General Pharmaceutical Council

Registered pharmacy inspection report

Pharmacy Name: Fast Track Pharmacy, The Foundry Business Centre, Lamb Inn Road, Knottingley, West Yorkshire, WF11 8DW

Pharmacy reference: 9011567

Type of pharmacy: Internet / distance selling

Date of inspection: 16/09/2021

Pharmacy context

This pharmacy is a distant selling online pharmacy that is not usually open to the public. The pharmacy's main activities are dispensing NHS prescriptions and delivering medicines to people's home. The pharmacy was inspected 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 generally identifies and manages the risks associated with its services. The pharmacy completes the records it needs to by law and it suitably protects people's private information. The pharmacy identifies potential risks to the safe dispensing of prescriptions and it supports the team to take appropriate action to prevent errors. However, the pharmacy doesn't have a complete set of standard operating procedures to ensure the team members comply with legislative requirements.

Inspector's evidence

The pharmacy was inspected during the COVID-19 pandemic. The team had access to Personal Protective Equipment (PPE). At the time of the inspection the pharmacist was not wearing PPE but offered to do so when the inspector arrived. The team members only came into contact with the pharmacy delivery drivers and the drivers from the wholesalers. This meant contact with people other than colleagues was kept to a minimum. The pharmacy provided lateral flow tests to people as part of a national service.

The pharmacy had a range of up-to-date standard operating procedures (SOPs). These provided the team with information to perform tasks supporting the delivery of services. However, the SOPs did not cover all the Responsible Pharmacist (RP) regulatory requirements. The three regular pharmacists had read and signed the SOPs signature sheets to show they understood and would follow the SOPs. But the part-time delivery drivers who had received training from the pharmacists, had not signed the signature sheet for the SOPs relevant to their role.

The pharmacy had procedures to manage and record errors spotted during the dispensing process known as near miss errors. And it had separate procedures for errors that reached the person. The record of near miss errors showed clear details of what had been dispensed in error and the actions taken by the team of pharmacists to prevent the same error. The actions included separating the different formulations of a medicine to reduce the risk of picking the wrong product. The pharmacy had not had the occasion to report an error that had reached a person.

The pharmacy had a procedure for handling complaints raised by people using the pharmacy services. The pharmacy website provided detail of how to raise a concern along with the contact details of the pharmacy. The pharmacy had up-to-date indemnity insurance. A sample of records required by law such as the RP records met legal requirements. The pharmacist was not displaying the RP notice. The pharmacy had not received any prescriptions for controlled drugs (CDs) since it opened. It had CD registers available so a legal record could be promptly made when a prescription presented. The pharmacists had decided to only order CDs when a prescription was presented, rather than having items in stock. The pharmacy used several wholesalers who delivered at least once a day. This meant the team could quickly receive CD stock when needed. The pharmacy kept a book to record CDs returned by people for disposal. The pharmacy hadn't received any medicines back from people for disposal since it opened. The pharmacy website displayed details on the confidential data kept and how the pharmacy complied with legal requirements. It also displayed a separate privacy notice. The pharmacists and delivery drivers had completed training about the General Data Protection Regulations (GDPR). And the pharmacy had a range of Information Government documents for the team to read. The team separated confidential waste for shredding onsite.

The pharmacy had safeguarding procedures and guidance for the team to follow. The team members had access to contact numbers for local safeguarding teams. The pharmacist had recently completed level 2 training from the Centre for Pharmacy Postgraduate Education (CPPE) on protecting children and vulnerable adults. The pharmacists and delivery drivers had experience from other roles to enable them to identify signs of safeguarding concerns. The team had not had the occasion to report concerns about people using the pharmacy.

Principle 2 - Staffing ✔ Standards met

Summary findings

The pharmacy has a small, experienced team with most of the qualifications and skills needed to support its services. Team members work well together and support each other in their day-to-day work. The team members use a variety of communication tools to share information and help support the efficient delivery of the pharmacy services. They frequently discuss ideas to enhance the delivery of the pharmacy's services.

Inspector's evidence

The pharmacy employed three part-time pharmacists and two part-time, zero contract delivery drivers. The delivery drivers were well known to the pharmacists and had received basic training. But they had not been enrolled onto a training course in line with the GPhC requirements for the education and training of support staff published in October 2020. The drivers had completed Disbarring Service (DBS) checks. The pharmacy was in the process of recruiting for a dispenser to support the pharmacists.

The pharmacists worked well together and communicated with each other by leaving notes about matters that needed to be followed-up or to share information. The pharmacists also emailed and called each other if the matter was urgent. The pharmacy didn't set targets for the services it offered. The pharmacist felt comfortable raising any concerns with the superintendent pharmacist though he hadn't had the occasion to do so. The pharmacist team had met with the teams at the local medical centres to advise of the services offered by the pharmacy including deliveries and the Community Pharmacist Consultation Service.

