

# Registered pharmacy inspection report

**Pharmacy Name:** Hobbs Pharmacy, 22 Mengham Road, Hayling Island, Hampshire, PO11 9BH

**Pharmacy reference:** 9011367

**Type of pharmacy:** Community

**Date of inspection:** 12/05/2021

## Pharmacy context

This is a local community pharmacy. It belongs to a company with a small number of pharmacies. It dispenses prescriptions and sells over-the-counter medicines. And it supplies medicines in multi-compartment compliance packs. It provides a delivery service for the vulnerable and housebound. And the pharmacy also provides a flu vaccination service in winter. The inspection was conducted during the COVID-19 pandemic as restrictions began to ease.

## 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
<b>1. Governance</b>	Standards met	N/A	N/A	N/A
<b>2. Staff</b>	Standards met	N/A	N/A	N/A
<b>3. Premises</b>	Standards met	N/A	N/A	N/A
<b>4. Services, including medicines management</b>	Standards met	N/A	N/A	N/A
<b>5. Equipment and facilities</b>	Standards met	N/A	N/A	N/A

## Principle 1 - Governance ✓ Standards met

### Summary findings

The pharmacy suitably identifies its risks. And its team members have adapted their working practices appropriately 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 they know how to protect the safety of vulnerable people. The team records its errors and reviews them to identify the cause so that changes can be made to stop mistakes from happening again. The pharmacy keeps all the records it needs to keep.

### Inspector's evidence

Due to the pandemic the pharmacy had limited the number of people it allowed in to three at a time. It did this to keep people socially distanced from one another. The notice on the door indicated that only two people should be in the pharmacy at one time, but in reality team members allowed up to four people in when the extra two people were sitting in two separate waiting areas on opposite sides of the pharmacy. Both waiting areas had a single chair and were well distanced from each other and from people at the counter. Waiting areas were out of view from the entrance. The pharmacy team had placed a screen along the full length of the counter. And had also placed hand sanitiser at the pharmacy counter for people to use. The team wore personal protective equipment (PPE) which they changed when leaving and re-entering the premises.

The pharmacy provided a core range of essential services as well as a flu vaccination service in winter. Its main service was dispensing prescriptions and delivering them to people who could not collect them. It recorded its mistakes and reviewed them periodically. Team members recorded their mistakes on their own record sheets after discussing them with the responsible pharmacist (RP). They did this so that they could learn from them and improve. The inspector discussed the pharmacy's near miss records with team members and it was agreed that records should identify what could be done differently next time to prevent mistakes and promote continued improvement. The RP and the inspector discussed how the team could benefit from discussing its mistakes openly as a team and on a more regular basis.

The pharmacy had standard operating procedures (SOPs) in place. And team members appeared to be following them. The newest team member had not yet read the SOPs but was seen to check the names and addresses of people collecting their prescriptions. And as a new member of staff, she was seen to consult her colleagues when she was unsure. She attended to customers promptly. And she referred to the RP when she required her intervention and expertise. The RP had put her RP notice on display showing her name and registration number as required by law.

People could give feedback on the quality of the pharmacy's services. The pharmacy team sought customer feedback from general conversations with people and from the feedback they gave to head office. Formal feedback surveys had not been conducted over the last year due to the pandemic. But in general, the pharmacy team had received many positive comments from people. People had been positive about the pharmacy's new premises. And they liked that the pharmacy had remained open throughout the pandemic. Team members had received positive comments from people who were grateful for their advice and support. People had also been positive about the pharmacy's delivery

service, particularly when they were shielding or unwell. But the team had also received complaints from some people when their prescriptions had not been ready when they expected them to be. This had often been due to prescription availability, stock issues or general workload. Matters which were often out with the team's control. Team members liaised with GP surgeries or offered the pharmacy's delivery service to help, when appropriate.

