

Registered pharmacy inspection report

Pharmacy Name: Boots, North Terminal Departures, London Gatwick Airport, Gatwick, West Sussex, RH6 0NP

Pharmacy reference: 9011140

Type of pharmacy: Community

Date of inspection: 28/11/2019

Pharmacy context

This is a busy pharmacy located in a branch of Boots within the departure area of a large airport. Most people who use the pharmacy are airport passengers or work at the airport. The pharmacy opens extended hours all year round. It sells a range of over-the-counter medicines and health and beauty products. And its team provides healthcare advice. The pharmacy doesn't provide NHS services. And it doesn't dispense prescriptions. But, people can collect prescriptions from it which have been made up at the pharmacy in the airport's arrivals area.

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	Good practice	1.1	Good practice	The pharmacy identifies and manages its risks very well.
		1.2	Good practice	The pharmacy continually monitors the safety of its services to protect people and further improve patient safety.
2. Staff	Good practice	2.2	Good practice	The pharmacy provides its team members with the training and support they need. And it actively encourages them to improve their skills.
		2.4	Good practice	Staff work well together as a team and have a work culture of openness, honesty and learning.
3. Premises	Standards met	N/A	N/A	N/A
4. Services, including medicines management	Standards met	4.1	Good practice	The pharmacy makes sure that its services are accessible and meet the needs of the people it serves.
		4.2	Good practice	The pharmacy is good at providing its services safely and effectively. It takes extra care when supplying over-the-counter medicines. So, people have all the information they need to use their medicines safely.
5. Equipment and facilities	Standards met	N/A	N/A	N/A

Principle 1 - Governance ✓ Good practice

Summary findings

The pharmacy identifies and manages its risks very well. And it continually monitors the safety of its services to protect people and further improve patient safety. Its team members log and review the mistakes they make. So, they can learn from these and act to avoid problems being repeated. The pharmacy has appropriate insurance to protect people if things do go wrong. It mostly keeps all the records it needs to by law. And it asks people using its services for their views. People who work in the pharmacy can explain what they do, what they're responsible for and when they might seek help. They understand their role in protecting vulnerable people. And they keep people's private information safe.

Inspector's evidence

The pharmacy had appropriate insurance arrangements, including professional indemnity, for the services it provided. A business continuity plan was in place and members of the pharmacy team knew where to find it and what it was for. It identified the potential risks to the pharmacy, its services and its staff in the event of an emergency. The pharmacy had up-to-date standard operating procedures (SOPs) tailored to the pharmacy's activities and context. For example, the supply of prescription medicines, such as salbutamol inhalers, to people in an emergency. And a collection point for prescriptions made up at the company's pharmacy located in the airport's arrivals area. The pharmacy team arranged for people's prescriptions to be dispensed there and then brought back to the pharmacy. The responsible pharmacist (RP) checked each assembled prescription before handing it out to make sure it was correct, in-date and for the right person.

The pharmacy predominantly sold over-the counter medicines. Its team routinely provided advice to people regarding the condition they were trying to treat. Members of the pharmacy team used mobile phone applications to help ask people questions or provide advice if they didn't speak the same language. The pharmacy had robust systems to record and comprehensively review errors, near misses and other patient safety incidents. Members of the pharmacy team discussed and documented individual learning points when a mistake was identified. They reviewed their mistakes regularly to help spot the cause of them and any trends. So, they could try to stop them happening again and improve the safety of the services they provide. For example, they reviewed the questions they asked people wanting to purchase oral treatments for mouth ulcers. The safety and quality of the pharmacy's services were monitored and reviewed periodically by the pharmacy team and during company compliance audits.

