

Registered pharmacy inspection report

Pharmacy Name: Tesco Instore Pharmacy, Brading Road, RYDE, Isle of Wight, PO33 1QS

Pharmacy reference: 1093395

Type of pharmacy: Community

Date of inspection: 02/10/2023

Pharmacy context

This pharmacy is located within a large Tesco Extra supermarket on the outskirts of Ryde on the Isle of Wight. The pharmacy serves the local population as well as tourists. The pharmacy currently provides services including NHS dispensing and flu vaccinations. It also sells over-the-counter medicines and provides health advice.

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

The pharmacy provides services in line with company processes and procedures which are being followed by staff. Team members generally record, review and learn from mistakes that occur during the dispensing process to prevent similar mistakes in future. The pharmacy has the appropriate insurance cover to protect people if things go wrong. The pharmacy team keeps the records it needs to by law. They protect patient information and understand their roles in protecting vulnerable people.

Inspector's evidence

The pharmacy had electronic standard operating procedures (SOPs) issued by head office to help deliver services safely and these were reviewed regularly. Team members had read and understood the SOPs relevant to their roles.

There were record sheets available to write down dispensing mistakes the team members made that were spotted before the medicines were handed out (near misses). The most recent records were from the week of the inspection. The records made contained limited information about the mistake and could have included more detail about why the mistake might have happened or any learnings to prevent similar happening again. There was also a process to record and report mistakes which reached people (known as dispensing errors) to head office. And to share learnings from previous mistakes with the team. Some medicines with similar names or similar packaging had been more clearly separated and the storage areas highlighted to prevent picking errors. The pharmacy manager explained the team was being particularly vigilant at present about look alike and soundalike medicines, as well as quantities on prescriptions.

Prescription labels were initialled at the dispensing and checking stages to create an audit trail showing who had been involved in these tasks. Designated areas of the pharmacy were used for separate tasks such as dispensing and checking prescriptions to reduce the risk of distractions. Baskets were used to keep prescriptions for different people separate. The responsible pharmacist was observed managing the workload by prioritising urgent prescriptions and giving realistic waiting times to people. The pharmacy technician explained the pharmacy had introduced a new system whereby people would receive a text from the pharmacy to inform them that their prescription was ready and this helped manage the workload and seemed to improve the service for customers.

Members of the team could explain what they could and couldn't do when a pharmacist was not present. There was also reference information in the dispensary to help staff know what to do if this happened. Team members could explain the restrictions on sales of painkillers containing codeine and would refer repeat requests to purchase these to the pharmacist. The pharmacy had also recently taken steps to control the sale of Phenergan over the counter. The pharmacy had a complaints procedure and feedback this was taken into account when planning services. The pharmacy had recently received positive feedback since it had reverted its opening hours back to being open over the weekend.

The pharmacy had current professional liability and public indemnity insurance. Records about controlled drugs (CDs) complied with legal requirements. CD running balances were kept and checked for accuracy regularly. The pharmacy had a separate register for patient-returned CDs. The responsible pharmacist (RP notice) was displayed clearly and showed the correct details for the RP on duty. Records

about the RP were kept and were complete. Records about private prescriptions were kept electronically. Records of unlicensed special medicines were also maintained appropriately.

There were written procedures and staff training about protecting patient information and confidentiality. Sensitive information was stored out of the reach and sight of the public and confidential waste was disposed of securely. The IT system was password protected. Team members, including the pharmacy manager, had completed the appropriate level of safeguarding training. The pharmacy manager was not aware of any incidents of concern about the welfare of a vulnerable person but knew how to report one if it happened.

Principle 2 - Staffing ✓ Standards met

Summary findings

There are just about enough pharmacy team members to cope with the current workload though, at times, the team can feel under some pressure. They work closely together, can raise concerns and discuss issues.

Inspector's evidence

At the time of the inspection there was a pharmacist (manager) together with a technician and trained medicines counter assistant present. The team members were currently working behind with the workload due to staff holidays and pressure from other local pharmacies closing, but the team were working hard to prioritise this work effectively. The team members were currently trying to cover any holiday or sickness absences through working overtime and they were observed to be working well as a team. The team referred queries to the RP where needed. Members of staff had completed or were enrolled on accredited training courses relevant to their roles. Those team members on accredited training courses were allocated time wherever possible to complete training.

