

Registered pharmacy inspection report

Pharmacy Name: Lloyds pharmacy, 316-318 Main Street, Camelon,
FALKIRK, FK1 4EG

Pharmacy reference: 1112766

Type of pharmacy: Community

Date of inspection: 27/10/2022

Pharmacy context

This is a community pharmacy in Camelon. It dispenses NHS and private prescriptions and provides a substance misuse service. Pharmacy team members advise on minor ailments and medicines use. And they supply over-the-counter medicines and prescription only medicines via 'patient group directions' (PGDs).

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

Pharmacy team members follow good working practices. And they manage dispensing risks to keep services safe. Pharmacy team members recognise and appropriately respond to safeguarding concerns. They suitably protect people's private information and keep the records they need to by law. Team members make records of mistakes and use this information to review the pharmacy's processes and procedures. They learn from mistakes and take the opportunity to improve the safety of services.

Inspector's evidence

The pharmacy had control measures to manage the risks and help prevent the spread of coronavirus. This included a plastic screen at the medicines counter. And the placing of hand sanitizer at the entrance and throughout the dispensary for visitors and team members to use. Team members were not wearing face masks at the start of the inspection. But agreed to do so at the request of the inspector.

The company used 'standard operating procedures' (SOPs) to define the pharmacy's working practices. And team members annotated records when they had read and understood them. The company was gradually changing the way it introduced new procedures. And instead of issuing paper-based SOPs, it was notifying team members to access new electronic SOPs on its new online system. Team members printed the new SOPs and replaced the old SOPs in the pharmacy folder. Sampling included 'responsible pharmacist' and 'controlled drug' procedures and showed the company kept them up to date.

The pharmacy had policies in place for the services it provided. This included diabetes checks and blood pressure monitoring. Dispensers signed medicine labels to show who had 'dispensed' and who had 'checked' prescriptions. This meant the pharmacist was able to help individuals to learn from their dispensing mistakes. Team members recorded their own near miss errors. And a monthly team briefing was used to discuss patterns and trends. The number of near miss errors had fallen, and the category of frequent near misses had changed. This was due to the company introducing bar-code scanning technology that helped team members identify selection errors. A documented review for August 2022 showed mostly quantity errors. And team members had discussed the possible causes at the regular monthly briefing. Following this, they had agreed to highlight packs on all sides to alert each other. And they were using a black marker pen which made part packs more visible. Team members separated 'look alike and sound alike' (LASA) medicines. And they had moved amitriptyline tablets to a different shelf location to manage the risk of selection errors. They had agreed to check dispensing labels more closely and to provide full instructions on labels such as 'as required' instead of 'PRN'. Team members knew to record dispensing incidents on an electronic template which they sent to the superintendent's office. The template included a section to record information about the root cause and any mitigations to improve safety arrangements.

The pharmacy provided information about its complaints process in a company leaflet. And team members displayed the leaflet in the waiting area for self-selection. The area pharmacist manager visited the pharmacy on a regular basis. And they carried out audits to confirm the pharmacy was operating safely and effectively. They provided feedback following audits and highlighted areas for improvement if required. There had been only a few actions following a recent audit. And this included

the need to calibrate the machine they used for diabetes testing. Team members carried out weekly 'safer care' audits. And sampling showed that documentation was mostly up to date. For example, they had audited the environment they worked in, and had documented that bench areas were clear of congestion, which was evident on the day of the inspection.

Team members maintained the records they needed to by law. And the pharmacy had public liability and professional indemnity insurances in place which were valid until June 2023. The pharmacist displayed a responsible pharmacist notice which was visible from the waiting area. And they were using a paper-based RP record as an interim measure until they could access the electronic RP record. They had planned to report the issue to the area manager. Team members maintained the controlled drug registers and kept them up to date. Records showed they carried out a regular balance check every week. People returned controlled drugs they no longer needed for safe disposal. And team members used a CD destruction register to document items. The pharmacist signed the register to confirm items had been safely disposed of. Team members filed prescriptions so they could easily retrieve them if needed. They kept records of supplies against private prescriptions and supplies of 'specials' that were up to date. The pharmacy provided training so that team members understood data protection requirements and how to protect people's privacy. And a policy was available for them to refer to. They used a designated container to dispose of confidential waste. And an approved provider collected the waste for off-site destruction. The pharmacy trained its team members to manage safeguarding concerns. And it provided a policy for them to refer to. This included contact details for local agencies. Team members knew to speak to the pharmacist whenever they had cause for concern. This included concerns about vulnerable people when they failed to collect medications that were due to. A chaperone notice advised people they could request to be accompanied whilst in the consultation room.

