

Registered pharmacy inspection report

Pharmacy Name: Tait's Pharmacy, 45 Saltaire Road, SHIPLEY, West Yorkshire, BD18 3HZ

Pharmacy reference: 1109439

Type of pharmacy: Internet / distance selling

Date of inspection: 28/04/2022

Pharmacy context

The pharmacy is above a business premises in Shipley. It is a distance selling pharmacy and the premises are not open directly to the public. The pharmacy mainly dispenses NHS prescriptions and delivers medicines to people's homes. It supplies medicines to people in multi-compartment compliance packs. The inspection was completed during the Covid-19 pandemic

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 adequately identifies and manages risks to its services. It has most of the documented procedures it needs to help the pharmacy owner manage these risks. The owner regularly records and considers mistakes they make. And they learn from these to reduce the risks of similar mistakes. The pharmacy owner understands their role to help protect vulnerable people. And they suitably protect people's private information.

Inspector's evidence

The pharmacy had a set of standard operating procedures (SOPs) in place to help manage the risks with its services. The pharmacy owner had reviewed the procedures in 2021. And had scheduled the next review of the procedures for 2023. The pharmacy did not employ and pharmacy team members. But the owner had signed each procedure and documented the date of her review.

The pharmacy owner recorded near miss and dispensing errors they made when dispensing. There were documented procedures to help them do this effectively. They paused to consider their errors and why they might have happened. And they used this information to make some changes to help prevent the same or similar mistakes from happening again. One example of changes they had made was attaching alert stickers to shelves where look-alike and sound-alike (LASA) medicines were kept, to help prevent the wrong medicines being selected. One example was highlighting gabapentin and carbamazepine, which had recently been supplied in very similar packaging. The pharmacy owner analysed the data collected whenever they made a new entry to look for patterns. She did not record her analysis. But she confirmed that she would notice patterns and make the necessary changes to help prevent similar mistakes happening. In some of the records that were available, the pharmacy owner did not always capture much information about why the mistakes had been made or the changes to prevent a recurrence to help aid future learning. This was discussed. And the owner appreciated how this type of information could help aid learning and inform the changes she made to help make the pharmacy safer. The pharmacy recorded dispensing errors provided to people. But there were no records of any dispensing errors. The pharmacy owner confirmed she had not made any dispensing errors. And she would record errors using the electronic patient medication record (PMR) system.

The pharmacy had a procedure to deal with complaints handling and reporting. The pharmacy had a practice leaflet. And the pharmacy owner provided this leaflet to people when they first used the pharmacy. The pharmacist said people who used the pharmacy were mostly known to her. And these people knew her phone number to get in touch. The pharmacy did not advertise its complaints procedure to people. And it did not collect regular feedback formally. The pharmacist said any feedback was received verbally. And she had not received any complaints.

The pharmacy did not have professional indemnity insurance in place for the premises. But the pharmacist had personal professional indemnity insurance. She gave an assurance that she had checked to make sure that her personal insurance provided the right level of cover for the services being provided. The pharmacy maintained a responsible pharmacist record electronically, which was generally complete. The pharmacist displayed their responsible pharmacist notice. The pharmacy kept controlled drug (CD) registers complete and in order. It kept running balances in all registers. And they were audited against the physical stock quantity after each entry was made. It kept and maintained a

register of CDs returned by people for destruction. And it was complete and up to date. The pharmacist monitored and recorded minimum and maximum fridge temperatures every day. The pharmacy kept private prescription records in a paper register. And it recorded emergency supplies of medicines electronically. The pharmacy rarely dispensed private prescriptions and emergency supplies.

The pharmacy premises could not be accessed directly by the public because of its type of NHS contract. This changes the requirements for protecting people's private information. The pharmacy shredded confidential waste. The pharmacist gave a satisfactory explanation about how she maintained people's privacy. But the pharmacy did not have a documented procedure available about how to protect confidential information. The owner provided evidence that she had completed distance learning on safeguarding in 2017. But she had not updated her training since. She gave examples of symptoms that would raise her concerns. And she said that if she had a concern, she would use the internet to find out information about local safeguarding contacts. But the pharmacy did not have a procedure for dealing with a safeguarding concern about a vulnerable child or adult. These missing documented procedures were discussed. And the pharmacy owner gave her assurance that written procedure would be implemented immediately.

Principle 2 - Staffing ✓ Standards met

Summary findings

The pharmacy primarily offers a dispensing service which the pharmacist owner manages. She has the skills and knowledge to operate the pharmacy safely. She completes on-going training to maintain her professional registration. And she knows how to raise a professional concern. But she doesn't have formal plans for pharmacist cover in case of unplanned periods of absence.