Principle 3 - Premises ✔ Standards met

Summary findings

The pharmacy premises are adequate for the services provided. And they have suitable arrangements to ensure the pharmacy is secure.

Inspector's evidence

The pharmacy premises were adequately maintained and had restricted access. However, the internal walls and ceiling needed some repair. There was sufficient space for dispensing activities and the team kept floor spaces clear to reduce the risk of trip hazards. The pharmacy had enough storage space for stock, assembled medicines and medical devices. The pharmacy provided separate sinks for the preparation of medicines and hand washing.

The pharmacists planned to use the room next to the dispensary to provide services such as the seasonal flu vaccination service. This room was not fit for the purpose of providing such services to people. So, the pharmacists had arranged for work to be done to create a room to support such pharmacy services. The work on this was due to start shortly after the inspection.

The pharmacy website provided people with an opportunity to buy over-the-counter medicines. The website informed people the service was operated by a third-party registered pharmacy that offered this service to many distant selling online pharmacies in the UK. The third-party pharmacy managed the process once the person selected the OTC product they wished to purchase. The pharmacy received an email informing the pharmacists when a person had accessed the pharmacy website to purchase OTC medicines. And when the sale had taken place. So, the pharmacist could monitor requests and identify any concerns which would trigger them to speak to the person or direct them to their GP. The pharmacist reported very few sales had been made in the six months the pharmacy had been open.

Principle 4 - Services ✔ Standards met

Summary findings

The pharmacy provides basic services that support people's health needs. And it manages the pharmacy services well. The pharmacy keeps records of deliveries made to people's home. So, the team can effectively deal with any queries. The pharmacy obtains its medicines from reputable sources. And it stores and manages its medicines appropriately.

Inspector's evidence

The pharmacy's website had information that provided people with details of the services it offered and the contact details of the pharmacy. It also had a practice leaflet attached for people to print off and read. The pharmacy was planning to provide the seasonal flu vaccination and had obtained the relevant documents from the NHS such as up-to-date patient group directions (PGDs). And the Superintendent Pharmacist was completing a risk assessment for the service. The pharmacy delivered medicines to people in the local area, the furthest delivery was made to people living in Leeds. The pharmacy had the ability to send medicines to other parts of the UK but had not had the occasion to do so.

The pharmacy had equipment and procedures to provide multi-compartment compliance packs to help people take their medicines. At the time of the inspection none of the people using the pharmacy used this service. The team provided people with clear advice on how to use their medicines. The team asked people prescribed high-risk medicines such as warfarin for information such as the latest blood test results. And when required asked the prescriber to send information using the pharmacy's secure NHS email address. The pharmacists were aware of the criteria of the valproate Pregnancy Prevention Programme (PPP). And had information to provide to people when required. The pharmacy had not received any prescriptions for valproate.

The pharmacy provided separate areas for labelling, dispensing and checking of prescriptions. Baskets were used during the dispensing process to isolate individual people's medicines and to help prevent the prescriptions becoming mixed up. The pharmacy had checked by and dispensed by boxes on dispensing labels. These recorded who in the team had dispensed and checked the prescription. The pharmacy kept a record of the delivery of medicines to people. If the person was not at home the delivery driver left a note informing the person of the failed delivery. And returned the medication to the pharmacy. The pharmacy used a text messaging service to inform people when their medication was due to be delivered. This helped to reduce the number of failed deliveries.

The pharmacy obtained medication from several reputable sources The team members checked the expiry dates on stock but they didn't keep a record of this activity. The team members marked medicines with a short expiry date to prompt them to check the medicine was still in date. And the pharmacists checked the expiry date as part of the accuracy check of dispensed prescriptions. No out-of-date stock was found. The team checked and recorded fridge temperatures each day. A sample of these records found they were within the correct range. The pharmacy had medicinal waste bins to store out-of-date stock and patient returned medication. The pharmacy received alerts about medicines and medical devices from the Medicines and Healthcare products Regulatory Agency (MHRA) via email. The team usually printed off the alert, actioned it and kept a record.

Principle 5 - Equipment and facilities ✔ Standards met

Summary findings

The pharmacy has an adequate range of equipment to provide safe services. And it uses its facilities to suitably protect people's private information.

Inspector's evidence

The pharmacy had online references to provide the team with up-to-date clinical information. The pharmacy used CE equipment to accurately measure liquid medication. The pharmacy used a domestic fridge to store medicines kept at these temperatures. The computers were password protected and access to people's records restricted by the NHS smart card system. The pharmacy completed a backup of the computer each night to help secure the confidential information kept.

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.