The pharmacy had a complaints procedure which corresponded with NHS guidelines. And team members could provide details of the local NHS complaints advocacy service and the Patient Advice and Liaison service (PALS) if necessary. But customer concerns were generally dealt with at the time by the RP. 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 3 June 2021 when they would be renewed for the following year.

The pharmacy kept its records in the way it was meant to. This included controlled drug (CD) registers, private prescriptions and emergency supplies. The RP and Inspector discussed the RP records and agreed that they should show the times at which the RPs responsibilities ceased. It was clear that the RP recognised the importance of maintaining all the pharmacy's essential records so that they were complete and accurate. The pharmacy's team members understood the need to protect people's confidentiality. Confidential paper waste was shredded on a regular basis. The pharmacy stored most of its completed prescriptions in the dispensary where they were out of people's view. But there were some completed prescriptions stored in totes on the floor near the counter. It was agreed that all prescription bags should be stored so that people's details cannot be seen by others. The team had completed appropriate safeguarding training. And it could access details for the relevant safeguarding authorities online. Staff had not had any specific safeguarding concerns to report.

## Principle 2 - Staffing ✓ Standards met

### Summary findings

The pharmacy team manages its workload safely and effectively. And team members work well together. They are supported by colleagues. And they are comfortable about providing feedback to one another, so that they can maintain the quality of the pharmacy's services. The pharmacy has enough team members to carry out immediate tasks but do not have enough staff to complete a backlog of tasks.

### Inspector's evidence

The pharmacy had two trainee dispensing assistants and three fully trained dispensing assistants on duty with the RP at the time of inspection. All team members had additional responsibilities as medicines counter assistants (MCAs). The newest trainee had only recently started and was gaining experience on the counter by working closely with a colleague. The rest of the team had read all the relevant SOPs. And all staff consulted the pharmacist when they needed to. The pharmacy had carried out a general risk assessment for its team members but had not had to make any special adjustments for anyone. Some team members had been affected by COVID-19 during the pandemic and had stayed at home either due to illness or the need to self-isolate. Increased workload pressures for those in work throughout had meant that tasks had to be prioritised. And while the team was up to date with the immediate prescription workload, there was a build of repeat prescriptions from previous days which were stacked together awaiting the pharmacist's final check. Other tasks such as date-checking, clearing out of uncollected prescriptions and regular near miss reviews had fallen behind. Team members did a COVID-19 lateral flow test twice a week, to help ensure that they did not have COVID-19 before coming to work. When asked, they said they felt safe at work.

Team members were seen to work effectively together. They were seen coaching the trainee dispensing assistant. And they assisted each other when required. The daily workload of prescriptions was in hand and customers were attended to promptly. The pharmacy had a small close-knit team. The RP was able to make her own professional decisions in the interest of patients and felt supported by the superintendent, and the rest of the pharmacy team. Team members could raise concerns if they needed to. And during the pandemic had sought the support of the superintendent when they were managing a heavy workload while also being short staffed.

## Principle 3 - Premises ✓ Standards met

### Summary findings

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

### Inspector's evidence

The pharmacy had relocated just over one year ago from its original site nearby. Its new premises were significantly larger. And were modern, clean and bright. The pharmacy's dispensing activity had increased since its relocation following the closure of two other pharmacies locally. But the new dispensary layout was suitable for the pharmacy's dispensing activities and provided enough space to work safely and effectively. It had distinct areas for dispensing and checking. It had a clear workflow and its work surfaces and floors were generally tidy and free of clutter. The team followed a regular cleaning routine to ensure that contact surfaces were kept hygienically clean. The inspector and RP discussed the importance of regular hand sanitising and maintaining a regular, daily cleaning routine, for all contact surfaces during the pandemic.

