

Registered pharmacy inspection report

Pharmacy Name: Superdrug Pharmacy, 17 High Street, ANDOVER,
Hampshire, SP10 1NF

Pharmacy reference: 1031636

Type of pharmacy: Community

Date of inspection: 07/10/2020

Pharmacy context

A Superdrug pharmacy in Andover town centre. In addition to dispensing prescriptions and selling over-the-counter medicines, the pharmacy supplies medicines in multi-compartment compliance aids. And it provides a delivery service for the vulnerable and housebound. The pharmacy also provides drug treatment services to people who have developed a dependency from substance misuse. And it offers a flu vaccination service. The inspection was conducted 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	1.4	Good practice	The pharmacy team are good at responding to people's feedback. They take time to provide reassurance and take steps to address their concerns.
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 identifies its risks adequately. And its team members have adapted their working practices suitably to minimise risks to people's safety during the COVID-19 pandemic. The pharmacy has written procedures in place to help ensure that its team members work safely. And it has insurance to cover its services. Team members know how to protect people's private information and know how to protect the safety of vulnerable people. And it responds well to people's feedback. In general, the pharmacy team records its errors and reviews them to identify the cause so that it can stop mistakes from happening again. And it generally keeps all the records it needs to keep.

Inspector's evidence

The most recent figures showed that the number of cases of COVID-19 in the area was lower than the national average for England for the previous week. To help reduce the risk of spreading coronavirus, the pharmacy had reviewed its working practices to reduce risk for its team members and the public. Team members wore masks and generally tried to keep more than one metre apart from people at the counter. They generally worked at their own workstations in different areas of the dispensary. And, for the most part, were able to keep more than one metre apart from one another. In general, only one assistant worked at the medicines counter at any time. The pharmacy was at the back of the Superdrug store. And team members had applied stickers to the floor, placing them two metres apart, to show people where to stand when they were waiting to approach the counter, or waiting for a prescription. When the pharmacy got busy, people were seen to stand at the end of separate aisles or in the same aisle at a sensible distance behind one another. The inspector and responsible pharmacist (RP) discussed the importance of having contingency plans in place to ensure that the pharmacy would be able to maintain its services in the event of closure due to the COVID-19 pandemic. The RP was reminded of the requirement to report any COVID-19 infections, believed to have been contracted at work, to the relevant authorities. The RP was aware of the company's procedures where she would notify the superintendent's office first.

The pharmacy had procedures for managing risks in the dispensing process. Team members discussed every incident, including their near miss mistakes, as soon as they were discovered. They discussed them to help prevent the same or similar, mistakes from happening again. The RP described how team members made each other aware of similarly packaged items and look-alike-sound-alike drugs (LASAs) like amlodipine and amitriptyline tablets. They did this to help ensure that they did not mistake one for the other. But over recent months they had not recorded all of their near miss mistakes. The inspector and RP discussed the importance of keeping records to show what the mistakes were. And what the team had learned from them as well as actions arising from them. The pharmacy also had a process for reflecting on and reviewing its mistakes, but after a pause during the height of the pandemic it had not yet returned to holding regular review meetings. The inspector and RP agreed that the team should review the risks identified with its services on a regular basis. This would provide an opportunity to keep the team up to date with current risks so that it could minimise them.

The team worked under the supervision of the RP. The RP's notice had been placed on display for people to see. The pharmacy had a set of up-to-date standard operating procedures (SOPs) for team members to follow. Several procedures included measures to help manage the additional risks posed by the coronavirus. The pharmacy team sought customer feedback through satisfaction surveys and

general conversations with people. The customer satisfaction survey from 2019 demonstrated a high level of customer satisfaction overall. But the team had also received concerns from people during the early stages of the pandemic when the team were at their busiest. It had listened to the concerns of a small number of people whose prescriptions were not ready when they expected them to be. And when they were not able to receive all of their medication at the same time, because of stock availability issues. But although both of these issues were largely out with the direct control of team members, some people had been aggressive towards them. Team members understood why these issues were a problem for some people but took time to explain the situation to them. And offered the pharmacy's delivery service.

