

Registered pharmacy inspection report

Pharmacy Name: IntraVita International, The Barn, 104 Oak Road, Tiptree, Colchester, Essex, CO5 0NA

Pharmacy reference: 9011342

Type of pharmacy: Aesthetic services clinic or beauty salon

Date of inspection: 19/11/2024

Pharmacy context

This pharmacy is located behind a private residence near Colchester in Essex. Its main business is dispensing of prescription-only medicines (POMs) on private prescriptions from clinicians who have completed appropriate training. It mainly supplies vitamins which are given intravenously (IV) by trained clinicians. All medicines are delivered directly to prescribers and the pharmacy is closed to the public.

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 effectively manages the risks associated with its services. It has written procedures to help it operate safely. And it keeps the records it needs to by law and has appropriate professional indemnity arrangements in place.

Inspector's evidence

The main business of the pharmacy was dispensing prescriptions for vitamins, IV drips and other items and sending them to the prescribers to administer to people in their clinics. Prescribers needed to register for an account with the pharmacy before they could send prescriptions to be dispensed. In order to register, the prescribers were required to have completed specific training. The pharmacy owner had a CQC registered training service that offered this training, but evidence of training from other accredited providers was also accepted. Prescribers also had to provide registration details of their relevant healthcare regulatory authority and proof of identification which was checked by the company before an account was created. The pharmacy owner also held a Wholesale Distribution Licence, which was used to supply some stock medicines to account holders. The pharmacy did not dispense any controlled drugs (CDs).

The correct responsible pharmacist (RP) notice was displayed in a prominent position in the pharmacy. The RP was also the superintendent pharmacist (SI). He was the only person who normally worked in the pharmacy as the volume of work was very low. Both the SI and the chief executive officer (CEO) were present during the inspection. The pharmacy had a range of standard operating procedures (SOPs) available which the SI was in the process of reviewing. The SI explained that any near misses (dispensing mistakes that had not left the pharmacy) would be recorded on a paper log. If a dispensing error (mistakes which reached a person) occurred, the SI said it would be investigated fully and a report would be completed. No records were available, but the SI said that there had not been an error or near miss for a long time. He was aware of the risks associated with working alone and described how he took a mental break between dispensing and checking medicines to reduce the chance of a mistake occurring.

The CEO explained that he completed a yearly audit of all aspects of the company, including all pharmacy services, as well as looking at the pharmacy premises and equipment. Any issues found during the audit would be discussed with the SI and necessary changes made. The most recent audit completed had not found any issues with the pharmacy service, premises or equipment.

Complaints and feedback could be submitted in a variety of different ways including on the company's website, via email or by phone and would be dealt with by the SI. Confidential waste was shredded on site when no longer needed. The SI confirmed that he had completed level two safeguarding training, but believed that the chances of any safeguarding concerns occurring were very low as the pharmacy did not have any contact with people.

The pharmacy had current professional indemnity insurance. The private prescription register was kept electronically, and all entries seen were complete. However, the prescriptions the pharmacy was dispensing from did not have the address of the prescriber on them. The SI said that all prescriptions came with an order sheet which had the prescribers address on it which was being used to complete

the private prescription register and that all prescriptions were sent to the prescriber's address as they were administered there. The prescriptions did have the email address and phone number of the prescriber. During the inspection the team amended the prescription templates so that the prescribers address would be included on prescriptions in future. The RP record was complete with all entries seen having a start and finish time.

Principle 2 - Staffing ✓ Standards met

Summary findings

The pharmacist normally works alone but is able to manage the workload comfortably. He has completed specific training relevant to the services being provided.

Inspector's evidence

The SI worked regularly in the pharmacy and normally worked alone. He confirmed he could manage the workload on his own as the volume of prescriptions was very low. The SI said that he had completed training courses relevant to the services and products the pharmacy provided including training about vitamins and IV infusions. The SI said that he also did regular continuing professional development on areas relating to the pharmacy's services. The CEO said that all members of the company would have regular discussions and training on their services which the SI would attend. The SI said he could raise any issues he had about the pharmacy with the CEO. The SI confirmed there were no targets set for any services in the pharmacy.

Principle 3 - Premises ✓ Standards met

Summary findings

The pharmacy is clean and tidy and provides a safe and appropriate environment for the provision of its services. And it is kept secure from unauthorised access.

Inspector's evidence

The pharmacy was bright, modern and clean and tidy. It had enough space for the SI to carry out his work safely. The temperature and lighting in the pharmacy were adequate. And there was central heating and air conditioning available to adjust the temperature if necessary. There was a staff toilet with access to hot and cold running water and handwash and a break room area were located in the same building as the pharmacy. The pharmacy was kept secure from unauthorised access. The pharmacy website had details of the SI as well as the address of the pharmacy.

Principle 4 - Services ✓ Standards met

Summary findings

The pharmacy provides its medicines and services effectively. It gets its medicines from reputable sources, and it stores them appropriately. The pharmacy takes the right action in response to safety alerts and recalls of medicines to help make sure people get medicines and medical devices that are fit for purpose.

Inspector's evidence

The pharmacy had separate areas for dispensing and checking medicines, and baskets were used to separate prescriptions and reduce the chance of them getting mixed up. Contact details of the prescribers were sent through with the prescriptions so the SI could contact a prescriber if he had a query. The pharmacy obtained medicines from licensed wholesalers and directly from the manufacturers. Medicines requiring refrigeration were stored appropriately in two fridges. Fridge temperatures were checked and recorded daily, and all records seen were in the required range. Medicines were stored neatly on the dispensary shelves with larger items being stored on pallets. The SI said that he always checked the expiry date of medicines when performing his final check. A random check of medicines in the pharmacy found no expired medicines. Safety alerts and recalls of medicines and medical devices were received by email. These were printed out and actioned as appropriate with the action taken being recorded on the alert before being archived.

All medicines were sent in secure opaque packaging. Warning stickers were available to add to boxes to highlight if they contained fragile goods or required cold storage. All medicines were delivered directly to prescriber's clinics using a third-party delivery service. Medicines requiring cold storage were delivered using temperature controlled vehicles and in packaging with ice packs to help ensure that medicines remained at the appropriate temperature if there was an issue or delay with delivery and to cover any time when the medicines were not being kept in cold storage. The SI explained that in the summer months when the weather was warmer, extra ice packs were sent with the medicines to account for the warmer temperatures. He also said they would check the temperatures in the summer months and if the temperature was particularly high, they would not send medicines out that day. The SI and CEO provided records showing they had completed test deliveries to ensure that products remained at an appropriate temperature during transit. The pharmacy did not deliver any medicines outside of the UK. If there was a failed delivery, the item was returned to the pharmacy and disposed of. The SI explained that very few deliveries were returned to the pharmacy but if this did occur, they would liaise with the prescriber about re-dispensing and re-delivering the prescription.

Principle 5 - Equipment and facilities ✓ Standards met

Summary findings

The pharmacy has the equipment it needs to provide its services effectively.

Inspector's evidence

The pharmacy had a computer with access to the internet, which allowed the SI to access any online resources he needed. The computer was password protected. Electrical equipment had previously been safety tested earlier in the year as evidenced by stickers in the equipment and a certificate in the pharmacy. There were fire extinguishers located outside the pharmacy room. The CEO said that these had also been serviced earlier in the year. The pharmacy did not dispense any liquids medicines or split packs of medicines.

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.