks, for offsite destruction. The pharmacy displayed a privacy notice in the retail area. And it advertised that it had a chaperone policy. The pharmacy had a procedure around the safeguarding of vulnerable people. And the team were provided with safeguarding training and guidance relevant to their roles. Key safeguarding contact information and an overview of the procedure was displayed within the dispensary for quick reference.

Principle 2 - Staffing ✓ Standards met

Summary findings

The pharmacy has a team with an appropriate range of experience and skills to safely provide its services. Team members work well together, and they support each other in their day-to-day work. Pharmacy team members feel comfortable raising concerns and discussing ways to improve how they work. They have opportunities to complete training so they can develop their knowledge.

Inspector's evidence

At the time of the inspection, the RP was a resident pharmacist employed by the company. They were supported by a team that consisted of three qualified dispensers and a medicines counter assistant. Other team members that were not present during the inspection were the pharmacist manager, four qualified dispensers and three medicines counter assistants. Two of the medicines counter assistants were working through accredited training programmes. Weekly staffing rotas were planned well in advance to ensure the pharmacy had its extended opening hours appropriately covered. And there were contingency arrangements if the pharmacy needed cover for a team member's absence. The team was observed to be managing the workload throughout. The skill mix of the team appeared appropriate for the nature of the business and the services provided.

Team members accessed online training modules, as directed by the pharmacy's head office. The content of these modules varied. Sometimes it related to a new service, but other times it was a refresher on one of the pharmacy's procedures. A team member had recently completed a module around the safe and effective management of medicines that require refrigeration. Team members undergoing training were supported by the two regular pharmacists to help facilitate their learning. The RP accessed several recognised sources of training to facilitate their preparation for delivery of new services.

Pharmacy team members asked appropriate questions when selling medicines over the counter and referred to the RP at appropriate times. They were comfortable challenging requests for over-the-counter medicines that they deemed inappropriate. A member of the team described how they were comfortable to openly discuss mistakes, as it may help avoid other team members repeating it. The example they shared was around different inhaler devices with similar names. Team members knew how to raise concerns if necessary. The pharmacy had a whistleblowing policy and team members were aware of this. The pharmacy team had some performance related targets to achieve. It received weekly updates how it was performing relative to other pharmacies in the company. The pharmacy had recently been highlighted as one of the top performers in the area. The team did not feel these targets detracted from the pharmacy's ability to provide their services to people safely.

Principle 3 - Premises ✓ Standards met

Summary findings

The pharmacy premises are clean, secure and provide a suitable environment for the services provided. And the pharmacy has a consultation room to meet the needs of people requiring privacy when using its services.

Inspector's evidence

The pharmacy was located at the front of the supermarket. It had a medicines counter and a side door which functioned as a barrier to stop unauthorised access to the dispensary. The dispensary was small but was generally tidy and organised. The pharmacy team kept the work surfaces in the dispensary reasonably free of clutter. There was sufficient storage space for stock, assembled medicines and medical devices.

There was a clean, well-maintained sink with hot and cold water. Pharmacy team members shared cleaning tasks among themselves to keep the pharmacy clean. These were usually completed at the beginning and end of the day. The pharmacy was well lit and kept its heating at acceptable levels. The layout of the premises allowed effective supervision of staff and pharmacy activities.

The pharmacy had a soundproof consultation room that allowed the team to have private conversations with people and provide services. It was a good size and had a desk, two chairs and a sink. The door to the consultation room was locked when not in use. There was also a waiting area with seven seats placed around the pharmacy and outside of the consultation room.

Principle 4 - Services ✓ Standards met

Summary findings

The pharmacy sources its medicines from recognised suppliers. And it stores and manages them appropriately. Pharmacy team members complete regular checks to ensure medicines are suitable for supply. And they respond appropriately when they receive alerts about the safety of medicines. Team members generally manage the delivery of services safely and effectively.

Inspector's evidence

The supermarket had automatic doors and level access from the car park to allow people with mobility issues to enter safely. There was a section of the medicines counter at a lower level to support people using a wheelchair with activities such as completing prescription exemption declarations. A hearing loop was present on the medicines counter, but the team was not aware how to use it. The importance of team members being competent to use such devices, if needed to communicate with people who may require such assistance, was discussed during the inspection.

The pharmacy team used baskets throughout the dispensing. These dispensing baskets kept prescriptions and their corresponding stock separate from others. And the team used assorted colours of basket to prioritise the workload. Pharmacy team members signed dispensing labels during dispensing and checking. This maintained an audit trail of team members involved in the process.

The pharmacy team used stickers to highlight if a prescription contained a fridge item, to ensure correct storage temperatures were maintained. And they used highlighter pens to mark prescription tokens for higher-risk medicines during the dispensing and checking process. This ensured team members were aware that these people required appropriate questioning and advice. The RP counselled people receiving prescriptions for valproate. And they checked if the person was aware of the risks if they became pregnant while taking the medicine. They checked if people were on a pregnancy prevention programme and taking regular effective contraception. They did not routinely keep records of these conversations, so there were no audit trails in case of queries. The team were aware of the requirements to dispense valproate in the manufacturer's original packs. And it had patient cards and stickers available to give to people if needed.

The pharmacy obtained medicines from licensed wholesalers and specials manufacturers. It had a documented procedure for managing the checking of expiry dates of medicines. Team members highlighted short-dated medicines with stickers when they conducted date-checking tasks. Medicines with a shortened expiry date on opening were marked with the date of opening, to ensure the team could check on suitability to supply. A random sample of stock was checked during the inspection and no expired medicines were found. The pharmacy held medicines requiring cold storage in two medical fridges, equipped with thermometers. Team members consistently monitored and recorded the temperature of the fridge. These records showed cold chain medicines were stored at appropriate temperatures. A check of the thermometer during the inspection showed temperature within the permitted range.

The pharmacy had disposal facilities available for unwanted medicines, including CDs. When the pharmacy could not entirely fulfil the complete quantity required on a prescription, team members created an electronic record of what was owed on the patient medication system. And they gave

people a note detailing what was owed. This meant the team had a record of what was outstanding to people and what stock was needed. The team checked outstanding owings as a daily task, and the pharmacy appeared to be managing these well. The pharmacy had a documented procedure for responding to drug safety alerts and manufacturer's recalls. It received these via email from the company's head office as well as an in-store communication. The team recorded when alerts had been actioned electronically. The RP demonstrated recent examples of alerts that had been received and actioned in this way.

Principle 5 - Equipment and facilities ✓ Standards met

Summary findings

The pharmacy has the equipment it needs to provide its services. Team members use the equipment in a way that protects people's private information.

Inspector's evidence

Pharmacy team members had access to a range of paper-based reference materials and access to the internet for up-to-date information and further support tools.. There was equipment available for the services provided which included an otoscope, a digital thermometer, and a blood pressure monitor. The pharmacy also had an ambulatory blood pressure monitor. Electrical equipment was visibly free from wear and tear and appeared in good working order. The pharmacy had a range of clean counting triangles and capsule counters. And it had CE marked measuring cylinders for liquid medicines preparation. The team used separate equipment when counting and measuring higher-risk medicines.

The pharmacy's computers were password protected and access to people's records was restricted by the NHS smart card system. The team used cordless telephones so that conversations could be kept private. The pharmacy stored completed prescriptions and assembled bags of medicines away from public reach in a restricted area.

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.