

Registered pharmacy inspection report

Pharmacy Name: Well, Unit 15, Station Concourse, Euston Station,
London, NW1 2DU

Pharmacy reference: 9011730

Type of pharmacy: Community

Date of inspection: 20/09/2023

Pharmacy context

The pharmacy is co-located with WH Smith on the concourse of Euston Station in northwest London. It offers a 'click and collect' service for dispensing prescriptions. Travel clinic and seasonal flu vaccinations are available and a range of over-the-counter medicines are for sale. This was the first inspection after the pharmacy had been approved for registration.

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's working practices are generally safe and effective. Members of the team follow clearly written instructions to help them manage risks and work safely. They are clear about their roles and responsibilities. The pharmacy's team members compile and share a regular safety report to learn from their mistakes and take action to stop the same mistakes happening again. The pharmacy keeps the records it needs to by law. The pharmacy team members protect people's privacy and understand how they can safeguard the welfare of vulnerable people.

Inspector's evidence

The pharmacy had systems to record and review near misses and mistakes. And the responsible pharmacist (RP) compiled a monthly patient safety report (PSR) which was shared with the pharmacy team to learn from mistakes and reduce the chances of them happening again. The pharmacy recorded adverse events on Datix which is a Risk Management Information System. The RP was aware of 'lookalike and soundalike' (LASA) medicines but explained that medicines stock was generally low, so similar medicines were separated from each other in the dispensary. The pharmacy had baskets to separate each person's medication if making up supplies of medicines. And the RP could input the required information on to a free text label to attach to the medicine prior to supply.

The pharmacy had standard operating procedures (SOPs) for most of the services it provided, and these included the responsible pharmacist SOPs. Members of the pharmacy team knew what they could and could not do, what they were responsible for and when they should refer to the RP. And their roles and responsibilities were described within the SOPs. A team member explained that they would not sell medicines if a pharmacist was not present. And they would refer repeated requests for the same or similar products, such as medicines liable to misuse, to a pharmacist. The pharmacy had a complaints procedure. And people could complete a form to report feedback. The pharmacy offered a range of vaccinations which were administered via patient group directions (PGDs) underpinned by SOPs. Members of the pharmacy team were required to read and sign the SOPs relevant to their roles to show they understood them and would follow them. And they re-trained when procedures were updated.

People could use the Well App to request their prescriptions which were dispensed offsite at another branch and transferred to this pharmacy ready for collection. The pharmacy stored bagged prescriptions securely and people were notified when their medicines were ready to collect. The pharmacy team members followed SOPs at both pharmacies which set out the process including time frames, identity checks, completing owings, counselling and what to do if prescriptions were not collected. The RP maintained records and an audit trail of these prescriptions in a 'click and collect' folder. Some high-risk medicines, such as controlled drugs (CDs) were not supplied via 'click and collect' method.

The pharmacy displayed a notice that told people who the RP was and kept a record to show which pharmacist was the RP and when. The pharmacy had a folder which contained records for RP, safety, cleaning and product recalls. The pharmacy kept records for all the services it provided electronically and on paper. And it maintained a folder for each service on the pharmacy computer, such as for

chicken pox vaccination, click and collect service, flu vaccination and blood pressure monitoring. People accessing services completed a pre-consultation form which included medical history and medicines. The RP screened the form and got patient consent to check the summary care record (SCR) to clarify information. Once the patient record was confirmed, the RP ordered stock ahead of the appointment. The pharmacy maintained a stock of some vaccinations to be able to offer a 'walk-in' service. The pharmacy had appropriate insurance arrangements in place, including professional indemnity, for the services it provided.

The pharmacy was registered with the Information Commissioner's Office. Displaying a notice that told people how their personal information was gathered, used and shared by the pharmacy team was discussed. The pharmacy team members tried to make sure people's personal information could not be seen by other people and was disposed of securely. The pharmacy had a safeguarding SOP. And the RP had completed a level 3 safeguarding training course. Members of the pharmacy team knew what to do or who they would make aware if they had concerns about the safety of a child or a vulnerable person. The RP was signposted to the NHS safeguarding App.

Principle 2 - Staffing ✓ Standards met

Summary findings

The pharmacy's team members work well together to manage the workload. They have regular reviews and access to training activities to support learning and developing skills. And to help make sure they provide safe services.

