

Registered pharmacy inspection report

Pharmacy Name: County Pharmacy, 14 Stretton Court, Stretton Road, Great Glen, LEICESTER, Leicestershire, LE8 9HB

Pharmacy reference: 1085757

Type of pharmacy: Community

Date of inspection: 19/03/2024

Pharmacy context

This is a community pharmacy situated in the village centre. Most of its activity is dispensing NHS prescriptions and selling medicines over the counter. The pharmacy supplies medicines in multi-compartment compliance packs to people who live in their own homes. It also provides the NHS 'Pharmacy First' service.

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

Overall, the pharmacy identifies and manages the risks associated with the provision of its services. And the pharmacy keeps the records it needs to by law. Its team members have defined roles and accountabilities. The pharmacy manages people's electronic personal information safely and it has procedures to learn from its mistakes. But because it does not always record its mistakes, it might miss opportunities to improve its ways of working.

Inspector's evidence

The pharmacy had a set of standard operating procedures (SOPs) which were in the process of being reviewed by the pharmacist. The pharmacy team members had signed the current SOPs to show they had read and understood them. Staff were seen following the SOPs which included dispensing medicines and handing medicines out to people safely. Staff understood how to sell medicines safely and knew the advice to give during a sale. Staff knew that prescriptions were valid for six months apart from some controlled drugs (CDs) which were valid for 28 days. The pharmacy routinely highlighted prescriptions containing CDs to remind staff of their shorter validity.

The pharmacy had processes for learning from dispensing mistakes that were identified before reaching a person (near misses) and dispensing mistakes where they had reached the person (errors). Near misses were discussed with the member of staff at the time they were found, and actions were taken such as putting up shelf markers to remind the team to take extra care for specific medicines. The aim was to record all near misses in the near miss log, but there was a gap of a few months in 2023 which indicated near misses might not always be entered. The pharmacist reviewed the near miss logs but did not always sign the log to show this had been completed. The pharmacist said he would make sure near misses and reviews were recorded.

The Responsible Pharmacist (RP) notice was visible in the dispensary and identified the pharmacist on duty. The pharmacy maintained the necessary records to support the safe delivery of pharmacy services. These included the RP record, private prescription records, and the CD register. The entries for two CD items checked at random during the inspection agreed with the physical stock held. Regular balance checks of all CDs were completed. Patient-returned CDs were recorded in a designated register. Patient-returned CDs and date-expired CDs were separated from stock CDs to prevent dispensing errors.

The pharmacy had a complaints procedure and an information governance policy. Access to the electronic patient medication record (PMR) was password protected. Confidential waste was destroyed appropriately. Professional indemnity insurance was in place. The pharmacy understood safeguarding requirements and could explain the actions they would take to safeguard a vulnerable person. The pharmacy team members were aware of the 'Safe Space Initiative,' and they knew what to do if someone 'asked for Ani.'

Principle 2 - Staffing ✓ Standards met

Summary findings

There are enough team members to manage the pharmacy's workload. They are suitably trained for the roles they undertake, and they are given opportunities to develop in their roles. They are able to raise concerns if needed.

Inspector's evidence

During the inspection, the pharmacy team managed the day-to-day workload of the pharmacy effectively. There was one pharmacist, who was also the superintendent pharmacist, one pharmacy technician, and one dispenser who was on a recognised training course. There was a friendly culture within the pharmacy. Team members worked well together, giving each other support and advice. They discussed any issues informally on a daily basis and felt able to raise concerns if necessary. They felt supported in their development and the pharmacy technician had taken on new roles such as providing flu vaccinations.

Principle 3 - Premises ✓ Standards met

Summary findings

The pharmacy keeps its premises safe, secure, and mainly appropriately maintained. And people visiting the pharmacy can have a conversation with a team member in private.

Inspector's evidence

The front fascia of the pharmacy was a little old and the pharmacist said that he was looking to replace it with a new fascia. Inside, the public area had plenty of space for people using the pharmacy. There was a clear plastic screen at the pharmacy counter which provided re-assurance to both the staff and the customers. And there was hand sanitiser available. The dispensary was an adequate size for the services provided. But there were some bags of dispensed medicines on the floor which could create a trip hazard. There was suitable heating and lighting, and hot and cold running water was available.

A reasonable sized consultation room was available for people to have a private conversation with pharmacy staff. However, the room was generally cluttered and did not present a professional image. Unauthorised access to the pharmacy was prevented during working hours and when closed.

Principle 4 - Services ✓ Standards met

Summary findings

The pharmacy's healthcare services are suitably managed and are accessible to people. The pharmacy gets its medicines and medical devices from reputable sources. It stores them safely and it knows the right actions to take if medicines or devices are not safe to use, to protect people's health and wellbeing.

Inspector's evidence

The pharmacy had flat access with a push-pull door which provided suitable access for people with a disability or a pushchair to get into the pharmacy. The pharmacy team members knew most people who used their services by name and during the inspection were supportive and helpful to people visiting the pharmacy. The pharmacist was easily accessible and during the inspection engaged with people visiting the pharmacy giving a range of advice, as necessary. The pharmacy team understood the signposting process and used local knowledge to direct people to local health services. The pharmacist knew the advice about pregnancy prevention that should be given to people in the at-risk group who took sodium valproate and had implemented the latest advice.

The pharmacy was providing the NHS 'Pharmacy First' service. This allowed the pharmacy to treat seven common conditions including supplying prescription-only medicines. The pharmacy team said that the service had been positively received. The pharmacy was also offering the NHS hypertension case-finding service. The pharmacist explained that they measured people's blood pressure in the pharmacy and, if necessary, the person then wore a machine that measured their blood pressure for 24 hours. The pharmacist said they had found a significant number of people with high blood pressure, and in addition to referring people to their doctor for review, some had required referral to accident and emergency at the hospital. Following this, some people had been prescribed medicines to reduce their blood pressure.

The pharmacy used a dispensing audit trail which included use of 'dispensed by' and 'checked by' boxes on the medicine label to help identify who had done each task. Baskets were used to keep medicines and prescriptions for different people separate to reduce the risk of error. The pharmacy supplied medicines in multi-compartment compliance packs to people living in the community to help them take their medicines at the right time. The pharmacy spread the workload for preparing these packs across the month. Compliance packs seen included medicine descriptions on the packs to make it easier for people to identify individual medicines in their packs. Patient information leaflets (PILs) were not routinely provided to people each month, but the pharmacy team said they had previously supplied PILs and would start doing so again.

Medicines were stored on shelves in their original containers. Most but not all opened bottles of liquid medications were marked with the date of opening so that the team would know if they were still suitable for use. The pharmacist said he would make sure that the date of opening was recorded. The pharmacy team had a process for date checking medicines. A check of a small number of medicines did not find any that were out of date. CDs were stored appropriately. A record of invoices showed that medication was obtained from licensed wholesalers. The pharmacist explained the process for managing drug alerts which included a record of the action taken.

Principle 5 - Equipment and facilities ✓ Standards met

Summary findings

The pharmacy has the equipment and facilities it needs for the services it provides. It maintains its equipment so that it is safe to use.

Inspector's evidence

The pharmacy used suitable measures for measuring liquids. The pharmacy had up-to-date reference sources. Records showed that the fridge was in working order and stored medicines within the required range of 2 and 8 degrees Celsius. The pharmacy's portable electronic appliances looked in a reasonable condition, but they had not been tested recently. The pharmacist said that he would arrange for testing.

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.