General Pharmaceutical Council

Registered pharmacy inspection report

Pharmacy Name: Asda Pharmacy, Unit 20, Asda Mall, Lower Earley District Centre, Lower Earley, READING, RG6 5TT

Pharmacy reference: 1119286

Type of pharmacy: Community

Date of inspection: 30/09/2024

Pharmacy context

This is a community pharmacy on the outskirts of Reading. The pharmacy provides a range of services including dispensing prescriptions. And it has a selection of over-the-counter medicines and other pharmacy related products for sale. It provides a core range of other services, including the NHS Pharmacy First service. And the NHS Hypertension Case Finding service. The pharmacy will be providing a Flu vaccination service for the upcoming flu season.

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 has appropriate written procedures in place to help ensure that its team members work safely. And the team understands and follows them. The pharmacy has insurance to cover its services. And it completes the records it needs to by law. The pharmacy team knows how to protect the safety of vulnerable people. And it protects people's confidential information properly. The pharmacy adequately identifies and manages the risks associated with its services. And team members respond appropriately when mistakes happen. And they take suitable action to prevent mistakes in the future.

Inspector's evidence

The pharmacy had procedures in place to reduce the risk of making mistakes. Team members explained how the pharmacy dealt with near misses, where dispensing mistakes were identified before they left the pharmacy. The responsible pharmacist (RP) was also the pharmacy manager. And he and his colleague pharmacists highlighted and discussed 'near misses' and errors as soon as possible with the team member involved. He did this to help prevent the same mistake from happening again. The team recognised that mistakes could occur between look-alike sound-alike medicines (LASAs). And so, when it became aware of the potential risk of confusing two LASA medicines it often separated them. And it placed warning stickers to the shelf edges in front of them. These included medicines such as such as gabapentin and pregabalin. The pharmacy also had a notice on its wall highlighting rosuvastatin and rivaroxaban as LASA medicines. Following a recent review, the pharmacy team had adopted the procedure to draw a circle around the form of certain medicines. They did this to draw attention to whether tablets or capsules had been prescribed. And since adopting this procedure fewer mistakes had happened. The team also recorded incidents where a dispensing mistake had left the pharmacy. And it carried out a root cause analysis. But it had not had many of these to report.

The pharmacy had an up-to-date set of standard operating procedures (SOPs) for team members to follow. The SOPs specified team members' roles and responsibilities. And they had been signed by individual team members to show that they had read and understood them. And that they agreed to follow them. The team knew what it could and should not do if the pharmacist was not in the pharmacy. The dispensing assistant (DA) serving customers on the counter was observed to follow the company's SOP when offering the flu vaccination service to people. The pharmacy currently offered the private service and was due to launch the NHS service in three days' time. She asked people appropriate questions and knew which people qualified for each service and which people didn't. She also followed the pharmacy's SOP for selling pharmacy medicines and general items. And when handing out people's prescriptions. She consulted one of the two pharmacists on duty and her other colleagues when she needed their advice and expertise. And she asked people appropriate questions about their symptoms and any other medicines they were taking. She did this to ensure that the medicines she sold to people were right for them. And when appropriate, to help the pharmacist decide on the best course of action for them. Team members accessed, used and updated the pharmacy's electronic records competently. And they were seen to work through their allocated tasks methodically. The RP had placed his RP notice on display showing his name and registration number as required by law.

People gave feedback directly to team members with their views on the quality of the pharmacy's services. The pharmacy had a complaints procedure to follow. And the team knew how to provide people with details of where they should register a complaint with head office if they needed to. If

necessary, they could also obtain details of the local NHS complaints procedure online. But the team usually dealt with any concerns at the time, or through the company's online system. The RP commented that, the pharmacy occasionally had to provide strips of tablets from different batches to people. But when handing these out the pharmacist discussed this with people to explain that the different strips were of the same quality. And the team marked the packs with the different batch numbers inside. Team members were observed handling people's queries well. And they stepped in to support one another when needed. The pharmacy had professional indemnity and public liability arrangements so it could provide appropriate insurance protection for the pharmacy's services and its customers.

