General Pharmaceutical Council

Registered pharmacy inspection report

Pharmacy Name: Festival Pharmacy, The Medical Centre,

Glastonbury Festival site, Worthy Far, Worthy Lane, Pilton, Shepton Mallet, Somerset, BA4 4BY

Pharmacy reference: 9011883

Type of pharmacy: Festival / Temporary

Date of inspection: 20/06/2023

Pharmacy context

The pharmacy is located within the field medical centre on the Glastonbury festival site. The pharmacy dispenses private prescriptions and sells medicines for a range of common ailments. Pharmacist independent prescribers write prescriptions for people who require short-term treatment such as antibiotics and for those who may not have their regular medicines with them.

Overall inspection outcome

✔ **Standards met**

Required Action: None

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Summary of notable practice for each principle

Principle	Principle finding	Exception standard reference	Notable practice	Why
1. Governance	Standards met	1.1	Good practice	The pharmacy provides its services safely and effectively. It has good systems in place to identify and manage the risks associated with its services.
		1.8	Good practice	The pharmacy works closely with other healthcare professionals at the medical centre to ensure the safety and wellbeing of its users.
2. Staff	Standards met	2.2	Good practice	All team members have a structured induction to prepare them to work at the pharmacy.
		2.5	Good practice	All team members are encouraged to give feedback on their experiences of working at the pharmacy. And they are confident to share ideas for improvement and discuss concerns.
3. Premises	Standards met	N/A	N/A	N/A
4. Services, including medicines management	Standards met	4.1	Good practice	The pharmacy makes sure that people with different needs can access its services. The pharmacy team work well with other healthcare professionals on site to ensure people are given the medicines and support they need.
		4.2	Good practice	The pharmacy routinely ensures that supplies of medicines are safe and appropriate for the person requesting them.
5. Equipment and facilities	Standards met	N/A	N/A	N/A

Principle 1 - Governance ✔ Standards met

Summary findings

The pharmacy provides its services safely and effectively. It has good systems in place to identify and manage the risks associated with its services. Pharmacy team members analyse the cause of any incidents and errors made. And they share learnings with the wider team and other healthcare professionals they are working closely with. The pharmacy has written procedures in place to help ensure that its team members work safely. And these procedures are reviewed and updated regularly. The pharmacy proactively asks people for their feedback on its services and responds appropriately. It has the required insurance in place to cover its services. And it keeps all the records required by law. The pharmacy keeps people's private information safe. The pharmacy offers good advice to people to help keep themselves safe at the festival. And they refer people to other healthcare services for a wide range of support when a need is identified.

Inspector's evidence

The pharmacy was a temporary pharmacy located in the field medical centre at Glastonbury festival. In 2023, the pharmacy was operational from Wednesday 22nd July to Monday 26th July. Over 200,000 people attended the festival during this period. The pharmacy dispensed private prescriptions written by healthcare professional at the medical centre and by in-house pharmacist independent prescribers.

The pharmacy had robust processes in place to identify, manage and reduce its risks. It had standard operating procedures (SOPs) which reflected the way the team worked. The SOPs were printed and stored in a folder. Each team member had a record of the SOPs that they had read. The superintendent pharmacist (SI) had reviewed each SOP before the festival to ensure they were still appropriate. The pharmacy team could describe the activities that could not be undertaken in the absence of the responsible pharmacist (RP). Team members had clear lines of accountabilities and were clear on their job role. The pharmacy had risk assessments in place to cover its activities.

The pharmacy analysed any incidents or mistakes made during the dispensing process in depth. There had been no errors made during the current festival. But when incidents or errors occurred, they were discussed with all team members and action was taken to prevent a reoccurrence. The company carried out a full review of all services provided at the end of the festival and circulated the outcomes to all team members who had worked at the pharmacy. Following a review of the previous year's festival, the company sent the pharmacy's SOPs to all team members by electronically in advance of the opening date. This had allowed them to monitor whether each team member had read and understood them in advance and to answer any queries they had. The pharmacy team worked closely with a range of other healthcare professionals at the field medical centre. And they openly shared learnings from any incidents.