Inspector's evidence

The pharmacist owner was subject to mandatory revalidation as part of her professional registration. She explained there were no other parties involved in operating the pharmacy. And she was solely responsible for running the business. The pharmacy did not have any plans in place to deal with the unplanned pharmacist's incapacity. The owner had considered the impact this may have on the continuity of care to people receiving pharmacy services. And explained she would enlist the help of a family member to organise a locum pharmacist if she could not. But the pharmacy did not have a documented procedure to instruct someone about how to do this in an emergency. The pharmacist said she would raise any professional concerns with the GPhC.

Principle 3 - Premises ✓ Standards met

Summary findings

The pharmacy is clean and properly maintained. It provides a suitable space for the services it provides.

Inspector's evidence

The pharmacy was in a business unit and the premises were not accessed directly by the public due to the contract it held. The pharmacy had a small room used for dispensing. The pharmacy was generally tidy. Most of its benches were organised. And it had defined areas for dispensing and checking. The floors and passageways were free from clutter and obstruction. There was a clean, well-maintained sink in the corridor outside the pharmacy used for medicines preparation. The sink was shared with other occupants of the building. The pharmacist said she rarely had to use the sink to prepare medicines. There was a toilet, which provided a sink with hot and cold running water and other facilities for hand washing. Heat and light in the pharmacy was maintained to acceptable levels. The overall appearance of the premises was adequate for the services being provided.

Principle 4 - Services ✓ Standards met

Summary findings

The pharmacy's services are suitably accessible to people. And it provides its services safely and effectively. The pharmacy sources and stores its medicines appropriately. And it adequately manages its medicines. The pharmacy helps some people to take their medicines correctly by providing them in compliance packs. And the pharmacy owner provides these people with necessary written information about their medicines.

Inspector's evidence

The pharmacy had a distance selling NHS contract. So, the pharmacy's premises were not accessible to the public. The pharmacy owner explained that most people who used the pharmacy were known to her, and they knew how to contact her if necessary. The pharmacy was able to produce large-print labels for people who had a visual impairment. And the pharmacist said she would use written communication with someone with a hearing impairment. But she currently did not have anyone who required these adjustments.

The pharmacy supplied medicines to people in multi-compartment compliance packs when requested. It attached backing sheets to the packs, so people had written instructions of how to take their medicines. The owner included descriptions of what the medicines looked like, so they could be identified in the pack. And they routinely provided people with patient information leaflets about their medicines each month. The owner documented any changes to medicines provided in these packs using the pharmacy's electronic patient medication records (PMR) system. The pharmacist owner signed the checked by box on dispensing labels. She said she tried to have a break between dispensing and checking her own work. She used dispensing baskets during the dispensing process to help prevent prescriptions being mixed up. The owner delivered medicines to people. And she recorded the deliveries made. The owner said she would discuss the risks of valproate with anyone receiving a prescription for the medicine that could become pregnant. And she would check if they were using adequate contraception. She said she would use the internet to source and provide printed material to people to help explain these risks.

The pharmacy obtained medicines from licensed wholesalers. It stored medicines on shelves. It kept all stock in the secure pharmacy premises. The pharmacy had disposal facilities available for unwanted medicines, including CDs. The pharmacy owner monitored the minimum and maximum temperatures in the pharmacy's fridge each day. And they recorded their findings. The temperature records seen were within acceptable limits. The owner checked medicine expiry dates at least every month. And records were seen. The owner highlighted and recorded any short-dated items up to twelve months before their expiry. And she recorded these items on a monthly stock expiry sheet. She removed these expiring items during the month before their expiry. The owner also confirmed that she routinely checked medicines expiry dates during the dispensing and checking process. And when she was putting stock away on the shelves. After a search of the shelves, the inspector did not find any out-of-date medicines.

Principle 5 - Equipment and facilities ✔ Standards met

Summary findings

The pharmacy has the necessary equipment available, which it properly maintains. And it manages and uses the equipment in ways that protect people's confidentiality.

Inspector's evidence

The pharmacy had the equipment it needed to provide the services offered. The resources it had available included the British National Formulary (BNF), the BNF for Children, various pharmacy reference texts and use of the internet. The pharmacy had a set of clean, well maintained measures available for medicines preparation. It had a shredder available to destroy confidential waste. It kept its computer terminal in the secure pharmacy premises. And this was password protected. The pharmacy fridge was in good working order. The pharmacy restricted access to all equipment and it stored all items securely.

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.