

Registered pharmacy inspection report

Pharmacy Name: Boots, 508-520 Oxford Street, LONDON, W1C 1NB

Pharmacy reference: 1120309

Type of pharmacy: Community

Date of inspection: 05/09/2022

Pharmacy context

This is one of several Boots pharmacies located on Oxford Street in central London. The store is near Marble Arch and it is open extended hours over seven days. People who visit the pharmacy are mainly local workers or tourists rather than residents. Retail sales are the main focus of the business, and the pharmacy supplies both private and NHS prescriptions. It also offers a range of other pharmacy services such as treatments for hair loss, and travel and flu vaccinations.

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 systems and processes in place to help make sure that its team members work safely. And it identifies and manages the risks associated with its services. The pharmacy team keeps the records it needs to by law. Pharmacy team members keep people's private information safe, and they understand their role in protecting and supporting vulnerable people.

Inspector's evidence

Paper copies of the company's standard operating procedures (SOPs) were available in the dispensary. The superintendent's team at head office reviewed and updated the SOPs periodically. Each SOP had an associated log with signatures to show which members of the pharmacy team had read them. The store manager explained that SOPs were also held electronically, and he demonstrated how the team members accessed the online portal using individual log-ins. Team members completed a knowledge check to confirm their understanding of each procedure and the manager monitored completion of online SOP training to check each team member had completed it.

The SOPs defined team members individual roles and responsibilities. Team members could explain what they were responsible for and worked within their capabilities. An RP notice was visible from the retail area identifying the pharmacist on duty. Team members wore uniforms so they could easily be identified.

The pharmacy had systems for identifying and managing the risks when supplying prescription medicines. The team members used cartons to keep each person's prescription separate during the dispensing process. They scanned the bar code of each medication they selected to check they had chosen the right product when dispensing. There was an audit trail on prescriptions and dispensing labels identifying team members involved in the assembly and handout processes. The team recorded and reviewed errors and near misses. Team members discussed mistakes to understand why they happened, and they completed monthly patient safety reviews to help identify common themes and learning points. The company circulated regular communications to promote learning from significant incidents. A complaints procedure was in place. The store manager described how he handled pharmacy related complaints together with the store pharmacist. People could also provide instant feedback online about the service they had received. This was reviewed by the store manager and shared with the team to promote learning if needed or celebrate success if positive feedback was submitted.

The pharmacy had appropriate insurance arrangements in place. Documentation and records were well organised. The team maintained appropriate records including controlled drug (CD) registers, RP records, private prescription records and specials records. These were generally in order with only a few minor irregularities noted, such as occasional missing details relating to RP cease times or supplies of unlicensed medicines. Private prescriptions were filed. The pharmacy team audited the CD register's running balance regularly.

The pharmacy had information governance policies and a privacy notice was displayed. The trainee

pharmacy advisor understood the principles of data protection and confidentiality. The team stored confidential material securely and segregated confidential waste prior to collection and disposal by a licensed contractor. The pharmacist was level 2 safeguarding accredited and team members had completed company safeguarding training. The pharmacist described an occasion when she had raised a concern about a patient with the local safeguarding team. The pharmacy had a chaperone policy which was promoted on the consultation room door.

Principle 2 - Staffing ✓ Standards met

Summary findings

Overall, the pharmacy has enough staff to deliver its services safely, although some of its team members are new and inexperienced, so they require support and closer supervision. Team members have access to appropriate training, so they can develop the skills and knowledge needed for their roles. And the pharmacy supports a culture of openness and learning.

Inspector's evidence

The regular store pharmacist was working as the RP during the inspection with a single team member providing support on the counter. This was the usual staff profile for most of the working day. The team member was a trainee pharmacy advisor and new to her role having previously worked elsewhere in the store in a non-pharmacy position. In addition, the pharmacy employed two or three other part-time team members; one was qualified as a pharmacy advisor and the other two were both in training.

The team served people promptly and the workload appeared manageable, but the team members sometimes had to multitask when working. The store manager, who was healthcare trained, occasionally provided support on the counter when there was a queue. The pharmacist felt it was sometimes challenging to juggle the workload as the pharmacy's support staff were mostly trainees and so inexperienced, which meant they required more support and supervision. A locum dispenser was due to provide additional cover for a couple of weeks when the seasonal flu vaccination service started.

The trainee pharmacy advisor was working on the counter until she was ready to progress in her role. She knew what questions to ask when selling medicines and referred appropriate queries to the pharmacist. For example, when selling high risk medicines such as codeine containing painkillers.

Relief or locum pharmacists provided cover for the pharmacist's days off. The pharmacy team reported to the store manager. The pharmacist was working a 10-hour shift with no scheduled rest break. She took a break when she could during quiet periods throughout the day.

The team members felt supported in their roles and could seek advice and guidance from the management when needed, and they could contact head office. There was a company whistleblowing policy. Team members had individual performance reviews to monitor their development. The team members didn't feel company targets affected their professional judgement. For example, the pharmacist said she would only offer additional services such as vaccinations if she had enough support staff.

Principle 3 - Premises ✓ Standards met

Summary findings

The pharmacy provides a suitable environment for people to receive healthcare services. It has consultation facilities so the pharmacy team members can provide services, such as vaccinations, or speak to people in private. But the pharmacy's maintenance issues and poor hygiene standards in some areas detracts from the professional image.