Principle 2 - Staffing ✓ Standards met

Summary findings

Pharmacy team members have the necessary qualifications and skills for their roles and the services they provide. And they work together to suitably manage the workload. The company supports team members to develop in their roles. And the pharmacy team continues to learn to keep their knowledge and skills up to date.

Inspector's evidence

The pharmacy's prescription workload had fallen slightly over the past several months. And the company had reduced the number of working hours in the pharmacy team when a medicines counter assistant had left. This meant a dispenser was working full-time at the medicine counter and so wasn't performing tasks in the dispensary. The pharmacy had been without a regular pharmacist for around a year. And the pharmacy had been running with locum pharmacists since then. Since January 2022, there had been regular pharmacists providing cover and this had improved continuity for the pharmacy team. Team members were mostly long serving and experienced and included one full-time pharmacist, one full-time pharmacy technician, two full-time dispensers, one part-time dispenser, one dispenser who worked every Saturday, one part-time medicines counter assistant and one full-time delivery driver. The pharmacy had buddied-up with another branch, and both branches worked together to provide cover when needed. At the time of the inspection a pharmacy technician manager from the other branch was covering annual leave.

The company supported team members to learn and develop in their roles. And its new online operating system provided access to mandatory training such as pharmacovigilance training and new 'standard operating procedures' (SOPs). Team members had individual usernames and passwords which linked to individual records to evidence training. Sampling showed that team members had completed mandatory training for the new online operating system. And the company had arranged for trainers to visit the pharmacy to deliver onsite training. The company had recently arranged for the pharmacy technician to attend off-site training alongside other Lloyds colleagues to learn how to administer flu vaccinations. The training had included injection technique and anaphylaxis procedures. The pharmacy technician was due to administer 10 vaccinations under the supervision of a pharmacist before they were accredited to administer vaccinations on their own. The health board had arranged onsite training to help team members operate a new online recording system. And they had developed the necessary skills to make records of supplies against the needle exchange service. Team members attended a monthly briefing to discuss dispensing mistakes. And this helped them improve their accuracy in their dispensing. They were also proactive at suggesting improvements to their working practices. For example, they had recently updated and renewed the supplementary records used to help them dispense multi-compartment compliance packs to improve clarity.

Principle 3 - Premises ✓ Standards met

Summary findings

The pharmacy premises supports the safe delivery of services. And the pharmacy suitably manages the space for the storage of its medicines. The pharmacy has appropriate arrangements for people to have private conversations with the team.

Inspector's evidence

The pharmacy was in a large modern purpose-built premises. Team members had organised the benches in the dispensary for different tasks. And a separate stock room at the rear of the pharmacy provided extra space to keep the dispensary tidy and free from clutter. The pharmacist supervised the medicines counter from the dispensary and could intervene and provide advice when necessary.

A sound-proofed consultation room with hot and cold running water was available for use. It provided a clinical environment for the administration of vaccines. It also provided a confidential environment for private consultations. Team members kept clinical waste containers in a locked cupboard. And they cleaned and sanitised surfaces on a regular basis to reduce the risk of spreading infection. A sink in the dispensary was available for hand washing and the preparation of medicines. And a dedicated area for comfort breaks was available for team members to use. Lighting provided good visibility throughout, and the ambient temperature provided a suitable environment from which to provide services.

Principle 4 - Services ✓ Standards met

Summary findings

The pharmacy provides services which are easily accessible. And it manages its services well to help people receive appropriate care. The pharmacy gets its medicines from reputable sources, and it stores them appropriately. The team carries out checks to make sure medicines are in good condition and suitable to supply. And it has arrangements to identify and remove medicines that are no longer fit for purpose.

