

Registered pharmacy inspection report

Pharmacy Name:Prescriptions4u, Unit C, Broxtowe Business Park,
Calverton Drive, Nottingham, Nottinghamshire, NG8 6QP

Pharmacy reference: 9011681

Type of pharmacy: Internet / distance selling

Date of inspection: 01/04/2022

Pharmacy context

This is a distance-selling pharmacy based in a business unit. The pharmacy delivers medicines to people's homes. The pharmacy mainly supplies medicines in original packs to people in the community. Other services provided include supplying medicines in multi-compartment compliance packs to people.

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 identifies and manages the risks associated with the provision of its services. Its team members have defined roles and accountabilities. And 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) that had been read and signed by the team. Staff could explain how to dispense medicines safely. Staff were aware that prescriptions had a six-month validity from the date on the prescription apart from some controlled drugs (CDs) which had a 28-day validity.

The pharmacy had processes 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 discussed with the member of staff at the time and were then recorded in the near miss log. Because of the small number of near misses there weren't any trends and patterns to review.

The pharmacy adequately maintained all the necessary records to support the safe delivery of pharmacy services. These included the responsible pharmacist (RP) log, the CD registers and the private prescription record. The pharmacy displayed who the RP in charge of the pharmacy was. There were regular audits of CD running balances. The pharmacy had a register for recording patient-returned CDs but had not yet received any. There was a complaints procedure in place. The pharmacy had an information governance policy. Access to the electronic patient medication record (PMR) was password protected. Confidential paperwork was stored and destroyed securely. Professional indemnity insurance was in place. The pharmacist understood safeguarding requirements but had not looked for contact details for the local safeguarding team. He explained how he had recently raised a safeguarding concern with a surgery about a person who was not regularly taking their medicines.

Principle 2 - Staffing ✓ Standards met

Summary findings

The pharmacy's team members adequately manage the workload within the pharmacy. They are suitably trained for the roles they undertake. Team members are supported in their development and can raise concerns if needed

Inspector's evidence

During the inspection the pharmacy team adequately managed the day-to-day workload. There was one pharmacist and one qualified dispenser. The pharmacy also had one dispenser who was training but was not present. The qualified dispenser was about to start a NVQ III pharmacy technician course. She said that he felt supported by the pharmacist. Because it was a small team, staff discussed any issues informally on a daily basis.

Principle 3 - Premises ✓ Standards met

Summary findings

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

Inspector's evidence

The pharmacy was situated in a business unit. The pharmacy had adequate heating and lighting and there was hot and cold water available. It was a reasonable size for the services available. The pharmacy was able to prevent unauthorised access during working hours and when the pharmacy was closed. The pharmacy had Covid-19 protocols in place. There was sufficient space for staff to work more than a metre apart and there was hand sanitiser available.

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 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.

Inspector's evidence

The pharmacy was a distance-selling pharmacy and there was no public access to the pharmacy. The pharmacist understood the signposting process and used local knowledge to direct people to local health services.

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 explained that he knew most of the people who used his service by name. He gave them advice when they had a new medicine or if their dose changed. For people who took warfarin the pharmacy checked their INR levels were appropriate and that people taking methotrexate had regular blood tests. The pharmacy used a dispensing audit trail which included use of 'dispensed by' and 'checked by' boxes on the medicine label to help identify who had done each task. Baskets were used to keep medicines and prescriptions for different people separate to reduce the risk of error.

The pharmacy supplied medicines in multi-compartment compliance packs to people living in the community who needed help managing their medicines. It had processes in place to make sure people got their medicines in a timely manner. Most of the compliance packs seen recorded the colour and shape of the medicines but some didn't. This meant that people would find it harder to identify the medicines. Patient information leaflets (PILs) weren't sent each time the medicine was supplied. The pharmacist said that he would make sure that PILs were supplied every time a medicine was sent and that all packs had medicine identifiers recorded.

Medicines were mainly stored tidily on shelves in their original containers. There were some brown bottles containing medicines popped out of their foil blisters by mistake when assembling multi-compartment compliance packs. The labels on the bottles recorded the name of the product but not always the expiry date, batch number or date they were popped. The pharmacist put these bottles in the destruction box and said he would record those details going forward so that the medicines could be used safely. There were date-checking records available. A quick check of stock medicines didn't find any that were out of date. Opened bottles of liquid medications were not always marked with the date of opening which could make it harder for staff to know if they were still suitable for use. The pharmacist said he would make sure the opening date was always recorded. CDs were stored appropriately. The fridge was a little small for the amount of stock held that required cold storage. The pharmacist said that he was getting a bigger fridge. A record of invoices showed that medication was obtained from licensed wholesalers.

The pharmacist had a process for managing drug alerts. The pharmacy delivered medications to some people. The pharmacist delivered the medicines to people himself. This gave him the opportunity to give any advice that was required and answer any queries anybody had about their medicines.

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. The pharmacy had up-to-date reference sources. Records showed that the fridge was in working order and stored medicines within the required range of 2 and 8 degrees Celsius. The pharmacy had an arrangement to have its portable electronic appliances tested annually. Equipment seen 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.