The pharmacy had a complaints procedure which corresponded with NHS guidelines. It had leaflets on display explaining the procedure. And it had a SOP for the team to refer to. But customer concerns were generally dealt with at the time by the regular RP. Staff could provide details of the local NHS complaints advocacy service and the Patient Advice and Liaison service (PALS) if necessary. The pharmacy had professional indemnity and public liability arrangements so it could provide insurance protection for the pharmacy's services and its customers. Insurance arrangements were in place until 31 January 2021 when they would be renewed for the following year.

In general, the pharmacy was keeping its records in the way it was meant to. This included controlled drug (CD) registers, the RP record, and records of CDs, which had been returned by people, to be destroyed. But some records were incomplete. This included private prescription records, which sometimes did not show the prescriber's address. And records for unlicensed 'specials' which did not always show details of the prescriber and the prescription's labelling information. But when this was discussed with the RP it was clear that she recognised the importance of maintaining the pharmacy's essential records so that they were up to date and complete.

The pharmacy's team members understood the need to protect people's confidentiality. Confidential waste was set aside for collection and subsequent disposal by a licensed waste contractor. The pharmacy stored its completed prescriptions in the dispensary where they were out of people's view. Team members had completed appropriate safeguarding training. The RP could access details for the relevant safeguarding authorities online. Staff had not had any specific safeguarding concerns to report. But felt that they had been of good service to people locally throughout the pandemic by answering their queries, listening to their concerns and signposting when appropriate.

Principle 2 - Staffing ✓ Standards met

Summary findings

The pharmacy team manages the workload safely and effectively. And team members work well together. They are comfortable about providing feedback to one another, so that they can maintain the quality of the pharmacy's services.

Inspector's evidence

The pharmacy had a medicines counter assistant (MCA) and two dispensers on duty with the RP at the time of inspection. Staff had read all the relevant SOPs. And the MCA was observed attending to people in a timely manner. She also consulted the dispensers and the RP when she needed to. The pharmacy had carried out specific risk assessments for individual team members but had not had to make any special adjustments for anyone.

Team members were observed to work effectively together. They were seen assisting each other when required and discussing prescription issues. The daily workload of prescriptions was in hand and customers were attended to promptly. The pharmacy had a small close-knit team and staff could to raise concerns and discuss issues when they arose. The RP was able to make her own professional decisions in the interest of patients. She had targets for flu vaccinations and other services but felt that these were manageable.

Principle 3 - Premises ✓ Standards met

Summary findings

The pharmacy's premises provide a suitable environment for people to receive its services. They are sufficiently clean and secure. The pharmacy has made some sensible adjustments to help keep people safe during the pandemic.

Inspector's evidence

The pharmacy's premises were situated to the rear of its Superdrug store. The premises were clean, tidy and well maintained. The dispensary layout was suitable for the activities undertaken and provided enough space to work safely and effectively. It had an 'L-shaped' layout providing three distinct areas for different dispensing and checking activities. There was a clear workflow in the dispensary, and work surfaces and floors were tidy and free of unnecessary clutter.

The medicines counter was immediately in front of the dispensary. There was a large Perspex screen across the length of the counter to help reduce the spread of the coronavirus between team members and the people they were attending to. There were notices in the window near the entrance. The notices advised people to maintain social distancing and wear a face covering. Non-pharmacy staff managed the numbers of people allowed into the store, including the pharmacy, at any one time. The pharmacy had a consultation room available for confidential conversations, consultations and the provision of services. The RP would check the room for any confidential information before each consultation so that she could remove it. Room temperatures were appropriately maintained to keep staff comfortable and were suitable for the storage of medicines. Staff facilities were in a separate area of the building.

Principle 4 - Services ✓ Standards met

Summary findings

The pharmacy provides its services safely. And makes them easily accessible for people. Staff understand the actions to take if any medicines or devices are not safe to use to protect people's health and wellbeing. The pharmacy team gets its medicines and medical devices from appropriate sources. And it stores them properly. Team members make the necessary checks to ensure that the pharmacy's medicines and devices are safe to use. They do this to protect people's health and wellbeing.

