## General Pharmaceutical Council

# Registered pharmacy inspection report

Pharmacy Name: Harley Street Specialist Hospital (HSSH Pharmacy),

Pharmacy Department, 18-22 Queen Anne Street, LONDON, W1G 8HU

Pharmacy reference: 1110426

Type of pharmacy: Hospital

Date of inspection: 30/01/2024

## **Pharmacy context**

This pharmacy is part of an independent hospital in the Harley Street area. The hospital provides private healthcare services including outpatient consultations, diagnostics, and day surgery. This activity is regulated by the Care Quality Commission (CQC). The pharmacy does not currently provide any activities or services which require it to be registered with the General Pharmaceutical Council (GPhC), therefore a full inspection was not carried out.

## **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 protects people's personal information and it has safeguarding policies to support vulnerable people. There are basic procedures in place covering GPhC regulated activity should this take place.

### Inspector's evidence

The hospital and pharmacy had recently changed ownership. The superintendent pharmacist was newly appointed. He worked in the pharmacy as the regular pharmacist. A responsible pharmacist (RP) notice was displayed, and an electronic log was maintained using the patient medication record system (PMR). The pharmacist confirmed that he had not undertaken any GPhC regulated activity since starting in his role. And he was not aware of any GPhC activity having taken place prior to this or if there was any intention to do so in the future.

The hospital had a range of policies and procedures covering its operational activities. The pharmacist could access these on the internal computer system. The policies covered matters such as risk management, information governance and safeguarding. The pharmacist had been introduced to the policies as part of his induction, and he understood his professional obligation to follow them. Any confidential information in the pharmacy was suitably stored and disposed of. The pharmacy had a procedure which explained the basic principles of the RP requirements should any GPhC activity take place. It kept records of supplies of medicines made in the course of the hospital business. No records relating to supplies or services provided under the pharmacy's GPhC registration were identified during the inspection.

## Principle 2 - Staffing ✓ Standards met

#### **Summary findings**

The pharmacy services are provided by qualified pharmacists working as part of a wider clinical team. They manage the workload safely.

### Inspector's evidence

The pharmacist worked alone in the pharmacy. There were no pharmacy support staff. Bank pharmacists were used to cover any absences. The workload was easily manageable, and the pharmacist was not working under pressure. He could seek support and advice from the clinical and management teams if needed.

## Principle 3 - Premises ✓ Standards met

#### **Summary findings**

The pharmacy is bright, clean and professional in appearance. It provides a suitable space for the delivery of healthcare services.

#### Inspector's evidence

The pharmacy was located in a small room on the first floor of the building. It was a suitable size for the workload. It was fitted with work benches, shelving and storage cupboards. Fixtures and fittings were in good order, and the pharmacy was clean, tidy and well organised. Air conditioning controlled the room temperature, and the pharmacy was bright and well lit.

The first floor could be accessed from the main reception via stairs or a lift. The pharmacy had a hatch so hospital staff could collect medication. Patients did not usually attend the pharmacy in person. It did not have a consultation room. Only the pharmacist could access the pharmacy. It was kept locked when not in use, and the pharmacy was not accessible to hospital staff out of hours.

## Principle 4 - Services ✓ Standards met

#### **Summary findings**

The pharmacy sources, stores and manages medicines safely. And it takes the correct action to make sure medicines are safe for people to use.

#### Inspector's evidence

The pharmacy dispensed medicines for hospital patients, and it supplied medicines to the hospital's operating theatres and recovery wards as part of its hospital activity. The volume of dispensing was low.

Medicines were obtained from licensed suppliers. The pharmacy's stock holding was small. Medicines were stored in an organised manner. No out-of-date medicines were found on the shelves. Medicine fridge temperatures were monitored and recorded. Controlled drugs were stored securely, and the hospital had a Home Office licence. Obsolete medicines were separated in the pharmacy for collection by an authorised waste contractor. Drug alerts were received by email and an audit trail was kept showing that these had been actioned.

## Principle 5 - Equipment and facilities ✓ Standards met

#### **Summary findings**

The pharmacy has the equipment and facilities it needs to store and supply medicines safely.

## Inspector's evidence

The pharmacy was suitably equipped with medical fridges for storing medicines, a controlled drugs cabinet and a sink with hand washing facilities. Other equipment for preparing medicines was available. Computer systems were password protected. All electrical equipment appeared to in good working order.

## 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.	