The pharmacy kept its records in the way it was meant to. This included its records for emergency supplies, its private prescription records, and its RP record. The pharmacy kept its controlled drugs (CD) register properly. And it kept a record of its CD running balances. And a random sample of CD stock checked by the inspector matched the running balance total in the CD register. The pharmacy also had a controlled drug (CD) destruction register. So that it could account for the receipt and destruction of patient-returned CD medicines. This was complete and up to date. The RP clearly understood the importance of ensuring that all the pharmacy's essential records were up to date and complete. And kept in the way the law requires.

The pharmacy's team members understood the need to protect people's confidentiality. And they had completed appropriate training. They discarded confidential paper waste into separate waste bins. And this was removed regularly by the company for safe destruction. An information governance policy (IG) was in place and the healthcare team was required to complete an e-learning programme on confidentiality. The pharmacy kept people's personal information, including their prescription details, out of public view. And it had a safeguarding policy. Team members had completed safeguarding training on the company training website. Which all staff members had to complete. And they understood their safeguarding responsibilities. They reported any concerns to the SI's office. And they also contacted social services or a person's GP as appropriate. The team could access details for the relevant safeguarding authorities online if it needed them. But it had not had any concerns to report.

Principle 2 - Staffing ✔ Standards met

Summary findings

The pharmacy has put suitable measures in place to ensure it manages its workload safely and effectively. And its team members support one another. Team members are comfortable about providing feedback to one another so they can maintain the quality of the pharmacy's services. And they have the right skills and training for their roles.

Inspector's evidence

The pharmacy manager RP had worked at the pharmacy for approximately one year. Other team members present included four DAs. Team members had either completed an accredited course for their role or were in the process of completing one. And they wore smart uniforms with name badges displaying their role. The team appeared to be well led and well supported. And they worked hard to ensure that its tasks were completed properly. The pharmacy was on top of its workload. And team members worked well together to keep on top of their dispensing tasks. At the same time, it dealt with people waiting for prescriptions or advice.

The staff reported they were required to complete online training modules when they became available. This included regular refresher training on recognising the potential signs of safeguarding issues in children and vulnerable adults. And any new services, as well as health and safety. And any other company wide training. Team members passed on information informally throughout the day. And a messaging service was used to share important information with the whole team. The pharmacist joined a weekly conference call with other pharmacies in the area and the area manager. He described how he and his colleagues used the meetings to discuss any issues. And he had the opportunity to provide feedback. Targets were also discussed during the meetings. But the pharmacist explained that the targets were realistic and achievable. And he did not feel under pressure to achieve them. The pharmacy team felt comfortable to exercise their professional judgement to raise concerns if they needed to. Staff were aware of the whistleblowing policy and felt comfortable to use this if necessary.

Principle 3 - Premises ✔ Standards met

Summary findings

The pharmacy's premises provide a suitable environment for people to receive its services. And they provide an adequate amount of space for those services. The pharmacy is sufficiently clean and secure. The team keeps its workspace and storage areas appropriately tidy and organised.

Inspector's evidence

The pharmacy was in a small shopping mall in a retail unit attached to the supermarket. And so, it was separate from the general store. It had a small retail area with a minimal range of items relating to health and wellbeing. And it had a consultation room which was well soundproofed. The room was kept locked when not in use. The pharmacy also had a small waiting area. It had a spacious dispensary behind its medicines counter. And it was clean, tidy and organised throughout. And it had a professional appearance. There was a sink available in the dispensary with hot and cold running water with sanitiser to allow for hand washing and the preparation of medicines. The pharmacy stored its medicines in a generic and alphabetical manner on shelves and in drawers. And team members cleaned the pharmacy's storage areas when they were date checking medicines and appliances. The ambient temperature in the pharmacy was suitable for the storage of medicines and this was regulated by an air conditioning system. The lighting throughout the pharmacy was appropriate for the delivery of services.

Principle 4 - Services ✔ Standards met

Summary findings

The pharmacy makes its services accessible for people. And its procedures ensure that its services are supplied safely and effectively. The pharmacy team gets its medicines and medical devices from appropriate sources. And team members make the necessary checks to ensure that the pharmacy's medicines and devices are safe to use to protect people's health and wellbeing. The pharmacy team ensures that the medicines it supplies have the information that people need so they can take their medicines properly.