Inspector's evidence

The pharmacy had a step-free entrance to provide unrestricted access for people with mobility difficulties. It advertised its services and opening hours at the front of the pharmacy. And it had a range of health information leaflets on display in the waiting area. The pharmacy was offering appointments for flu vaccinations. And team members mostly directed people to the online booking system to make an appointment. Team members kept stock neat and tidy on a series of shelves and drawers. And they used a secure controlled drug cabinet to safely segregate stock items. The pharmacy purchased medicines and medical devices from recognised suppliers. And team members carried out regular monthly expiry date checks. They updated a date checking matrix to keep track of when checks were next due. Sampling showed that items were within their expiry date. The pharmacy had recently purchased a large glass-fronted fridge to keep medicines at the manufacturers recommended temperature. And team members monitored and recorded the temperature every day. This provided assurance that the fridge was operating within the accepted range of 2 and 8 degrees Celsius. Team members were expected to check the company's online system for drug alerts. They updated the system once they had carried out the necessary checks and removed and quarantined any affected stock. The pharmacy had medical waste bins and CD denaturing kits. And this supported the pharmacy team to manage pharmaceutical waste. The pharmacy had trained team members about valproate medication and the Pregnancy Prevention Programme for people at risk. And they knew to supply patient information leaflets and to provide cards with every supply. This included with supplies of multi-compartment compliance packs.

Team members had organised the dispensary to keep their working environment safe and to effectively carry out dispensing tasks. The pharmacist positioned themselves so they could supervise the medicines counter. And team members worked at various other workstations depending on the task they were carrying out. Dispensing baskets kept medicines and prescriptions safely contained during dispensing. And this managed the risk of items becoming mixed-up. Team members used a separate bench to dispense multi-compartment compliance packs. And two experienced dispensers managed these dispensing tasks. They used trackers to prompt the re-ordering of new prescriptions. And they used supplementary records to check new prescriptions for accuracy. They provided descriptions of medicines on the dispensing labels. And they supplied patient information leaflets for people to refer to.

The pharmacy helped people to manage their repeat prescriptions. Team members re-ordered repeat prescriptions on behalf of people. And they kept them separated from other types of prescriptions. They kept a note of when medication was due and dispensed them in time for people to collect. Team members knew to speak to the pharmacist when people didn't arrive on time to collect their

medication as this might mean that people needed extra help to take their medicines. Team members used an automated dispensing system for instalments of some medicines. And the pharmacist carried out a clinical check and an accuracy check at the time new prescriptions were entered onto the system. They carried out another accuracy check at the time of supply. The health board had arranged on-site training for team members to dispense clozapine medication. People attended the pharmacy once a week for their supplies. And team members knew to access the relevant online records to confirm blood results before they made a supply.

Principle 5 - Equipment and facilities ✓ Standards met

Summary findings

The pharmacy has the equipment it needs to provide safe services. And it uses its facilities to suitably protect people's private information.

Inspector's evidence

The pharmacy had access to a range of up-to-date reference sources, including the British National Formulary (BNF). Team members used crown-stamped measuring cylinders, and they used separate measures for methadone. They had highlighted the measures, so they were used exclusively for this purpose. The pharmacy used an automated dispensing system to dispense some higher-risk medicine doses. And experienced team members calibrated the system each morning to ensure accuracy of doses. The pharmacy provided blood pressure monitoring. And team members had attached an expiry date of 22 February 2023 to the monitor. The pharmacy provided a diabetes monitoring service. And records showed the equipment was checked and calibrated every 13 weeks. The pharmacy stored prescriptions for collection out of view of the public waiting area. And it positioned the dispensary computers in a way to prevent disclosure of confidential information. Team members could carry out conversations in private if needed, using portable telephone handsets. The pharmacy used cleaning materials for hard surface and equipment cleaning. And the sink was clean and suitable for dispensing purposes. Team members had access to personal protective equipment including face masks.

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.