The pharmacy displayed a notice that identified the RP on duty. Its emergency supply records and its RP records were adequately maintained. The pharmacy kept a record of any pharmacists who worked alongside the RP. And it kept a record of the prescriptions that its pharmacist handed out which had been assembled at the other pharmacy. The pharmacy's team members wore name badges which identified their roles within the pharmacy. They explained what they could and couldn't do, what they were responsible for and when they might seek help. They knew that they couldn't sell certain medicines if a pharmacist wasn't present. Their roles and responsibilities were defined within their job descriptions and the pharmacy's SOPs. They could access other corporate procedures and policies online if they needed to. And they were required to read, sign and follow the SOPs relevant to their roles. A complaints procedure was in place. The pharmacy team asked people for their views and encouraged them to complete a customer satisfaction survey. The pharmacy's practice leaflet told

people how they could provide feedback about the pharmacy in person, online or by contacting the company's customer care centre. People's feedback led to changes in the store's layout and the positioning of the pharmacy.

An information governance (IG) policy was in place and staff were required to complete online IG training. The pharmacy had arrangements in place to make sure confidential waste was collected and then sent to a centralised point for secure destruction. The pharmacy team stored assembled prescriptions and the private prescription register in a locked cabinet. And access into the cabinet was restricted to authorised personnel. So, people's names and addresses couldn't be seen by someone who shouldn't see them. A safeguarding policy and a list of key contacts for safeguarding concerns were available. Members of the pharmacy team were required to complete safeguarding training relevant to their roles. And they could explain what to do or who they would make aware if they had concerns about the safety of a child or a vulnerable person.

Principle 2 - Staffing ✓ Good practice

Summary findings

The pharmacy has enough team members to provide its services safely and effectively. And it encourages them to give feedback. Staff work well together as a team and have a work culture of openness, honesty and learning. The pharmacy provides its team members with the training and support they need. And it actively encourages them to improve their skills. Staff know how to raise a concern if they have one. And their professional judgement and patient safety are not affected by targets.

Inspector's evidence

The pharmacy opened for 112 hours a week during the winter and 119 hours during the summer. The store had a full-time airport terminal manager (ATM), three full-time pharmacists, a part-time pharmacist, four full-time assistant managers, three part-time assistant managers, four full-time medicines counter assistants (MCAs), two part-time MCAs, two part-time trainee MCAs, 20 full-time store assistants and 20 part-time store assistants. The ATM and four of the assistant managers were trained MCAs. And one of the other assistant managers was a trainee MCA. The store assistants and two of the assistant managers didn't work within the pharmacy area. Two pharmacists and four MCAs were working within the pharmacy area at the time of the inspection. And there were over ten other members of staff working at the store too. The pharmacy relied upon its team, relief staff and staff from nearby stores to cover any absences. And team members working at the pharmacy needed airport security passes to gain access to the premises. The pharmacists and the ATM led by example and worked well with their store and pharmacy colleagues to make sure people were served promptly. The pharmacists supervised and oversaw the supply of medicines and advice given by staff.

The pharmacy had an induction training programme for its staff. Its team members needed to complete mandatory training during their employment. And they were required to undertake accredited training relevant to their roles after completing a probationary period. The pharmacy's team members regularly discussed their performance and development needs with their line manager. And they helped each other to learn. They were encouraged to ask questions and familiarise themselves with new products. They were also encouraged to read any company newsletters and complete online training and assessments to make sure their knowledge was up to date. The pharmacy kept records that showed its team completed regular ongoing training. Staff could train while they were at work. But, they could also choose to train during their own time. They were comfortable talking about their own mistakes and weaknesses with their colleagues. And a 'Yammer' group, team meetings and one-to-one discussions were used to update them and share learning.

The team members didn't feel under pressure to complete the tasks they were expected to do. And they didn't feel their professional judgement or patient safety were affected by targets. They felt comfortable about making suggestions on how to improve the pharmacy and its services. The pharmacy had a whistleblowing policy in place. And staff knew who they should raise a concern with if they had one or how to raise it anonymously. The team's feedback led to the introduction of a queue management system at the pharmacy's counter.

Principle 3 - Premises ✓ Standards met

Summary findings

The pharmacy provides an adequate and secure environment for people to receive healthcare. It has a room where people can have private conversations with members of the pharmacy team.