Inspector's evidence

The pharmacy was well signposted for people entering the mall. It had an open front which was closed off with a shutter at night. This wide, open entrance provided step-free access for people. In addition, the pharmacy's customer area was free of unnecessary clutter. And these factors made it suitable for wheelchair and pushchair access. The pharmacy had a range of healthcare related leaflets and posters on its wall promoting its services. And details of its opening hours. The pharmacy had separate work areas designated for different tasks such as dispensing and checking. And the organised workflow helped team members prioritise tasks and manage the workload effectively. The dispensary was free from clutter and baskets were used to keep prescriptions and their medicines together to reduce the risk of error. And team members initialled dispensing labels when they dispensed and checked each item to show who had completed these tasks. The pharmacy team explained that their prescription items had increased significantly in recent months due to other local pharmacy closures. But while this had increased the team's workload it had managed to keep on top of its tasks. The pharmacy team offered the NHS Pharmacy First Service. Which offered treatments for a range of seven common conditions. This included treatment for sinusitis, sore throat, impetigo, and urinary tract infections. People could access this service by requesting treatment from the pharmacy team or by being referred by NHS 111 and GP practices. The regular pharmacist had completed the appropriate training to provide the service and had access to the necessary equipment. The pharmacy team carried out several such consultations per week. Pharmacists gave people advice on a range of matters. The RP explained how he gave advice to anyone taking higher-risk medicines. The pharmacy dispensed prescriptions to a small number of people taking sodium valproate medicines. This did not include people in the at-risk group. But the RP described the counselling he would give when supplying the medicine to ensure that at-risk people taking it were on a pregnancy prevention programme. And to ensure that they were aware of the risks associated with the medicine. The pharmacy also supplied the appropriate patient cards and information leaflets each time. And the RP was aware of the rules around the packaging of each supply.

The pharmacy also offered a flu vaccination service. Team members had been trained on how to manage vaccination appointments. And they knew the questions to ask to ensure that people could receive the NHS or private service as appropriate. The pharmacy had up to date PGDs and service specifications for both the private and NHS flu service. In general, the RP briefed the person receiving the vaccination appropriately, and asked for their consent. The RP followed appropriate hygiene procedures. And he discarded used vaccines safely into a sharps bin. The RP kept records of the consultation for each vaccination. These included details of the product administered. The pharmacy also had procedures and equipment for managing an anaphylactic response to vaccinations.

The pharmacy obtained its medicines and medical devices from suppliers holding the appropriate licences. And the team stored its medicines, appropriately. And stock on the shelves was tidy and organised. The team stored its medicines in the manufacturer's original packaging where possible. And it date-checked its stocks regularly. It kept records to help the team manage the process effectively. And team members also conducted an expiry date check as part of their dispensing process. The team identified and highlighted any short-dated items. And it removed them from stock. It only dispensed them with the patient's agreement where they could use them before the expiry date. The team put its out-of-date and patient-returned medicines into dedicated waste containers. And a random sample of stock checked by the inspector was in date. The team stored its CD and fridge items appropriately. And it monitored its fridge temperatures to ensure that the medication inside it was kept within the correct temperature range. The pharmacy responded promptly to drug recalls and safety alerts. The team had not had any stock affected by recent recalls.

Principle 5 - Equipment and facilities ✔ Standards met

Summary findings

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

Inspector's evidence

The pharmacy had the appropriate equipment for counting tablets and capsules and for measuring liquids. And its equipment was clean. It also had the appropriate equipment for its Pharmacy First Service, Vaccination service and its blood pressure service. Team members had access to a range of up-to-date reference sources, including access to the internet to provide it with up-to-date clinical information. The pharmacy had several computer terminals which had been placed in the consultation room and the dispensary. Computers were password protected to prevent unauthorised access. And team members understood that they should use their own smart cards to maintain an accurate audit trail when accessing people's records. And to ensure that they had the appropriate level of access to records for their job roles. The pharmacy had cordless telephones to enable the team to hold private conversations with people.

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.