

# Registered pharmacy inspection report

**Pharmacy Name:** Fairman Chemists Ltd, 22 -24 High Street West,  
WALLSEND, Tyne and Wear, NE28 8HU

**Pharmacy reference:** 1092098

**Type of pharmacy:** Community

**Date of inspection:** 01/06/2023

## Pharmacy context

This is a busy pharmacy on a high street in Wallsend in Newcastle. Its main activities are dispensing NHS prescriptions and providing multi-compartment compliance packs to help people take their medicines safely and effectively. It provides NHS services including the Community Pharmacy Consultation Service (CPCS) and smoking cessation. And it supervises the administration of medicine to some people.

## 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
<b>1. Governance</b>	Standards met	N/A	N/A	N/A
<b>2. Staff</b>	Standards met	N/A	N/A	N/A
<b>3. Premises</b>	Standards met	N/A	N/A	N/A
<b>4. Services, including medicines management</b>	Standards met	4.1	Good practice	Team members are good at promoting health and wellbeing support for people accessing its services. They display up-to-date and relevant information clearly and in a designated area of the pharmacy which people can easily access.
<b>5. Equipment and facilities</b>	Standards met	N/A	N/A	N/A

## Principle 1 - Governance ✓ Standards met

### Summary findings

The pharmacy suitably manages the risks with its services. And it keeps the records it must by law. Pharmacy team members discuss mistakes, and they make some records to help with their learning. They generally keep people's private information secure. And they have training and support to help protect vulnerable people.

### Inspector's evidence

The pharmacy had a set of standard operating procedures (SOPs) which helped guide team members to work safely and effectively. They had been reviewed in March 2022. Pharmacy team members could access them online and a sample seen confirmed team members had read and signed electronically to confirm their understanding and compliance of the SOPs.

The pharmacy team members recorded errors made and identified during the dispensing process known as near misses. The team member who made the error was responsible for recording the details of the error, including any potential reasons for the error occurring. The pharmacy's records of near misses produced in the previous two months showed one near miss was recorded per month. This made it more difficult to identify trends from near misses. Team members recorded errors which were identified after the person had received their medicines, known as dispensing incidents. And they recorded conversations with doctors in response to prescribing queries. The trainee pharmacist explained that a monthly review of incidents was completed and discussed informally with the team. Team members had implemented changes following errors, including stickers on shelves which highlighted medicines that looked-alike and sounded-alike (LASAs) so the recurrence of errors could be mitigated.

Team members demonstrated understanding of their roles within the pharmacy and completed tasks they were responsible for. They understood what could and could not take place in the absence of the responsible pharmacist (RP), but there wasn't a SOP seen for team members to refer to. The RP notice was on display in a prominent area and captured the correct details of the pharmacist on duty. The sample seen of the RP record was compliant.

The pharmacy had a complaints procedure and a SOP, which involved people raising issues and resolving concerns with team members. They also had the opportunity to complete a form on the pharmacy's website. Team members explained how they escalated concerns to the superintendent (SI) pharmacist. And if unresolved, people were provided with a telephone number or email of the company's head office.

A current certificate of indemnity insurance was available. The pharmacy had up-to-date records of private prescription supplies and supplies of unlicensed medicines known as specials. It had a completed controlled drug (CD) register. Team members checked controlled drug stock against the register running balance weekly. Two medicines selected confirmed that the quantity held reflected the register running balance. There were separate records for patient-returned CDs. Team members were aware of their responsibility to keep people's personal information secure, which included the driver who, when delivering medication to people, kept people's name and address details secure. Team members had completed recent training about data security. And they kept confidential

waste separate for shredding. Team members had completed training relating to safeguarding and had access to a safeguarding advice line. The driver knew to report any concerns back to the RP. They kept records of interventions.

## Principle 2 - Staffing ✓ Standards met

### Summary findings

The pharmacy has suitably skilled team members who manage the workload and provide its services. And they are enthusiastic about their roles. They ask appropriate questions and offer suitable support to help people with their healthcare needs. And they feel comfortable raising professional concerns if they need to.

### Inspector's evidence

The pharmacy team consisted of two pharmacists, two pharmacy technicians, one trainee pharmacist, two dispensers and three trainee dispensers. The pharmacy had a full-time and a part-time deliver driver. A pharmacy technician was training to become an accuracy checker. And one of the dispensers was a pharmacy student. Team members were seen to be working well together to manage the workload. The pharmacy had contingency arrangements for holidays and sickness, utilising staff members from other pharmacies within the company when needed.

The trainee pharmacist was supported and supervised in their training by the SI pharmacist. And they received four hours of protected learning time per week. Other team members received protected learning time when new training opportunities arose. Team members had been trained to take people's blood pressure and the SI had assessed their competency.

Team members asked people relevant questions and gave advice when selling medicines over the counter. They were aware of the need to be vigilant for potential repeated requests for purchases of medicines liable to misuse. They felt comfortable having supportive conversations with people and referring to the pharmacist if necessary. Team members were enthusiastic when providing services to help people, explaining how providing people with antibiotics for urinary tract infections made positive impacts on peoples health. Team members received yearly performance reviews. They felt comfortable raising concerns and there was a whistleblowing policy and SOP available if required. They explained there was frequent communication between all branches within the company where concerns and learnings were shared.

