

Registered pharmacy inspection report

Pharmacy Name: The Noohra, Unit 6A, Centre Court, Sir Thomas Longley Road, Medway City Estate, Rochester, Kent, ME2 4BQ

Pharmacy reference: 9011557

Type of pharmacy: Community

Date of inspection: 08/09/2023

Pharmacy context

The pharmacy is on an industrial estate near to Rochester. The pharmacy sells pharmacy-only medicines, and it supplies medicines against private prescriptions. People are generally invited to the pharmacy by appointment, but they can also access it during its opening times.

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 adequately identifies and manages the risks associated with its services to help provide them safely. It records and regularly reviews any mistakes that happen during the dispensing process. It protects people's personal information well. And people can feedback about the pharmacy's services. The pharmacy keeps its records up to date and largely accurate. And staff know how to protect the welfare of vulnerable people.

Inspector's evidence

The pharmacist had signed the pharmacy's standard operating procedures (SOPs) to show that she had understood them and agreed to follow them. She said that there had not been any dispensing errors, where a dispensing mistake had been handed to a person. She explained that she would make a record of any dispensing errors and undertake a root cause analysis. A near miss log was used to record dispensing mistakes that had been identified before the medicine was handed out. The pharmacist said that there had not been many near misses due to the low volume of dispensing. And because she took a mental break between dispensing and checking items.

Workspace in the pharmacy was free from clutter. There were no dispensed medicines waiting to be collected. The pharmacist said that she usually gave people an estimated time that their medicines would be ready for collection when they handed in their prescription. And she contacted people when their medicines were ready. The pharmacist said that she initialled the dispensing label to show that she had dispensed and checked each item. Team members' roles and responsibilities were specified in the SOPs. The pharmacist said that pharmacy would not open if she was not working that day.

The right responsible pharmacist (RP) notice was clearly displayed, and the RP record was completed correctly. The pharmacy had current professional indemnity insurance. The private prescription record was largely completed correctly, but the prescriber's address was not always on the prescription, so this information was not always recorded. The pharmacist said that she would speak with the prescriber. She explained that the pharmacy did not make any supplies of medicines in an emergency without a prescription, and she would instead signpost people to another pharmacy. The pharmacy did not make supplies of Schedule 2 controlled drugs.

Confidential waste was shredded at the pharmacy and computers were password protected. The windows at the front of the pharmacy were covered so people outside the pharmacy could not see inside. And people using the pharmacy could not see information on the computer screens. The pharmacist had completed training about the General Data Protection Regulation.

The pharmacist said that there had not been any complaints since the pharmacy opened. There was a complaints procedure available, and the pharmacist said that she would deal with any complaints herself. The pharmacy's contact details were displayed on the pharmacy's website.

The pharmacist had completed the Centre for Pharmacy Postgraduate Education level 3 training about protecting vulnerable people. She could describe potential signs that might indicate a safeguarding concern and would refer any concerns to the relevant authority. She said that there had not been any safeguarding concerns at the pharmacy.

Principle 2 - Staffing ✓ Standards met

Summary findings

The pharmacy has enough appropriately trained staff to provide its services safely. Staff keep their skills and knowledge up to date and can take professional decisions.

Inspector's evidence

There was one pharmacist working on the day of the inspection and she was also the superintendent pharmacist for the pharmacy. She had undertaken recent training for the emergency hormonal contraception service, erectile dysfunction, minor ailments and immunisations and vaccinations. The pharmacist was an independent prescriber, but she was not issuing prescriptions at the pharmacy. She worked as a pharmacist independent prescriber at a local GP surgery which helped to keep her knowledge and skills up to date.

The pharmacist was aware of the restrictions on sales of products containing pseudoephedrine. She explained the questions she would ask to ensure an over-the-counter medicine was suitable for the person it was intended for. And she was aware of the different medicines which could be abused or may require additional care. If person regularly requested to purchase these types of medicines, she would refer them to their GP.