Inspector's evidence

The main entrance into the store was a single automatic door which provided step-free access from the wide pavement outside. This made access easier for wheelchair users and those with mobility difficulties. Team members had placed a sign in the front window advertising the times of opening and services provided. And had placed a range of healthcare leaflets on display. The retail area was free of obstructions. So, it was suitable for wheelchair users. The consultation room was also suitable for wheelchair access. The pharmacy also delivered medicines to people who found it difficult to visit the pharmacy. The RP described how demand for deliveries had increased during the pandemic.

The pharmacy team used baskets to hold individual prescriptions and medicines during dispensing. It did this to keep prescriptions and their corresponding medicines together. The pharmacy had a coded retrieval system for storing its completed prescriptions. And it generally removed any items uncollected items after one month. Team members used stickers to identify any completed prescriptions containing CDs so they could remove them from storage after their prescription's 28-day expiry date. The inspector and RP discussed the importance of ensuring that the system was also used for prescriptions containing schedule 4 CDs. They also used stickers to identify prescriptions which had additional items stored elsewhere such as the fridge, so that they did not leave any items behind when transferring people's prescriptions to them.

The pharmacy provided multi-compartment compliance packs for people who needed them. Team members labelled compliance packs with a description of each medicine, including colour and shape, to help people to identify them. And they included patient information leaflets (PILs) with new medicines and with regular repeat medicines. The labelling directions on compliance packs gave the required advisory information to help people take their medicines properly. The RP gave people advice on a range of matters. She was aware of the guidance about pregnancy prevention to be given to people in the at-risk group who took sodium valproate. And would give appropriate advice to anyone taking other high-risk medicines.

The pharmacy offered a flu vaccination service and had an adequate supply of vaccines. The RP carried out a vaccination during the inspection. The person receiving the vaccination was appropriately briefed and asked to sign a consent form using her own pen. The RP was observed to follow an appropriate routine when donning and doffing PPE. She was observed washing or sanitising her hands before and after each consultation and before and after donning and doffing PPE. She was also observed to discard the used vaccine safely into a sharps bin and had procedures and equipment in place for managing an anaphylactic reaction. The person receiving the vaccination was required to wear a face mask and sanitise their hands before entering the consultation room and after leaving it. After each vaccination the RP cleaned down all surfaces, equipment and door handles in the consultation room, leaving it

ready for the next person.

The pharmacy obtained its medicines and medical devices from suppliers holding the appropriate licences. The team stored its medicines, appropriately and in their original containers. And stock on the shelves was tidy and organised to assist selection of the correct item. The pharmacy team date-checked the pharmacy's stocks regularly, checking a different section each week. And they kept records to help them manage the process and to show what had been checked, when and by whom. A random sample of stock checked by the inspector was in date. Short-dated stock was identified and highlighted. And the team put its out-of-date and patient-returned medicines into dedicated waste containers. The team stored items in a CD cabinet and fridge as appropriate. And it monitored its fridge temperatures daily to ensure that the medication inside was kept within the correct temperature range. The pharmacy responded promptly to drug recalls and safety alerts and kept appropriate records. The team had not found 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 used crown marked measures for measuring liquids. It had equipment for counting tablets and capsules, including a separate tablet triangle for methotrexate. Team members had access to a range of up-to-date reference sources. And they had access to PPE, in the form of face masks and gloves, which were appropriate for use in pharmacies. Team members washed or sanitised their hands at regular intervals throughout the day and after handling money.

The pharmacy had three computer terminals. Two were in the dispensary and had a facility for keeping patient medication records (PMRs). The third was in the consultation room. The dispensary computers were located at different work areas of the dispensary, in a way that meant that staff members using them were not close to one another. Computers were password protected and their screens could not be viewed by people. Team members generally used their own smart cards when working on PMRs, so that they could maintain an accurate audit trail and ensure that access to patient records was appropriate and secure.

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.