

# Registered pharmacy inspection report

**Pharmacy Name:** Headley Pharmacy, Mill Lane, Headley, BORDON, Hampshire, GU35 8LH

**Pharmacy reference:** 1097404

**Type of pharmacy:** Community

**Date of inspection:** 09/11/2022

## Pharmacy context

This pharmacy is located inside a GP surgery in Bordon. It dispenses NHS and private prescriptions, sells a range of over-the-counter medicines and provides health advice. The pharmacy also dispenses some medicines in multi-compartment compliance aids for those who may have difficulty managing their medicines at home. The pharmacy also provides flu vaccinations and a local delivery 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
<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	N/A	N/A	N/A
<b>5. Equipment and facilities</b>	Standards met	N/A	N/A	N/A

## Principle 1 - Governance ✓ Standards met

### Summary findings

The pharmacy's working practices are safe and effective. Its team members understand their roles and responsibilities. They discuss any mistakes they make and share information on what could go wrong to help reduce the chance of making mistakes in future. The pharmacy team keep the records required by law and they know how to keep vulnerable people safe.

### Inspector's evidence

Standard Operating Procedures (SOPs) were in place for the dispensing tasks and were regularly updated. Team members had all signed the SOPs to say they had been read and understood. Staff roles and responsibilities were described in the SOPs. There was a procedure in place for managing risks in the dispensing process, whereby all incidents, including near misses, were discussed at the time and recorded. The pharmacist explained that since the installation of a dispensing robot, the staff had very few near misses. The pharmacist described an incident whereby the robot was dispensing levothyroxine instead of folic acid, and they found that this had been caused by human error and so the team rectified the mistake in the robot immediately.

There was a workflow in the pharmacy where different tasks such as labelling, dispensing and checking were carried out at separate areas of the dispensary. Multi-compartment compliance aids were prepared in a dedicated area at the back of the dispensary. There was a complaints procedure in place within the SOPs and the staff were clear on the processes they should follow if they received a complaint. The complaints procedure was also detailed in a poster displayed in the pharmacy. A valid certificate of public liability and indemnity insurance was on display in the pharmacy.

The controlled drug register was maintained appropriately and a balance check was carried out whenever items were handed out. This meant that slower moving stock was audited infrequently. The responsible pharmacist record was held electronically, and the correct responsible pharmacist notice was displayed in the pharmacy where the public could see it. The maximum and minimum fridge temperatures were recorded daily and were within the correct temperature range. The private prescription records were completed appropriately, and the specials records were complete with the required information documented accurately. The computers were all password protected and the screens were not visible to the public. There were cordless telephones available for use and confidential wastepaper was collected in baskets on the workbenches and later shredded.

The pharmacists had completed the Centre for Post-graduate Pharmacy Education (CPPE) Level 2 training programme on safeguarding vulnerable adults and children, and the rest of the team had completed appropriate safeguarding training. All team members were aware of things to look out for which may indicate a safeguarding issue. The team had a safeguarding vulnerable groups policy, and they were able to obtain the contact details for relevant safeguarding authorities online.

## Principle 2 - Staffing ✓ Standards met

### Summary findings

The pharmacy team manages the workload safely and effectively. Team members work well together and support one another. They are comfortable about providing feedback to one another and are involved in improving the pharmacy's services.

### Inspector's evidence

During the inspection, there was one regular pharmacist and one locum pharmacist. There were also four further dispensers. The pharmacist explained that she had double pharmacist cover three days a week to enable more services to be provided. Certificates of completed training for the staff were on display in the consultation room. The staff were seen to be working well together and supporting one another. Two dispensers were observed effectively counselling a customer requesting a product for worms. Team members explained that they were open with one another and could learn from each other and discuss mistakes without embarrassment.

One of the dispensers explained that the staff were all signed up to Pharmacy Magazine and they would complete any refresher training regularly. She went on to explain that they were in the process of signing up to a new training provider who would be providing more structured training. The dispenser also explained that when the robot was planned, staff views were taken on board prior to installation. The team members stated they were able to voice their opinions freely within the pharmacy and raise any concerns. There was also a whistleblowing policy in place should the staff feel the need to raise any concerns they had if necessary. There were no targets in place and the pharmacist stated that she did not feel pressurised to deliver any services and that she would never compromise her professional judgement to do so.

## Principle 3 - Premises ✓ Standards met

### Summary findings

The pharmacy's premises are clean, tidy and organised. They provide a safe, secure and professional environment for people to receive healthcare services. The pharmacy has a consultation room for private conversations and services.

