

Registered pharmacy inspection report

Pharmacy Name: HMP Isis, Western Way, London, SE28 0NZ

Pharmacy reference: 9010833

Type of pharmacy: Prison / IRC

Date of inspection: 07/09/2022

Pharmacy context

The pharmacy is inside HMP ISIS and dispenses medicines for the prison.

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

Overall, the pharmacy identifies and manages the risks associated with the provision of its services. The pharmacy maintains the records it should. Its team members have identified roles and accountabilities. The pharmacy has procedures to learn from its mistakes.

Inspector's evidence

The pharmacy had processes in place to identify and manage the risks associated with its services. The pharmacy had a set of standard operating procedures (SOPs) which had been signed by the pharmacy team members to show they had read them. Staff were able to explain their roles and responsibilities.

The pharmacy had a process for recording dispensing mistakes that were identified before reaching a person (near misses) and dispensing mistakes where they had reached the person (errors). Near misses were discussed with the member of staff at the time and written on the near miss log. When the near miss log was checked there had been no near misses recorded since May 2022. Staff explained that because of the low level of dispensing at the pharmacy and the experience of the team very few near misses were made.

The pharmacy had audit trails to support the safe delivery of its dispensing services. Prescriptions were printed off from SystmOne (a computer system to record patient information) and signed by a prescriber before they were dispensed. In addition to the pharmacist signing the prescription the clinical check was also recorded on the patient's electronic record on SystmOne. The final check for accuracy was by the responsible pharmacist (RP). The pharmacy maintained appropriate records to support the safe delivery of pharmacy services. These included the RP record, controlled drugs (CD) registers, and fridge temperature records.

The pharmacy checked the running balances for CDs as they were dispensed. The pharmacy had appropriate professional indemnity insurance. Staff had been trained in information governance but were not aware if they had an information governance policy. They said that they would find out. Confidential waste was disposed of appropriately. The pharmacy's dispensing system and SystmOne were password protected. The team used their own smartcards to access medication records, which could only be accessed by authorised personnel. The pharmacy team had completed appropriate safeguarding training. But the team had little direct contact with patients so it was difficult for them to see any safeguarding concerns.

Principle 2 - Staffing ✓ Standards met

Summary findings

The pharmacy has adequate numbers of staff to manage its workload. Staff can raise concerns if necessary. The pharmacy's team members have access to ongoing training modules. This helps keep their knowledge and skills up to date.

Inspector's evidence

At the time of the inspection, there was one pharmacist and one pharmacy technician. During the inspection the pharmacy team effectively managed the day-to-day workload. The pharmacy team worked across the Greenwich cluster which consisted of three prisons. Isis was the smallest prison with the least dispensing of prescriptions. The team had access to e-learning for ongoing training. Some of the training was mandatory and its completion was monitored. This included topics such as data protection, safeguarding and basic life support. Some personal safety training had been cancelled because of staff shortages. Staff had a yearly appraisal and also had regular monthly one-to-one meetings called supervision, where they were able to raise any concerns or issues. Staff explained how they felt supported and were able to give suggestions and feedback.

Principle 3 - Premises ✓ Standards met

Summary findings

The pharmacy keeps its premises safe, secure, and appropriately maintained. The premises have enough space to deliver the services it provides. And the pharmacy's team members keep the premises clean.

Inspector's evidence

The pharmacy was in the healthcare block of the prison. It was a good size for the services provided. The pharmacy had air conditioning to maintain a suitable temperature for storing medicines. The premises were clean and lit appropriately, and hot and cold running water was available. The premises were secure against unauthorised access.

Principle 4 - Services ✓ Standards met

Summary findings

The pharmacy provides its services safely. The pharmacy gets its medicines and medical devices from reputable sources and stores them safely. It takes the right actions if any medicines or devices are not safe to use to protect people's health and wellbeing.

Inspector's evidence

The pharmacist clinically reviewed all prescribed medicines to make sure they were safe and appropriate. The pharmacy used a dispensing audit trail which included use of 'dispensed by' and 'checked by' boxes on the medicine label. In addition, the pharmacist who completed the clinical check was recorded on SystmOne. This helped identify who had completed each task. The team used trays to keep prescriptions and medicines for different people separate during the dispensing process. This helped reduce the risk of error.

The pharmacy team members didn't routinely see patients, but they could give information through the nursing team when required. If a patient had a query about a medicine a member of the pharmacy team visited them in their cell to discuss it. Some medicines were supplied to people who were allowed to manage their own medicines in the same way they would in the community (this was called In-possession). In-possession medicines were medicines that the prison has decided are safe for some patients to hold and take themselves. Other people attended the treatment room to receive their medicines at an appropriate time. The pharmacy also supplied stock to the prison's healthcare service through their wholesale dealers licence

The pharmacy's stock was stored appropriately in the dispensary. The pharmacy used licensed wholesalers to obtain medicines and medical devices. The team date-checked medicines for expiry regularly but did not keep clear records of when this had happened. A check of a small number of medicines didn't find any that were out of date. The pharmacy received drug alerts by email and took appropriate action to keep people safe. The pharmacy kept suitable records to show this.

Principle 5 - Equipment and facilities ✓ Standards met

Summary findings

The pharmacy has access to a suitable range of equipment and facilities for the services it provides.

Inspector's evidence

The pharmacy had a range of equipment. The pharmacy used suitable measures for measuring liquids. The pharmacy had up-to-date reference sources including BNF online and MedicinesComplete. Records showed that the fridge was in working order and stored medicines within the required range of 2 and 8 degrees Celsius. The pharmacy had legally compliant CD cabinets. The pharmacy's portable electronic appliances had been tested to make sure they were safe in July 2019. The pharmacist said that she would ask about a new test.

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.