The medicines counter was immediately in front of the dispensary. It had a large Perspex screen across the length of the counter to help reduce the spread of the coronavirus. While the entry from the customer area into the general pharmacy area did not have a screen, team members said they would draw people to the screen if they approached the unscreened area. There were notices in the front window advising people of the need to maintain social distancing and to wear a face covering. The pharmacy had a consultation room available for confidential conversations, consultations and the provision of services. The RP cleaned contact surfaces in the room and washed or sanitised her hands between consultations. People using the room were also asked to sanitise their hands. The pharmacy had two seating areas for waiting customers. A single chair had been placed on either side of the retail area. And were a significant distance apart from one another. Room temperatures were appropriate for keeping staff comfortable and were suitable for the storage of medicines. The pharmacy had staff facilities and stock rooms to the rear.

## Principle 4 - Services ✓ Standards met

### Summary findings

The pharmacy provides its services safely. And makes them easily accessible for people. The pharmacy team gets its medicines and medical devices from appropriate sources. And it stores them properly. Team members generally make the necessary checks to ensure that the pharmacy's medicines and devices are safe to use to protect people's health and wellbeing. And it supplies its medicines with enough information to help people take them properly.

### Inspector's evidence

The pharmacy had a small step up to its entrance, but it also had a ramp providing step-free access. This made access easier for wheelchair users and those with mobility difficulties. The pharmacy had a sign in its front window advertising the times of opening. The customer 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. Demand for deliveries had increased during the pandemic.

The pharmacy had reduced its range of services during the pandemic. And currently offered a core range of services and a flu vaccination service in the winter. Its team used baskets to hold individual prescriptions and medicines during dispensing. It did this to keep prescriptions and their corresponding medicines together. The pharmacy provided multi-compartment compliance packs for people who needed them. The labelling directions on compliance packs gave the required advisory information to help people take their medicines properly and gave a description of each medicine, including colour and shape, to help people to identify them. The pharmacy also supplied patient information leaflets (PILs) with new medicines and with regular repeat medicines. The dispensing assistant responsible for dispensing compliance packs agreed with the inspector that it was important to have good hand hygiene, wear gloves or use tweezers when dispensing medicines into compliance packs. The RP gave people advice on a range of matters. And would give appropriate advice to anyone taking high-risk medicines. The pharmacy did not have any people in the at-risk group taking sodium valproate. But it was clear that the RP understood that anyone taking sodium valproate must be appropriately counselled.

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 generally date-checked the pharmacy's stocks regularly. But it had fallen behind with this task during the pandemic. But a random sample of stock checked by the inspector was in date. And the RP confirmed that expiry dates were checked on all products as they were dispensed. In general, 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 the pharmacy's CDs in a heavy safe and its cold chain items in a fridge as appropriate. And it monitored its fridge temperatures to ensure that the medication inside was kept within the correct temperature range. The RP agreed to contact the local CD liaison officer to gain approval for the safe to be used for storing CDs. After dispensing, the team added a sticker to the original prescription or prescription bag to show when an item had been stored in the fridge or the CD safe. They did this to ensure that where items had been separated so they were stored properly, team members could find everything on the prescription and did not miss a CD or fridge item

when handing someone's medicines to them. CD stickers also acted as a prompt to date check the prescription for a CD to ensure that it was not handed out after its 28-day expiry date. The pharmacy had a number of uncollected prescriptions on its shelves which had been there for between four and six months. This meant that prescription storage areas were very full. This generally made it more difficult for staff to find what they were looking for. The pharmacy responded promptly to drug recalls and safety alerts. 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 had the appropriate equipment for counting tablets and capsules and for measuring liquids. Team members had access to a range of up-to-date reference sources. And they had access to PPE, in the form of sanitiser, face masks and gloves, which were appropriate for use in pharmacies. Team members changed their masks and washed or sanitised their hands at regular intervals throughout the day, particularly after leaving and re-entering the premises. They also washed or sanitised their hands and after handling money.

The pharmacy had four computer terminals. Two in the dispensary and a laptop on the counter had a facility for keeping patient medication records (PMRs). The fourth was in the consultation room. The dispensary's computers were located at different work areas of the dispensary, in a way that meant that team members using them were not close to one another. Computers were password protected and their screens could not be viewed by people. Team members 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.