Inspector's evidence

The registered pharmacy area consisted of a counter, five bays of back wall shelving and an office. The premises were bright, clean, modern and air-conditioned. The pharmacy had the space it needed for the services it provided. Its staff used the office, located next to the counter, as a consulting room if people needed to speak to a team member in private. But, the office wasn't fully enclosed. So, staff tried not to talk too loudly when in it to reduce the chances of their conversations being overheard. The store was regularly cleaned by a cleaning contractor. And the pharmacy team also kept the pharmacy clean and tidy. The pharmacy didn't have a sink. So, its team members used the airport's handwashing facilities when they needed to. And they had access to hand sanitising gel too.

Principle 4 - Services ✓ Standards met

Summary findings

The pharmacy makes sure that its services are accessible and meet the needs of the people it serves. It is good at providing its services safely and effectively. It takes extra care when supplying over-the-counter medicines. Its team members are helpful. And they make sure that people have all the information they need. So, they can use their medicines safely. The pharmacy gets its medicines from a reputable source and stores them appropriately and securely. And its team members mostly carry out the checks they need to. So, they can make sure the pharmacy's medicines are fit for purpose.

Inspector's evidence

The store and the pharmacy were located on the ground floor of the airport's departure area. The store's entrance was level with the departure area's flooring. The aisle leading to the pharmacy was kept clear. And a section of the pharmacy's counter was at a lower level to the rest. So, people with mobility difficulties, such as wheelchair users, could access the pharmacy and its services. The pharmacy opened extended hours every day of the year. The pharmacy's team members spoke a range of languages. And they had access to a translation service if needed. They were helpful. And they knew what services the pharmacy offered and where to signpost people to if a service couldn't be provided; for example, disposal of someone's unwanted medication.

The pharmacy had a sales of medicines protocol in place which its team needed to follow. Staff were alert to the risks of people attempting to purchase products which could be abused or misused. A member of staff described the questions she would ask when making over-the-counter recommendations and when she would refer people to a pharmacist; for example, requests for treatments for infants, people who were pregnant or breastfeeding, elderly people or people with long-term health conditions. Prompt cards were located within the pharmacy area to remind the team of the questions it should ask people and to support staff with requests for specific products, such as the morning after pill, which required additional counselling. The pharmacy team often provided people with tailored advice on the most appropriate medication they should take; for example, a medicine to prevent travel sickness depending on the person's departure time and how long they were travelling for. And, when specifically asked, the team could provide advice if a medication, such as a pain relief medicine, was permitted in the country the person was travelling to. Members of the pharmacy team worked well with the team based at the company's pharmacy in the airport's arrivals area to make sure people could access prescription medicines in an emergency.

The pharmacy didn't have any valproate stock. And it didn't supply it. But its team members were aware of the valproate pregnancy prevention programme. They knew that people in the at-risk group who were prescribed valproate needed to be counselled on its contraindications. The pharmacy team could access valproate educational materials if it needed to. The pharmacy used a recognised wholesaler to obtain its medicines and medical devices. Its team was aware of the Falsified Medicines Directive. And the pharmacy mostly stocked non-prescription medicines which it didn't need to decommission. But, it didn't currently have the processes in place nor the equipment it needed to decommission the small number of salbutamol inhalers it supplied. The pharmacy stored its medicines appropriately and tidily on its shelving. Its stock was subject to regular date checks which were documented. The pharmacy didn't have any stock that required refrigeration or controlled drugs that needed to be stored securely.

The pharmacy had procedures in place for dealing with obsolete medicines and medical devices. It didn't generally handle people's pharmaceutical waste. But, its team made sure any pharmaceutical waste it had was disposed of appropriately. A process was in place for dealing with recalls and concerns about medicines and medical devices. Drug and device alerts were retained, actioned and annotated following their receipt.

Principle 5 - Equipment and facilities ✓ Standards met

Summary findings

The pharmacy has the right equipment to provide its services safely. It makes sure its equipment is stored securely.

Inspector's evidence

The pharmacy team had access to up-to-date reference sources. And its team could contact the Chief Pharmacist's office to ask for information and guidance. The store's computers were password protected and were secured within a locked office. Their screens were positioned so only staff could see them. The pharmacy kept its equipment secure within a locked office when it wasn't being used.

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.