Inspector's evidence

The pharmacy team consisted of three full-time pharmacists, and six part-time healthcare assistants who were enrolled or had completed accredited training. The RP had completed training in practical skills to deliver the pharmacy's vaccination services. The RP was supported by a healthcare assistant at the time of the visit. The RP supervised and oversaw the supply of medicines and advice given by the pharmacy team. The pharmacy had an over-the-counter (OTC) sales and self-care SOP which its team needed to follow. This described the questions the team member needed to ask people when making OTC recommendations. And when they should refer requests to a pharmacist. A sales protocol was displayed at the counter for easy reference. The pharmacy team members were supported with keeping their knowledge up to date and were provided training resources which were appropriate to their roles. And team members were allocated protected learning time on a daily basis. The RP maintained training records for team members and monitored their development in their roles at six monthly reviews and regular one-to-one meetings. The pharmacy team communicated with each other via a WhatsApp group. They were comfortable about making suggestions on how to improve the pharmacy and its services. They knew who they should raise a concern with if they had one. The RP was signposted to the GPhC Knowledge Hub.

Principle 3 - Premises ✓ Standards met

Summary findings

The pharmacy's premises are bright and clean and provide a professional environment for people to receive healthcare. The pharmacy is secured when it is closed to protect people's private information and keep the pharmacy's medicines safe.

Inspector's evidence

The registered pharmacy premises were bright, clean and secure. And steps were taken to make sure the pharmacy and its team did not get too hot. The pharmacy had a retail area, a medicines counter and a consultation room which was signposted and displayed the chaperone policy. So, people could have a private conversation with a team member. Members of the pharmacy team kept the pharmacy's premises clean and tidy. People could book appointments for services via the website and complete a form in advance with information such as identity, age and consent.

Principle 4 - Services ✓ Standards met

Summary findings

The pharmacy opens early and closes late to help a wide range of people to access its services. Especially people with different needs or those who catch trains at different times. Its working practices are safe and effective. And it obtains its medicines from reputable sources so they are fit for purpose. Pharmacy team members store medicines securely and keep records to show medicines are kept at the right temperature and safe to use. The team know what to do if any medicines or devices need to be returned to the suppliers.

Inspector's evidence

The pharmacy floor was level with the WH Smith's premises and the station concourse. This made it easier for people who used a wheelchair to get to the pharmacy. The pharmacy had a notice that told people when it was open. Members of the pharmacy team were helpful. They took the time to listen to people. So, they could advise and help them. And they signposted people to another provider if a service was not available at the pharmacy. To assist people whose first language was not English, the team could use 'Google translate' or ask if any members of staff in WH Smith could translate with the person's consent.

The pharmacy offered a 'click and collect' service for people's repeat prescriptions. People could order their prescriptions online to be dispensed at another branch of the pharmacy and collected from this pharmacy. The person was notified when their prescription was delivered to this pharmacy ready for collection. The pharmacy maintained an audit trail of the prescriptions and uncollected prescriptions were returned to the other branch of the pharmacy. The RP followed an SOP for transferring a prescription to people at Euston Station. It described giving appropriate counselling including for high-risk medicines such as valproates.

People booked appointments for services via the website and completed a pre-consultation form which included their medical history and any medicines they used. The RP could check the SCR with the person's consent and then order any stock required for the selected service. The pharmacy did keep stock of more popular lines to facilitate 'walk-in' appointments. Services were mainly for vaccinations which were administered via PGD. People were advised about follow-up vaccinations. The administration of a vaccine was recorded online on Sonar or PharmOutcomes and a paper record was retained securely. People who accessed the blood pressure monitoring service were asked for consent to share results with their usual doctor. PGDs and SOPs were available on the pharmacy computer system.

The pharmacy used recognised wholesalers to obtain its pharmaceutical stock. It kept its medicines and medical devices in their original manufacturer's packaging. The pharmacy team regularly checked the expiry dates of medicines. The pharmacy stored its stock, which needed to be refrigerated, between two and eight degrees Celsius. The pharmacy had procedures for dealing with obsolete medicines which were kept separate from stock. The pharmacy had a procedure for dealing with alerts and recalls about medicines and medical devices. And the RP described the actions they took and demonstrated what records they kept when the pharmacy received a concern about a product. Information about alerts and recalls was recorded on the PSR.

Principle 5 - Equipment and facilities ✓ Standards met

Summary findings

The pharmacy has the equipment and facilities it needs for the services it offers. The pharmacy uses its equipment appropriately to keep people's private information safe.

Inspector's evidence

The pharmacy had a plastic screen on its counter. And there were hand sanitisers for people to use. The pharmacy team had access to up-to-date reference sources. The pharmacy had a refrigerator to store pharmaceutical stock requiring refrigeration. And its team regularly checked the maximum and minimum temperatures of the refrigerator. The adrenaline injection devices for use in the event of anaphylaxis were in date. And there was a clinical waste bin to dispose of clinical waste from services.

The team disposed of confidential waste appropriately. The pharmacy restricted access to its computer system. And only authorised team members could use them when they put in their password. The pharmacy positioned its computer screens so they could only be seen by a member of the pharmacy team.

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.