

Registered pharmacy inspection report

Pharmacy Name: Medicinapharmacy.co.uk, Unit 3, Priory South

Industrial Park, 11 Upper Priory Street, Northampton,
Northamptonshire, NN1 2PT

Pharmacy reference: 9011553

Type of pharmacy: Internet / distance selling

Date of inspection: 02/11/2021

Pharmacy context

The pharmacy has an NHS distance selling contract. The main activity of the pharmacy is dispensing NHS prescriptions and giving advice about medicines. The pharmacy delivers its medicines to people who use its service.

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 adequately identifies and manages the risks associated with the provision of its services. The pharmacy manages people's personal information safely. The pharmacy has adequate procedures to learn from its mistakes.

Inspector's evidence

The pharmacy had a set of up-to-date standard operating procedures (SOPs) which reflected that it was a distance selling pharmacy. The pharmacy had one regular member of staff (the superintendent pharmacist) who had signed the SOPs. The pharmacist on the day of inspection was a locum pharmacist who had not worked at the pharmacy before. He understood how the pharmacy worked. If he had any queries the superintendent pharmacist could be contacted by phone. The pharmacy sold a small number of over-the-counter medicines (OTC) through its website. The sales were made by a third-party pharmacy which the pharmacy had a contract with. The superintendent had received assurance that the service provided complied with legal and professional requirements.

The pharmacy had a process for recording dispensing mistakes that were identified before reaching a person (near misses) and dispensing mistakes where they had reached the person (errors). Near misses were recorded in a near miss log. The pharmacy was only dispensing a small number of prescriptions each day. Where no near misses had been made in a month an entry was made in the near miss log recording that fact.

The pharmacy maintained appropriate legal records to support the safe delivery of its services. The pharmacy displayed who the responsible pharmacist (RP) in charge of the pharmacy was. The RP record showed who the RP in charge of the pharmacy had been. The pharmacy hadn't received or supplied any controlled drugs (CDs) but did have a CD register and a patient-returns CD register in place. The pharmacy hadn't supplied any private prescriptions.

The pharmacy had appropriate professional indemnity insurance. There was a complaint procedure in place. Access to the electronic patient medication record was password protected. Confidential paperwork was stored securely. Confidential waste was shredded. The pharmacist was aware of safeguarding requirements and had local contact details available.

Principle 2 - Staffing ✓ Standards met

Summary findings

The pharmacy has sufficient team members to manage its workload.

Inspector's evidence

During the inspection a locum pharmacist was present. He adequately managed the day-to-day workload. He explained that the pharmacy had one driver but didn't have any dispensary staff. The driver had received appropriate training for his role. The pharmacist was able to contact the superintendent pharmacist if necessary. The pharmacy had a whistleblowing policy.

Principle 3 - Premises ✓ Standards met

Summary findings

The pharmacy keeps its premises safe, secure, and appropriately maintained. The pharmacy makes changes to help keep staff and people using the pharmacy safe during the pandemic.

Inspector's evidence

The physical pharmacy building was maintained to a suitable standard. The pharmacy had heating to maintain an appropriate temperature. There was adequate lighting and hot and cold running water was available. The dispensary was a suitable size for the services provided. The pharmacy's website displayed the appropriate information including the address of the pharmacy, the pharmacy's GPhC registration number and details of the superintendent pharmacist. The website met current website security requirements. Unauthorised access to the pharmacy was prevented during working hours and when closed.

Principle 4 - Services ✓ Standards met

Summary findings

The pharmacy offers healthcare services which are adequately managed and are accessible to people. The pharmacy gets its medicines and medical devices from reputable sources. It mainly stores them safely and it takes the right actions if medicines or devices are not safe to use to protect people's health and wellbeing. The pharmacy routinely speaks to people who are taking higher-risk medicines, but records of these conversations are not always made. So it is harder for the pharmacy to demonstrate that people always receive important information about their medicines.

Inspector's evidence

The pharmacist understood the signposting process, there was a wide range of information on the pharmacy's website for people to access. The pharmacist knew the advice about pregnancy prevention that should be given to people in the at-risk group who took sodium valproate. The pharmacist gave a range of advice to people. He said that the pharmacy had contact phone numbers for people. Examples of advice he gave included advice about changes in dose and new medicines. He also gave advice to people taking higher-risk medicines such as warfarin, lithium, and methotrexate. Records showed that this information was sometimes, but not always, recorded.

The pharmacy used a dispensing audit trail which included use of 'dispensed by' and 'checked by boxes' on the medicine label. The pharmacist signed both boxes to show that he had dispensed and checked the medicine. The pharmacy also used baskets during the dispensing process to keep medicines and prescriptions separated to reduce the risk of a mistake being made. The pharmacy supplied a small number of multi-compartment compliance packs and there was a process to make sure that each person who received their medicines in a compliance pack got them in a timely manner. During the inspection there were no compliance packs available to be checked.

Medicines were stored on shelves tidily and mainly in original containers. However, there were a couple of brown bottles which contained medicines. These had been popped from original packs by mistake during compliance pack assembly. The bottles had the name of the medicine but not the batch numbers or expiry dates, or the date of popping. This increased the risk of out-of-date or recalled medicines being supplied. The open bottle of liquid medicine seen didn't have the date it had been opened recorded. The pharmacist said that he would record the date when opening a bottle. Date checking was carried out regularly; a sample of medicines checked were in date.

The temperature of the fridge at the time of inspection was within the required range of 2 and 8 degrees Celsius. Records made daily showed that previous temperatures were also within the required range. The pharmacy only used recognised wholesalers to supply them with medicines. The pharmacy delivered medicines to all the people who used the service. The person delivering the prescription maintained appropriate distance due to the pandemic. The pharmacy had a procedure for managing drug alerts.

Principle 5 - Equipment and facilities ✔ Standards met

Summary findings

The pharmacy has access to the appropriate equipment and facilities to provide the services it offers safely.

Inspector's evidence

The pharmacy used suitable measures for measuring liquids. It had up-to-date reference sources. The pharmacy had one fridge and a suitable CD cabinet. Portable electrical equipment was new and looked in a reasonable condition.

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.