The pharmacy had a documented procedure in place for handling complaints. They were dealt with by the pharmacists on duty and escalated to the company director as needed. The pharmacy proactively sought feedback from people accessing its services. Team members asked people waiting in the queue for their feedback and responded appropriately. All team members were asked to give feedback about their experiences of working at the pharmacy when the festival was over. The company then reviewed all this feedback to inform any changes which may be beneficial at future festivals.

The pharmacy kept a record of who had acted as the RP for each shift. The correct RP notice was prominently displayed. Controlled drug (CD) registers were in order. Balance checks were completed regularly and any discrepancies were promptly rectified. A random balance check was accurate. Patient returned CDs were recorded in a separate register. Records of private prescriptions were maintained on the patient medication record (PMR) system and contained all legally required details.

All team members had completed training on information governance and general data protection regulations. Patient data and confidential waste were dealt with in a secure manner to protect privacy and no confidential information was visible from customer areas.

All team members were trained to an appropriate level on safeguarding. Every pharmacist had completed the Centre for Postgraduate Pharmacy Education (CPPE) level 2 safeguarding training. The pharmacy worked closely with the field medical centre safeguarding champion, who was easily accessible and available to provide any required support. The pharmacy displayed a range of posters giving information about how people could protect themselves at the festival. And team members referred people to other healthcare providers, such as mental health support, when a need was identified. The pharmacy also had the contact details of other support agencies off site and referred people to them if needed.

Principle 2 - Staffing ✔ Standards met

Summary findings

The pharmacy employs enough people to manage its workload. Team members are well-trained to deliver their roles and receive a thorough induction before the pharmacy opens. They are confident to suggest and make changes to the way they work to improve their services. Team members communicate effectively. And they work well together to deliver the pharmacy's services.

Inspector's evidence

The pharmacy was one of two operating at Glastonbury festival. Both were owned by the same company. Around 30 pharmacists were employed to work shifts at both pharmacies. There were also a number of pharmacy technicians, dispensers and administrative team members available to cover shifts.

The pharmacy was open 24 hours a day from the Wednesday to the following Monday. Pharmacists generally worked two eight-hour shifts over the course of the festival. A pharmacist independent prescriber was generally allocated to work on each shift. In total, there were usually four pharmacists on duty for each shift. But this was increased during busy times if needed. Team members felt that they could comfortably manage the workload. At each shift changeover, there was a handover meeting to ensure the new team were aware of any issues.

Each team member was given a full induction before commencing work. They were sent the SOPs electronically in advance and were required to confirm that they had read and understood them. The company ran a training session prior to opening to ensure all team members knew how to operate the PMR system and other technology.

Team members were encouraged to give ad hoc feedback about how the pharmacy operated. And they felt that their opinions and suggestions were well received by the company. The team worked well together and supported each other. They were asked to give feedback about their experiences after the festival to see how operations could be improved in the future. When asked, team members knew how to raise concerns.

Each team member was clear on their roles and responsibilities. They were not put under any pressure to complete tasks that they were not comfortable with. For example, independent prescribers were strongly encouraged to only prescribe within their scope of practise. No targets were set.

Principle 3 - Premises ✔ Standards met

Summary findings

The pharmacy's premises present a professional image to people and are properly maintained. The pharmacy has appropriate facilities to provide its services and protect people's privacy and confidentiality.

Inspector's evidence

The pharmacy was a purpose built portacabin at the field medical centre of Glastonbury Festival. The company had completed a health and safety audit and risk assessment prior to opening.

The public could not enter the pharmacy and were served through hatches. One of these was reserved for conversations that required more privacy. If needed, team members could use a consulting space in the field hospital to have conversations with people. All medicines were stored out of reach of people using the pharmacy and were not able to be self-selected. Computer screens were positioned in such a way that no information could be seen by people outside the pharmacy. And no confidential information was visible to people using the pharmacy.

