General Pharmaceutical Council

Registered pharmacy inspection report

Pharmacy Name: Pharmasom Limited, 86 Manitoba Road, Leicester, Leicestershire, LE1 2FT

Pharmacy reference: 9011301

Type of pharmacy: Internet / distance selling

Date of inspection: 07/06/2024

Pharmacy context

This is a distance-selling pharmacy that is situated in a residential area of Leicester. Most of its activity is dispensing NHS prescriptions. The pharmacy supplies medicines in multi-compartment compliance packs to people who live in their own homes. It also delivers medicines to people's homes.

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. And the pharmacy keeps the records it needs to by law. The pharmacy manages people's electronic personal information safely. But because the pharmacist does not record its near misses and the outcome of the near miss reviews, the pharmacy might miss opportunities to improve its ways of working.

Inspector's evidence

The pharmacy was a distance-selling pharmacy. It had a set of standard operating procedures (SOPs) which had been due a review in December 2023. The pharmacist said he would complete a review. The pharmacy team member present had not signed the SOPs to show they had read and understood them. They said that they would read and sign them. However, staff were seen dispensing medicines safely.

The pharmacy had processes for learning from 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 the aim was to record them in the near miss log. But the last entry made in the register had been June 2023. The pharmacist said that he would start recording near misses again.

The pharmacy displayed a notice showing the name of the responsible pharmacist (RP). The pharmacy mainly maintained the necessary records to support the safe delivery of pharmacy services. These included the RP log, the private prescription book, and the controlled drug (CD) register. The entries checked at random in the CD register during the inspection agreed with the physical stock held. The pharmacist had been regularly checking the running balances against the physical stock held until recently. He said that he had stopped because the pharmacy had been busy but that he would start balance checking again. The pharmacy had a register to record patient-returned CDs. Patient-returned CDs and date-expired CDs were clearly marked and separated from stock CDs to prevent dispensing errors.

The pharmacy had a complaints procedure and an information governance policy. Access to the electronic patient medication record (PMR) was password protected. Confidential information was destroyed securely. Professional indemnity insurance was in place. The pharmacy team members understood safeguarding requirements and could explain the actions they would take to safeguard a vulnerable person. The pharmacist was aware of the 'Safe Space Initiative' and he knew what to do if someone 'asked for Ani.'. But he had last completed formal safeguarding training in 2019 so he said that he would complete the training again.

Principle 2 - Staffing ✔ Standards met

Summary findings

There are enough team members to manage the pharmacy’s workload. Team members can raise concerns if needed.

Inspector's evidence

During the inspection, the pharmacy team managed the day-to-day workload of the pharmacy effectively. There was one pharmacist, who was also the superintendent pharmacist, and one trainee dispenser. The trainee dispenser explained she was on a dispensing assistant course. She said that she felt supported by the pharmacist. She said that she had daily chats with the pharmacist and felt able to raise any concerns or issues if necessary.

Principle 3 - Premises ✔ Standards met

Summary findings

The pharmacy keeps its premises safe, secure, and appropriately maintained. The pharmacy's premises provides a suitable environment for people to receive its services.

Inspector's evidence

The pharmacy was based in a shop unit. The dispensary was a good size for the services available. But there were some boxes of medicines on the floor which could create a trip hazard. The pharmacy was a reasonable temperature for storing medicines; lighting was suitable and hot and cold water was available. One reasonable sized consultation room was available for consultations with pharmacy staff. Unauthorised access to the pharmacy was prevented during working hours and when closed.

Principle 4 - Services ✔ Standards met

Summary findings

The pharmacy's healthcare services are suitably managed and are accessible to people. The pharmacy gets its medicines and medical devices from reputable sources. It stores them safely and team members know the right actions to take if medicines or devices are not safe to use to protect people’s health and wellbeing.

Inspector's evidence

The pharmacy was a distance-selling pharmacy, people did not routinely access the pharmacy. The pharmacy team understood the signposting process and used local knowledge to direct people to local health services. The pharmacy knew the advice about pregnancy prevention that should be given to people in the at-risk group who took sodium valproate. The pharmacist said that he had phone numbers for people who used the pharmacy so he could ring them up to give advice when necessary. Recently he had spoken to a person about their possible over use of a salbutamol inhaler and the need to use their preventer inhaler. The pharmacist also gave advice to people who were taking medicines that required ongoing monitoring such as methotrexate or warfarin. But the pharmacist did not make records of these conversations. This could mean helpful information was not available for other pharmacy staff to refer to.

The pharmacy used a dispensing audit trail which included use of 'dispensed by' and 'checked by' boxes on the medicine label to help identify who had done each task. Baskets were used to keep medicines and prescriptions for different people separate to reduce the risk of error. The pharmacy supplied medicines in multi-compartment compliance packs to people living in the community to help them take their medicines at the right time. Compliance packs seen included medicine descriptions on the packs to make it easier for people to identify individual medicines in their packs. The pharmacy supplied patient information leaflets to people every month.

The pharmacy delivered dispensed medicines to people in the local area. The pharmacy had an audit trail for deliveries and people receiving the medicine signed a record sheet for CDs. Medicines were stored tidily in the pharmacy on shelves or in cupboards in their original containers. The pharmacy team had a process for date checking medicines. A check of a small number of medicines did not find any that were out of date. CDs were stored appropriately. A record of invoices showed that medication was obtained from licensed wholesalers. The pharmacist explained the process for managing drug alerts which included a record of the action taken.

Principle 5 - Equipment and facilities ✔ Standards met

Summary findings

The pharmacy has the equipment and facilities it needs for the services it provides. It maintains its equipment so that it is safe to use.

Inspector's evidence

The pharmacy used suitable measures for measuring liquids. The pharmacy had up-to-date reference sources. Records showed that the fridge was in working order and stored medicines within the required range of 2 and 8 degrees Celsius. The pharmacist had not arranged for the pharmacy's portable electronic appliances to be tested to make sure they were safe. But, equipment looked in a reasonable condition; the pharmacist said he would arrange testing.

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.