### Inspector's evidence

The pharmacy was in the same building as a doctor's surgery. It shared a common entrance with the medical centre at the front, for customers, and at the rear, via the staff room, for staff. The surgery was closed at the weekend when the pharmacy was open and open two nights per week when the pharmacy was closed. Lockable shutters were pulled into position between the surgery and pharmacy when required. The staff room was used by both pharmacy and surgery staff.

The pharmacy was spacious, bright and modern. The premises consisted of a large retail space with a dispensary at the end. The dispensary had distinct workstations for labelling, dispensing and accuracy checking. There was a large robot across the back wall of the dispensary which dispensed items on prescriptions and which the team used to store prescriptions which were completed and ready to be collected. The team used the areas well and workflows were clear. The pharmacy was laid out with the professional areas clearly defined away from the main retail area of the pharmacy. All the products for sale within the pharmacy area were healthcare related and relevant to pharmacy services. The pharmacy had installed Perspex screens by the medicines counter to help prevent the spread of airborne viruses.

A signposted consultation room was present in the retail space. This was of a suitable size for its intended purpose, and it could be locked. There were two entrances into the consultation room: one from the dispensary and one from the retail space. The door from the retail space was kept locked when the consultation room was not in use. The pharmacy team were observed using the consultation room appropriately and taking people in there for private conversations and services. Conversations in the consultation room could not be overheard.

The dispensary was screened from public view to allow for the preparation of prescriptions in private. The ambient temperature was suitable for the storage of medicines and regulated by an air conditioning system. Lighting throughout the pharmacy was appropriate for the delivery of pharmacy services.

## Principle 4 - Services ✓ Standards met

### Summary findings

The pharmacy provides services safely and makes its services available to everyone. Staff give people the advice and support they need to help them use their medicines safely and properly. In general, the pharmacy manages its medicines safely and effectively. The pharmacy stores its medicines safely. And it carries out checks to help make sure that its medicines are fit for purpose.

### Inspector's evidence

There was a range of leaflets available for people to read about services on offer and general health promotion in the retail area of the pharmacy and in the consultation room. There was step-free access into the pharmacy via wide automatic doors and there was seating available should anyone require it when waiting for services. Alcohol hand gel was also available for use in the pharmacy.

The team members were aware of the requirements for women in the at-risk group to be on a pregnancy prevention programme if they were taking valproates. The pharmacist had valproate information cards and leaflets which were supplied when the team dispensed valproates. She stated that they had audited valproate use in the pharmacy and were aware of different people's requirements.

The team organised the preparation of multi-compartment compliance aids into a four-week cycle and maintained audit trails to prepare and deliver them. The labels on a sample of compliance aids were seen to have accurate descriptions of the medicines as well as being signed by the person who dispensed and checked the items. Every month, they supplied each patient with the relevant Patient Information Leaflets.

The pharmacy obtained medicinal stock from licensed wholesalers. Invoices were seen to verify this. Date checking was carried out monthly and the team had stickers to highlight items due to expire and recorded any items which had expired. There were denaturing kits available for the destruction of controlled drugs and dedicated bins for the disposal of waste medicines were available. They were seen being used for the disposal of medicines returned by patients. The team also had a bin for the disposal of hazardous waste. The fridge was in good working order and the stock inside was stored in an orderly manner. The CD cabinet was appropriate for use and CDs for destruction were segregated from the rest of the stock. MHRA alerts and recalls were actioned appropriately by the team. The recall notices were printed off in the pharmacy and annotated to show the action taken.

## Principle 5 - Equipment and facilities ✓ Standards met

### Summary findings

The pharmacy has the equipment and facilities it needs to provide services safely. And, it uses its facilities and equipment to keep people's private information safe.

### Inspector's evidence

The pharmacy was equipped with a range of current reference sources. The team had access to relevant equipment to provide pharmacy services. This included counting triangles and clean, crown stamped, conical measures for liquid medicines. The pharmacy had a dispensing robot with four outlets in place and this was regularly maintained.

The dispensary sink used to reconstitute medicines was clean. Hot and cold running water was available with hand wash present. Medicines requiring cold storage were stored at appropriate temperatures within medical fridges.

Computer terminals were positioned in a manner that prevented unauthorised access. There were cordless phones to enable further privacy. The team used their own individual NHS Smart cards to access electronic prescriptions.

### 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.