## Principle 3 - Premises ✓ Standards met

### Summary findings

The pharmacy premises are secure and generally clean and tidy. And the space is suitable for the services provided. The pharmacy has good access for people requiring a private conversation and for the provision of services.

### Inspector's evidence

The pharmacy premises had a front retail area and a dispensary area to the rear. The premises were generally clean and tidy, but the area in which medicines awaiting collection were stored was small and some medicines were stored on the floor which somewhat increased the risk of trips. Workflow was controlled using different dispensing benches for different dispensing activities.

The pharmacy had two consultation rooms where people could have private conversations with team members and access services with the pharmacist. The larger room was used as the main consultation room. And the smaller room was used for the supervision of medicines and provision of the needle exchange service. The dispensary was protected from public view by the medicines counter and allowed privacy for various dispensing tasks to take place without distraction. There was a sink with hot and cold water for hand washing and professional use in the dispensary. And the toilet facilities were clean, well maintained and provided hot and cold water for hand washing. There was a cleaning rota in place that included tasks to be completed daily and weekly. The pharmacy technician explained that a deep clean occurred once a week. The pharmacy was well lit throughout, and the temperature was acceptable.

## Principle 4 - Services ✓ Standards met

### Summary findings

People access the pharmacy premises and services easily. Team members are good at promoting health and wellbeing support for people accessing its services. And they suitably manage and deliver these services. The pharmacy mostly stores its medicines appropriately and it has effective systems to make sure its medicines are safe to supply.

### Inspector's evidence

The pharmacy had a step free access which provided ease of access to those with limited mobility and with pushchairs. It provided a range of services including providing people with their medication in multi-compartment compliance packs, delivery of medicines, and the promotion of healthy living. And it provided medication and advice to care homes. The pharmacy had two team members, known as healthy living champions, who promoted healthy living to people using a range of information provided on a large wall in the retail area of the premises. And the information was updated frequently and included current health topics. One of the champions explained the health advice promoted this month included for seasonal conditions such as hay fever and for antimicrobial stewardship. And there was information to support people lose weight. The champion explained their efforts gained them the healthy living award in 2017 and 2019.

The pharmacy team members used baskets when dispensing to keep people's prescriptions and medications together and to reduce the risk of errors occurring. They used stickers as part of the dispensing process, to indicate if a fridge line, controlled drug, or intervention by the pharmacist was required. And team members signed to indicate who had dispensed medication and who had checked it, so the team member involved in each stage could be identified. The pharmacy used patient group directions (PGDs) for some of its services, including the provision of treatment and advice for urinary tract infection and emergency hormonal contraception. The pharmacists had access to and were using the most up to date versions of the PGDs.

The pharmacy's multi-compartment compliance pack service was organised to help ensure people received their medicines in a timely manner. Communications regarding changes to people's medicines in the packs were documented on an individual record. People were provided regularly with patient information leaflets so they had information to help them take their medicines properly. But the team didn't always accurately record what the medicines in the pack looked like, which may make it difficult for people to identify their medicines. The pharmacy managed the service it provided to care homes using barcode technology. They scanned barcodes on the packs which helped reduce selection errors for care home staff. The pharmacy provided medication ahead of the time, so any queries could be resolved before people needed their medicines. The regular delivery driver used a sheet detailing the deliveries to be made. And the driver asked people to sign for deliveries involving controlled drugs. He used a cool bag within the van to ensure that fridge items were kept cool during delivery. The pharmacy technician recorded people's consent for some deliveries to be posted.

The pharmacy had a date checking procedure which divided the dispensary into six sections. Team members highlighted medicines going out of date in the next six months with stickers so these medicines could be used first. The pharmacy had a diary which contained prompts to complete expiry date checks and record fridge temperatures. Team members signed to say this had been

completed. A sample of medicines checked were found to be within their expiry date. And medicines with a short expiry after opening were marked with the date of opening.

Team members were aware of their additional responsibilities to provide additional counselling for people taking higher-risk medicines. This included counselling people in the at-risk category taking valproate-containing medicines and providing them with patient safety cards. They had completed an audit to ascertain whether any people receiving valproate regularly were in the at-risk category. The pharmacy received emails about drug alerts and recalls through an online system. Team members actioned these and recorded them as part of the monthly safety review for team members to refer to.



## Principle 5 - Equipment and facilities ✓ Standards met

### Summary findings

The pharmacy has suitable equipment and facilities to help deliver its services safely and effectively. And team members use the equipment and facilities in a way which protects people's private information.

### Inspector's evidence

The pharmacy used electronic copies of up-to-date resources and the team had access to the internet. It had a range of equipment to use. This included a blood pressure monitor which did not require calibrating and clean glass measures for measuring liquid medicines and water. These were marked so volumes of medicines could be measured accurately. The team marked the measures to indicate which were for water and which were for liquid medicines. The pharmacy used clean equipment to count tablets and separate equipment used solely for cytotoxic medicines.

The dispensary lay out was designed in such a way that meant private information on computer monitor screens was protected and could not be seen by unauthorised people. Team members used NHS smartcards and had passwords to access computer systems. The area where medicines and prescriptions awaiting collection were stored was positioned so that people's private information could not be seen in the retail 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.