

Registered pharmacy inspection report

Pharmacy Name: Cheema Pharmacy, 57 King Street, Southall, UB2
4DQ

Pharmacy reference: 9011387

Type of pharmacy: Community

Date of inspection: 27/04/2021

Pharmacy context

This is an independently run, local community pharmacy, in the centre of Southall. 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.

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 identifies its risks adequately. And its team members have adapted their working practices suitably 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 four at a time. It did this to keep people socially distanced from one another. Team members had also placed stickers on the floor which showed people where to stand. And they had hand sanitiser at the pharmacy counter for people to use. The team had a regular cleaning routine and wore personal protective equipment (PPE) which they changed between tasks and when leaving and re-entering the premises. When asked, team members said they felt safe at work.

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. The team recorded its mistakes and reviewed them regularly. Team members reviewed their mistakes so that they could learn from them and improve. And they knew that records should identify what could be done differently next time to prevent mistakes and promote continued improvement.

The pharmacy had standard operating procedures (SOPs) in place. And team members appeared to be following them. The dispensing assistant was observed to put stock away in a tidy organised fashion and described carrying out regular checks on stocks. The medicines counter assistant (MCA) attended to customers promptly. And she referred to the RP when she required his intervention. The RP had put his RP notice on display showing his 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. 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. It had received positive comments from people who were grateful for its advice and support throughout the pandemic. And people had also been positive about the pharmacy's delivery service. Particularly when they were shielding or unwell. People had also been positive about the pharmacy remaining open throughout the pandemic and the team being available for them to consult. But the team had also received complaints from some people when their prescriptions had not been ready when they expected them to be. But although this was often due to prescription availability or stock issues which were out with the team's control. Team members generally tried to explain the situation to people. And offered the pharmacy's delivery service where 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 regular pharmacists. 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 31 January 2022 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, emergency supplies and the RP record. It was clear that the RP recognised the importance of maintaining 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 set aside in a separate box until it could be shredded. Team members shredded this waste regularly throughout the day. The pharmacy stored its completed prescriptions in the dispensary where they were out of people's view. Team members had completed appropriate safeguarding training. And the team could access details for the relevant safeguarding authorities online. Staff had not had any specific safeguarding concerns to report. But felt that they had been of good service to people locally throughout the pandemic by answering their queries, listening to their concerns and signposting when appropriate.

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.

Inspector's evidence

The pharmacy had a trainee dispensing assistant and a team member whose role was a combination of dispensing assistant and MCA, working with the RP at the time of inspection. Staff had read all the relevant SOPs. And the MCA consulted the pharmacist when she needed to. The pharmacy had carried out specific risk assessments for individual team members but had not had to make any special adjustments for anyone. Team members had remained well during the pandemic and had been willing to get vaccinated. And they did a COVID-19 lateral flow test twice a week, to help ensure that they did not have COVID-19 before coming to work.

The RP and trainee dispensing assistant were observed to work effectively together. The RP was seen coaching the trainee dispensing assistant. And they were seen assisting 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 his own professional decisions in the interest of patients and felt supported by the superintendent, and his colleagues. The trainee dispensing assistant and MCA also felt supported by their colleagues and could raise concerns if they needed to.

Principle 3 - Premises ✓ Standards met

Summary findings

The pharmacy's premises provide a suitable environment for people to receive its services. They are sufficiently 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 10 months previously from its original site opposite. Although its new premises were smaller, they were modern, clean and bright. The 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 tidy and free of clutter. The team followed a regular cleaning routine to ensure that contact surfaces were kept hygienically clean.

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, the MCA said she would draw people to the screened area when they approached. 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 had not used the room much during the pandemic but when he had used it, he cleaned contact surfaces in the room and washed or sanitised his hands between consultations. People using the room were also asked to sanitise their hands. The pharmacy also had a small seating area for waiting customers. Room temperatures were appropriately maintained to keep staff comfortable and were suitable for the storage of medicines. The pharmacy had staff facilities 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 make the necessary checks to ensure that the pharmacy's medicines and devices are safe to use to protect people's health and wellbeing. But the pharmacy doesn't give people enough information about the medicines it supplies in multi-compartment compliance packs.

Inspector's evidence

The pharmacy's entrance had step-free access from the pavement outside. 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. The RP described how 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. The inspector and RP agreed that it was important to label compliance packs with a description of each medicine, including colour and shape, to help people to identify them. And they also agreed that patient information leaflets (PILs) should be supplied with new medicines and with regular repeat medicines. The RP gave people advice on a range of matters. And would give appropriate advice to anyone taking high-risk medicines.

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 date-checked the pharmacy's stocks regularly. And they kept records to help them manage the process effectively. A random sample of stock checked by the inspector was in date. 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 items in a CD cabinet and fridge as appropriate. And it monitored its fridge temperatures to ensure that the medication inside was kept within the correct temperature range. 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 gloves or washed or sanitised their hands at regular intervals throughout the day and after handling money.

The pharmacy had three computer terminals. Two were in the dispensary and had a facility for keeping patient medication records (PMRs). The third was in the consultation room. The dispensary 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.