The pharmacy was well organised and tidy. There was plenty of shelving and workbench space. The premises appeared clean and hygienic, including the dispensary sink. The premises were cleaned regularly throughout the day. Heating, lighting and ventilation in the pharmacy were satisfactory and the dispensary temperature was below 25°C. There was an air-conditioning unit which was used on warmer days.

Principle 4 - Services ✔ Standards met

Summary findings

The pharmacy makes sure that people with different needs can access its services. The pharmacy team work well with other healthcare professionals on site to ensure people are given the medicines and support they need. And they take appropriate action to ensure that supplies of medicines are suitable for the person requesting them. The pharmacy obtains its medicines from reputable suppliers. It stores them securely and makes regular checks to ensure that they are still suitable for supply. The pharmacy accepts unwanted medicines and disposes of them appropriately.

Inspector's evidence

The pharmacy was well advertised. Pre-event information sent to people attending contained details of how to access pharmacy services. Festival staff could assist people with disabilities who needed to access the pharmacy's services by transporting them if needed. The pharmacy produced large print labels for people who were visually impaired. The pharmacy displayed posters with information to help people remain safe and well whilst at the pharmacy.

The pharmacy dispensed private prescriptions. These were written by either healthcare professionals from the medical centre or by pharmacist independent prescribers (PIPs) at the pharmacy. Each prescription was written using triplicate paper. One copy was retained by the pharmacy. The second was sent to the hospital and the third was given to the patient, with the advice that it should be given to their GP practice. The pharmacy kept a list of all the medical prescribers' details and signatures for reference.

The pharmacy did not have an NHS contract and could not access the NHS spine. If people requested a prescription for a regular medication that they had forgotten to bring or misplaced, the pharmacy required evidence of prescribing. This was most frequently done by the patient accessing their data on the NHS app. The PIPs did not issue prescriptions for controlled drugs or high-risk medicines. Any requests for these were referred to the field hospital. PIPs ensured that they prescribed within their scope of practise. Most requests were for medicines such as inhalers, blood pressure medicines and antibiotics.

The pharmacy team gave additional advice to people receiving high risk medicines. They were aware of the risks associated with people becoming pregnant whilst taking sodium valproate as part of the Pregnancy Prevention Programme (PPP). The pharmacy team took care not to apply labels over the warning cards on the boxes of valproate products when dispensing.

The pharmacy had agreed a formulary with the field medical prescribers. So this meant that they prescribed medicines that were likely to be in stock. But if the medicine was not in stock, the pharmacy could order it from the wholesaler for next day delivery. They could order up until Friday evening for delivery on the Saturday. Any drug recalls and alerts received would be actioned promptly and records would be maintained.

The pharmacy had a clear flow to ensure prescriptions were dispensed safely. Each dispensed item was checked by a pharmacist and the labels initialled to create an audit trail. The pharmacy stock was stored on shelving units. All stock had been date-checked prior to the pharmacy opening. The temperature of

the fridge was regularly monitored and records were retained. Controlled drugs were stored in accordance with legal requirements in a cabinet that had been approved by the local police force.

The pharmacy kept a range of medicines that could be purchased over the counter. The pharmacy team checked weather forecasts in advance to see what type of medicines would be requested to ensure they had adequate supplies. The pharmacy also held supplies of condoms and emergency contraceptives.

Principle 5 - Equipment and facilities ✔ Standards met

Summary findings

The pharmacy has the appropriate equipment and facilities to provide its services. It keeps these clean, tidy and well-maintained. The pharmacy uses its equipment in a way that protects people's confidential information.

Inspector's evidence

The pharmacy had up-to-date reference resources available including the British National Formulary (BNF). Team members had access to the internet to support them in obtaining current information. The pharmacy's computer system was password protected. And information displayed on computer monitors was suitably protected from unauthorised view.

The pharmacy had clean equipment available for counting and measuring medicines. The dispensary fridge was clean and properly maintained. Electrical equipment was visibly free of wear and tear and in good working order.

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.