Inspector's evidence

The store was arranged over two floors and the pharmacy was situated in a designated area of the basement. The pharmacy consisted of a dispensary with a prescription reception desk and adjacent healthcare counter, and a small consultation room.

The dispensary had sufficient bench space for the volume and nature of the work. Work areas were reasonably tidy, but some areas of the dispensary were cluttered and less well organised. The consultation room was basic and equipped with a desk, two chairs and handwashing facilities. It was kept locked when not in use.

The pharmacy's fittings were older, and some were worn. The floor was littered and dirty in places. There were a few maintenance issues affecting the pharmacy as the customer lift and air-conditioning in the basement were not working. The pharmacist explained that these issues had been ongoing for a while. Portable air conditioning units were being used to control the room temperature, but these were loud and cumbersome. The store manager explained the air-conditioning was being fixed that day and some of the lighting was being replaced in the retail area. The pharmacy staff had access to staff toilet and rest facilities. The staff areas were not as well maintained as they could be and some of the handwash basins were broken and not in use.

The main store was suitably secured overnight. Simple barriers were used to secure the pharmacy when it closed, and an alarm was triggered if the barriers were opened. The pharmacy was not alarmed separately but the area was monitored by CCTV. And the store manager provided assurances that store team members were working in the basement retail area when the pharmacy was closed as an extra security measure.

Principle 4 - Services ✓ Standards met

Summary findings

The pharmacy's services are reasonably accessible and its working practices are safe, so people receive appropriate care. The pharmacy gets its medicines from reputable suppliers, and the team members make checks and manage medicines appropriately to make sure they are fit for purpose and suitable to supply.

Inspector's evidence

The store had an open frontage directly onto the street, so access was unrestricted. Stairs, and an escalator enabled access to the basement. As the lift was broken, staff working on the ground floor were asked to alert the pharmacy team if people with disabilities or difficulties weren't able to access the pharmacy directly and needed assistance, so a member of the team could come and speak to them. Otherwise, they could be signposted to one of the other Boots pharmacies nearby.

The pharmacy was open seven days a week and it traded from 10am to 7pm Monday to Saturday, and midday to 4pm on Sunday. It had reduced its daily opening hours earlier in the year, so it was no longer traded as many hours as the main store. The pharmacy used signs and leaflets to promote and provide information about its services, and the company website contained information about the pharmacy.

The volume of dispensing was low, and the prescription service was well managed. The pharmacy team used colour coded cards and notes to highlight high-risk medicines and if people needed extra counselling when they collected their prescription medicines. The pharmacist was aware of the pregnancy prevention programme (PPP) for people who were taking sodium valproate. The pharmacist was only aware of one person in the at-risk group who had been counselled to confirm a PPP was in place. A small number of people received their medicines in multi-compartment compliance packs. Each person had a detailed record indicating how to assemble packs and specifying individual requirements.

Pharmacy medicines were store behind the counter so sales could be supervised. When the pharmacy closed, blinds were used to cover the medicines to indicate they were not available for sale.

The pharmacy offered some other NHS services and range of private services such as vaccinations including yellow fever. Protocols were in place to determine if a person was suitable to receive the treatment or vaccine and the pharmacist kept records when they supplied or administered these medicines. Some were provided under Patient Group Directions and others were supplied against prescriptions issued by one of the company's pharmacist independent prescribers based at head office. Travel vaccinations were the most commonly requested private service. People could request a vaccination appointment using an online booking system. The pharmacist could determine the number of bookings made available so they could manage the workload. The pharmacy was preparing for the launch of the flu vaccination service and the team had completed the necessary checks and training.

The pharmacy obtained stock medicines from recognised licensed wholesalers. Medicines were stored in their original containers. Dispensary shelves were reasonably tidy and well organised. The team monitored the temperature of the fridges in the dispensary used to store medicines to make sure they were within a suitable range. The pharmacy had a date checking system. A random check of the stock

found no expired items. The team segregated unwanted medicines in designated bins prior to collection by an appropriate waste contractor. The pharmacy had a suitably secured cabinet for storing CDs. Only pharmacists could access the cabinet and there was a CD key audit trail. The pharmacy received email notifications from head office with medicine or medical device alerts and recalls. Recent recalls had been received, and the pharmacy team kept audit trails to show what action it had taken in response.

Principle 5 - Equipment and facilities ✓ Standards met

Summary findings

The pharmacy has the right equipment and facilities to provide its services safely. Equipment is appropriately maintained and used in a way which protects people's privacy.

Inspector's evidence

The pharmacy team had access to the internet and appropriate reference sources including the latest versions of the British National Formularies (BNF). The dispensary sink was clean and had hot and cold running water. The pharmacy had glass liquid measures for preparing medicines, and equipment for counting loose tablets and capsules as well as disposable containers for dispensing medicines. The pharmacy team had access to personal protective equipment and sundries necessary for the provision of vaccination services such as anaphylaxis equipment and sharps bins.

There was a medical fridge for storing medicines. The pharmacy had computer terminals in the dispensary and the consultation room, so sufficient for the volume and nature of the services. Computer screens were not visible to members of the public. Access to computer systems was password protected and team members used individual smartcards to access NHS data. Team members could take telephone calls away from the counter so they could not be overheard. All electrical equipment appeared to be in 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.