

# Registered pharmacy inspection report

**Pharmacy Name:** Boots, Nugent Shopping Park, Cray Avenue,  
Orpington, Kent, BR5 3RP

**Pharmacy reference:** 9011549

**Type of pharmacy:** Community

**Date of inspection:** 09/10/2024

## Pharmacy context

This is a community pharmacy in a retail park on the outskirts of Orpington. It does not provide NHS services. Its main activities consist of flu vaccinations and selling over the counter medicines. This was the first inspection of the pharmacy since it opened.

## 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 manages the risks associated with its services well. Team members have written procedures they can follow and they get regular training about them. People using the pharmacy can provide feedback and their personal information is protected. Overall, the pharmacy keeps the records it needs to by law. And staff know how to protect the welfare of a vulnerable person.

### Inspector's evidence

The pharmacy had a range of standard operating procedures (SOPs), which were available in paper format, on the pharmacy computer, and via a mobile application. The responsible pharmacist (RP) was a relief pharmacist and confirmed that she was familiar with the SOPs and had signed them at her base store. Staff received regular training packages about the SOPs and were required to take tests on them. The RP was the only team member present on the inspection and could describe her role in the pharmacy.

The pharmacy only dispensed prescriptions issued by its offsite prescribers for flu vaccinations. The RP was not aware of any dispensing mistakes that had occurred but could explain how she would record any on the pharmacy's computer. The pharmacy did monthly patient safety reviews which were documented, and no dispensing mistakes had been identified in the ones seen.

People could provide feedback or raise concerns via several routes, including in person, online, and by scanning a QR code displayed at the counter. There were also leaflets in the consultation room which explained to people how they could provide feedback and the pharmacy had a complaint procedure.

The pharmacy had current indemnity insurance which was arranged by its head office. Records about private prescriptions dispensed were seen to contain the required information. The RP showed how she recorded the batch number when administering flu vaccines and kept a record of the questions the person had been asked prior to the injection. The right RP notice was displayed, and the RP record largely complied with requirements. The pharmacy did not stock any CDs requiring safe custody or dispense any unlicensed medicines. And it did not make any emergency supplies of prescription-only medicines.

No confidential information was visible from the public area. Confidential waste was separated from general waste and collected by head office for disposal. Computer screens were turned away so that people using the pharmacy could not read information on them. The RP confirmed she had completed level 3 safeguarding training and could describe what she would do if she had any concerns.

## Principle 2 - Staffing ✓ Standards met

### Summary findings

The pharmacy has enough staff to provide its services safely, and they have the appropriate training for their roles. Team members feel comfortable about raising concerns and they get ongoing training to help keep their knowledge and skills up to date.

### Inspector's evidence

At the time of the inspection only the RP was working in the pharmacy and was up to date with the workload. The store manager was a trained dispenser and was able to assist as needed. The RP said that the store manager undertook the accuracy checks for the dispensed vaccines. There was a range of ongoing training packages online and this included mandatory and optional training. Head office monitored the training completed and sent prompts to the team member if one needed to be done. The RP confirmed she had done training about vaccinations, which included annual refresher training and face-to-face training every three years. She felt able to raise any concerns and to take professional decisions. There were some targets for the team, but the RP did not feel under any undue pressure to meet them.

## Principle 3 - Premises ✓ Standards met

### Summary findings

The pharmacy's premises are appropriate for the provision of healthcare and they are kept secure. People can have a conversation with a team member in a private area.

### Inspector's evidence

The pharmacy was clean and tidy and lighting was good throughout. The volume of dispensing was very low and there was ample workspace available in the dispensary. The consultation room was large, clean and tidy and allowed a conversation at a normal level of volume to take place inside and not be overheard. The room was kept locked when not in use. The pharmacy opened at the same time as the store but closed a couple of hours earlier. Access to the pharmacy when it was closed was restricted with pull-across barriers. The assistant manager also explained that the tills in the rest of the store would not allow pharmacy-only medicines to be sold from them.

## Principle 4 - Services ✓ Standards met

### Summary findings

The pharmacy provides its services safely and they are accessible to people with different needs. It gets its medicines from reputable suppliers and stores them appropriately. And the team takes appropriate action in response to safety alerts to help ensure people get medicines and medical devices that are safe to use.

### Inspector's evidence

There was step-free access from the retail park through the store and there was sufficient space for people with wheelchairs or pushchairs to manoeuvre. One end of the counter was lower to assist people with wheelchairs. There was a hearing loop for people with compatible hearing aids and seats were available for people who wanted to wait for appointments.

The RP explained that people booked flu vaccination appointments online and after going through the online questions, if appropriate a company pharmacist independent prescriber would generate an electronic prescription. The prescription was then sent to the pharmacy, who kept a printed out copy for reference. The company had a CQC-registered prescribing service but the RP was unsure if the prescriptions were issued by this service.

The pharmacy obtained its medicines from licensed wholesale dealers and stored them tidily. Fridge temperatures were monitored and recorded daily and records seen were within the appropriate range. Date checking of stock was done regularly and this activity was recorded. No date-expired medicines were found during a random check of medicines. The pharmacy did not keep any prescription-only medicines apart from vaccines. And it did not accept returned medicines from people. Medicines which had expired were kept separate from current stock and sent to head office for destruction. Drug alerts and recalls were received electronically and printed out and annotated with a note about the action taken.

## Principle 5 - Equipment and facilities ✔ Standards met

### Summary findings

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

### Inspector's evidence

There were clean glass calibrated measures to be used if needed, but they were not used in practice. There was an in-date anaphylaxis kit in the consultation room. The blood pressure meter was rarely used but it was less than three months old. There were sterile eye washes and a first aid kit in the dispensary.

### What do the summary findings for each principle mean?

| Finding  | Meaning  |
|--|--|
| <span style="color: green;">✔</span> <b>Excellent practice</b> | 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. |
| <span style="color: green;">✔</span> <b>Good practice</b>      | The pharmacy performs well against most of the standards and can demonstrate positive outcomes for patients from the way it delivers pharmacy services.                                |
| <span style="color: green;">✔</span> <b>Standards met</b>      | The pharmacy meets all the standards.  |
| <b>Standards not all met</b>                                   | The pharmacy has not met one or more standards.  |