

# Registered pharmacy inspection report

**Pharmacy Name:** Natures Best Pharmacy, C/O Wasdell Group  
Limited, 6 Stephenson Road, Groundwell Industrial Estate, Swindon,  
Wiltshire, SN25 5AX

**Pharmacy reference:** 9011577

**Type of pharmacy:** Internet / distance selling

**Date of inspection:** 04/10/2023

## Pharmacy context

This pharmacy is in a warehouse on an industrial estate in Swindon. It is not open to the public as it provides its services online. It only sells P medicines online and delivers them to people in the United Kingdom.

## 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 has satisfactory written procedures to help make sure the team works safely. It has procedures in place to record and review mistakes when they happen. The pharmacy asks its customers and staff for their views and uses this to help improve services. It manages and protects people's confidential information, and it tells people how their private information will be used. The pharmacy has appropriate insurance cover in place to protect people when things do go wrong.

### Inspector's evidence

The pharmacy did not keep a near miss log, but the pharmacist explained that she would start one of these to monitor any possible selection errors with P medicines. A barcode scanning system was used in the dispensing and packing process which mitigated the risk of errors. There was a process in place to record any dispensing incidents, and this included a root cause analysis of what had happened as part of the error investigation.

There was an established workflow in the pharmacy where the printing of orders, product selection and clinical checking activities were carried out. Each questionnaire sheet that the pharmacist had printed had an audit trail of the name of the checking pharmacist and the batch number and expiry date of the product supplied.

Standard operating procedures (SOPs) were in place for the services provided and these were reviewed every two years. The pharmacist kept an organisational chart in the pharmacy which detailed the different roles and responsibilities of staff in the company. There was a complaints procedure in place and the pharmacist was clear on the processes she should follow if she received a complaint. People could submit feedback via the company website or via Trustpilot. Lamberts Healthcare Limited was a subsidiary of The Proctor and Gamble Company. A letter dated 28th September 2023 was seen in the pharmacy which confirmed that public liability and indemnity insurance was provided for by Proctor & Gamble Company.

A responsible pharmacist (RP) record was kept and an RP notice was displayed in pharmacy. Date checking was carried out in a manner which meant the whole stock was date checked regularly. The barcode scanner also checked medicines as they were packed.

Any confidential waste was separated from general waste and disposed of appropriately. An information governance policy (IG) was in place and the pharmacist had completed training on the General Data Protection Regulation (GDPR). There was a safeguarding policy in place at the pharmacy. The pharmacist was aware of the signs to look out for that may indicate safeguarding concerns in vulnerable adults. The pharmacist knew how to access contact details to raise safeguarding concerns if necessary.

## Principle 2 - Staffing ✓ Standards met

### Summary findings

The pharmacy has just one member of staff, the pharmacist, to manage its workload. She keeps up to date with training and uses her professional judgement to decide whether it is safe to supply medicines. The pharmacist is comfortable about providing feedback and raising concerns and is involved in improving pharmacy services.

### Inspector's evidence

There was one pharmacist present during the inspection. She was the only member of staff that worked in the pharmacy at the time of the inspection. She explained that plans were in place to train more staff to work in the pharmacy as the workload increased.

The pharmacist reported that she had completed training and had regular updates to their knowledge and understanding of the services and medicinal products provided. The pharmacist also used third party materials, such as pharmacy magazines, as reading material to learn from. Recently, the pharmacist was in the process of introducing new P medicine sales online, including one that was used to treat post-menopausal symptoms in women.

Meetings between the pharmacist and superintendent pharmacist were held weekly and details of these were documented and kept in the pharmacy. The pharmacist explained that they felt comfortable with raising any concerns they had with the superintendent pharmacist. The pharmacist had completed a temperature mapping test for a container that had been sent to an address in Kent and another address in Scotland. This was due to concerns about medicine stability during delivery. There was a whistleblowing procedure in place at the pharmacy. There were no formalised targets in place at the pharmacy.

## Principle 3 - Premises ✓ Standards met

### Summary findings

The pharmacy provides a safe and appropriate environment for the provision of pharmacy services. The pharmacy team protects people's private information. The pharmacy is secure and protected from unauthorised access.

### Inspector's evidence

The pharmacy was secured from unauthorised access. It was clean, bright and well maintained. It was cleaned weekly. P medicines were well organised and in alphabetical order. The pharmacy website included contact information for the pharmacy. The website was set up so that it checked people's names on the order so that multiple orders by the same person would be flagged up to the pharmacist. The ambient temperature and lighting throughout the pharmacy was appropriate for the delivery of pharmaceutical services. There were hand washing facilities available on-site.

## Principle 4 - Services ✓ Standards met

### Summary findings

The pharmacy's services are accessible, effectively managed and delivered safely. The pharmacy obtains, stores and manages medicines safely and ensures that all of the medicines it supplies are fit for purpose. The pharmacy team takes appropriate action where a medicine is not fit for purpose.

### Inspector's evidence

The online pharmacy services were not physically accessible to people using the pharmacy. Information about the medicines provided was on the pharmacy website. All medicines were delivered by post and required signatures on arrival. The pharmacist processed anywhere between 2 to 20 orders per day.

The pharmacy's website provided details about some ailments and recommended medicines which may be able to treat them. Orders for online sales of medicines were printed and the pharmacist selected stock against these. The pharmacy-only medicines were then checked by the pharmacist using the questionnaire that people had submitted online. Once these had been authorised, the medicines were then scanned and packed. Orders which were placed within 30 days of a previous order were flagged to the pharmacist.

The pharmacist had an awareness of the strengthened warnings and measures to prevent valproate exposure during pregnancy. The pharmacy used recognised wholesalers such as AAH and Alliance Healthcare to obtain medicines and medical devices. Invoices from some of these wholesalers were seen. Designated waste bins were available if required. Medicines and medical devices were stored in an organised fashion within their original manufacturer's packaging. Pharmaceutical stock was subject to date checks which were documented and up to date. Short-dated products were appropriately marked. The fridges were in good working order and the stock inside was stored in an orderly manner. MHRA alerts came to the pharmacy electronically and the pharmacist explained that these were actioned appropriately. But these did not contain audit trails. The pharmacist agreed to address this.

## Principle 5 - Equipment and facilities ✓ Standards met

### Summary findings

The pharmacy has access to the appropriate equipment and facilities needed to provide the services it offers. These are used in a way that helps protect patient confidentiality and dignity.

### Inspector's evidence

Electrical equipment appeared to be in good working order and was PAT tested annually. Pharmacy equipment was seen to be stored securely from public access. Reference sources were available in the dispensary, including a BNF, a BNF for Children and a Drug Tariff. Internet access was also available should the staff require further information sources.

Designated bins for storing waste medicines were available for use and there was enough space to store medicines. The computers were all password protected and patient information was safeguarded.

### 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.  |