To help keep their skills and knowledge up to date, team members also had access to training modules provided by the company, some of which were considered mandatory. The team members were prompted about any new or mandatory training and its completion was tracked.

The pharmacy manager held regular team meetings with the team and staff were able to feedback with any ideas or concerns. The pharmacy manager was also planning to carry out performance reviews with the team.

Principle 3 - Premises ✓ Standards met

Summary findings

The pharmacy is clean, bright and maintained to an adequate standard. The pharmacy has a private consultation room which people can use if they want to speak privately with the pharmacist and the pharmacy is secure when it is closed

Inspector's evidence

Overall, the premises were large enough for the activities currently undertaken and were kept reasonably clean and tidy. The dispensary had sufficient space to help with safe dispensing routines and sections of dispensing bench were reserved for specific parts of the dispensing process to reduce risks. Room temperatures in the premises were appropriate and controllable, and levels of ventilation and lighting were appropriate for the activities undertaken.

The pharmacy had a consultation room just off the retail area which was reasonably large and well kept. It had lockable storage and a computer terminal which supported its use for services. People could have a private conversation about their healthcare in this room. The pharmacy team members had access to rest areas and hygiene facilities in the main store. The premises could be secured outside of opening hours and were accessible to people with mobility issues or those with prams or wheelchairs.

The dispensary was clearly separated from the shop area and access by the public was suitably restricted. Dispensed medicines were kept away from public view to protect people's private information and people visiting the pharmacy could not see information on the pharmacy's computer screens.

Principle 4 - Services ✓ Standards met

Summary findings

The pharmacy generally delivers its services in a safe manner. The pharmacy sources, stores and manages medicines appropriately and so makes sure that the medicines it supplies are fit for purpose. The team identifies people supplied with high-risk medicines so that they can be given extra information they need to take their medicines safely.

Inspector's evidence

The pharmacy's opening hours were displayed at the counter. The entrance doors to the supermarket were power assisted and level with the pavement and the aisles were wide enough to accommodate people with prams or wheelchairs. There was an induction hearing loop available, with instructions for people wishing to make use of this equipment. There was parking available for people on site.

Dispensing being carried out during the visit was done in an orderly way. All dispensed items were accuracy-checked by the RP and were subject to a third check just before handing out to people. Baskets were used to keep prescriptions for different people separate.

The team members understood that prescriptions for valproate needed additional care when supplying to people who might become pregnant. The stock packs available had the warning cards and alert stickers attached. The pharmacy also had spare cards and alert stickers to use if a smaller quantity needed to be supplied in a plain box. Team members knew where to apply dispensing labels so as not to obscure safety information on the original packs. The pharmacy manager explained how they would check that people were using adequate contraception. The pharmacy team were also aware of upcoming changes to legislation relating to original pack dispensing of valproate products.

Medicines were obtained from licensed wholesalers and specials were obtained from specials manufacturers. Medicines were stored in dispensary drawers and on shelves in the dispensary. Medicines for dispensing were kept in appropriately labelled containers. CDs were stored securely. The pharmacy manager explained that since she had joined, she had implemented a new system for date checking highlighting any short-dated stock with stickers. The medicines fridge temperatures were monitored and were kept within the required range for medicines requiring refrigeration. The pharmacy had a process to receive and act on drug recalls and safety alerts. It was notified of these by its head office and there was a system in place to make sure these were responded to.

Principle 5 - Equipment and facilities ✓ Standards met

Summary findings

The pharmacy has the equipment it needs for the delivery of its services. It maintains this equipment to ensure it works and is accurate.

Inspector's evidence

The pharmacy had measuring equipment of a suitable standard. These were kept clean. The pharmacy had access to online reference sources to assist with clinical checks and other services. It also had the right equipment to assist the safe disposal of medicines and sharps waste and kept these out of reach of the public. All portable electrical equipment appeared to be in good working order and testing of this was arranged by head office.

The pharmacy had cordless phones so team members could make phone calls out of earshot of waiting customers if needed. The pharmacy's patient medication records and computer screens in the pharmacy could not be viewed from the shop floor. The blood pressure meter was replaced regularly to help make sure the results it provided to people were reliable.

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.