The pharmacist was aware of the continuing professional development requirement for the professional revalidation process. She said that she read pharmacy-related magazines and other relevant publications to help keep her knowledge up to date. And she could complete training at the pharmacy during quieter periods. Targets were not set for the pharmacy's services and the pharmacist felt able to make professional decisions.

Principle 3 - Premises ✓ Standards met

Summary findings

The premises provide a safe, secure, and clean environment for the pharmacy's services. And people can have a conversation with a team member in a private area.

Inspector's evidence

The pharmacy was secured from unauthorised access. It was bright, clean, and tidy throughout and this presented a professional image. Air conditioning was not available, but there were some fans and the room temperature on the day of the inspection was suitable for storing medicines. There were shared toilet facilities available to the rear of the pharmacy. Pharmacy items were not stored in these areas. There were separate hand washing facilities available.

There was a large table with several chairs in the main pharmacy area. And there were two additional chairs available for people to use while waiting. The consultation room was accessible to wheelchair users and was located off the main pharmacy area. It was suitably equipped and well-screened. And conversations at a normal level of volume in the consultation room could not be heard from the main pharmacy area.

Principle 4 - Services ✓ Standards met

Summary findings

People with a range of needs can access the pharmacy's services. The pharmacy provides its services safely and manages them well. It gets its medicines from reputable suppliers and stores them properly. And it responds appropriately to drug alerts and product recalls. This helps make sure that its medicines and devices are safe for people to use.

Inspector's evidence

Services, opening times and contact details for the pharmacy were clearly advertised on the outside of the pharmacy. There was step-free access to the pharmacy through a wide entrance. The pharmacist explained that she would help people into the premises where needed.

The pharmacist said that the pharmacy had not dispensed any higher-risk medicines such as methotrexate and warfarin. She explained that she would speak with the person about their medicines and keep a record of any blood test results on their medication record. The pharmacist said that the pharmacy had not made any supplies of valproate medicines. She was aware that people in the at-risk group needed to be on the Pregnancy Prevention Programme (PPP). And she would refer people to their GP if they were not on a PPP when they should be on one. And she said that the pharmacy would dispense whole packs of these medicines which would ensure that people were provided with the necessary information each time.

The pharmacist undertook regular expiry date checks, and these were recorded. There were no expired medicines found during a spot check and medicines were kept in their original packaging. The pharmacist said that she would highlight short-dated items to help minimise the chance of these being handed out. The pharmacy used licensed wholesalers to obtain medicines and medical devices. Drug alerts and recalls were received from the MHRA via email, and the pharmacist said that she checked the MHRA website regularly for updates. She explained the action the pharmacy took in response to any alerts or recalls. And the pharmacy kept a record of any action taken, which made it easier for the pharmacy to show what it had done in response.

There were no part-dispensed prescriptions in the pharmacy. 'Owings' notes were provided when prescriptions could not be dispensed in full, and people were kept informed about supply issues. And prescriptions for alternate medicines would be requested from prescribers where needed. The pharmacist said that prescriptions would be kept at the pharmacy until the remainder was dispensed and collected. There were no uncollected prescriptions at the pharmacy. The pharmacist said that these would be checked regularly and she would contact people to ask if they still needed their medicines.

Principle 5 - Equipment and facilities ✓ Standards met

Summary findings

The pharmacy uses its equipment to help protect people's personal information. And it has the equipment it needs to provide its services safely.

Inspector's evidence

Up-to-date reference sources were available in the pharmacy and online. The blood pressure monitor had been in use for less than two years and the pharmacist said that it would be replaced in line with the manufacturer's guidance. The weighing scales and the shredder were in good working order. Fridge temperatures were checked daily, and the maximum and minimum temperatures were recorded. And the fridge was suitable for storing medicines. A triangle counter was available and was clean and the pharmacy did not dispense any liquids which required measuring.

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.