

# Registered pharmacy inspection report

**Pharmacy Name:** The Fitzrovia Hospital Pharmacy, 13-14 Fitzroy Square, London, W1T 6AH

**Pharmacy reference:** 9011962

**Type of pharmacy:** Hospital

**Date of inspection:** 11/07/2023

## Pharmacy context

This pharmacy is located within an independent hospital in central London. The hospital provides private healthcare services. The pharmacy's main activities are providing medicines for the hospital and its patients, and it supports the provision of clinical trials which are operated from a unit on the same site. These activities are monitored by other healthcare regulators. The pharmacy is registered with the General Pharmaceutical Council so it can dispense occasional prescriptions issued by external prescribers or clinics which are not part of the hospital services.

## 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 suitably manages the risks associated with its services. It has written procedures explaining its operational activities, and it keeps the records it needs to by law. The pharmacy keeps people's confidential information secure, and pharmacy team members understand their role in protecting vulnerable people. And it has systems to record and review any errors so the team can learn from them.

### Inspector's evidence

The pharmacy first started operating in the autumn of 2022. It had standard operating procedures (SOPs) covering the main activities. Files of paper-based SOPs were available for reference in the pharmacy. Training logs showed that team members had read and accepted them. Other hospital policies were available electronically.

The hospital had a complaints procedure, so people were able to raise concerns. The pharmacy had a digital system for recording mistakes made during the dispensing process which encouraged reflection and learning. Records were collated for the whole site and discussed at clinical governance meetings.

Professional indemnity for pharmacy activities was covered under the hospital insurance policy. A responsible pharmacist (RP) notice was displayed identifying the pharmacist on duty and the pharmacy maintained an electronic RP log. Entries identified the pharmacist on duty but the time the duties ceased was not routinely recorded although this was required by the regulations. The pharmacist agreed to review the end of the day processes to make sure this was rectified. The team recorded prescription supplies using a patient medication record system (PMR). Private prescription records were captured on the system. A sample of records checked contained all the required details. Prescriptions were filed in date order and retained for two years. The pharmacy had not supplied any unlicensed medicines or controlled drugs (CDs) under its GPhC regulated activities, so these records were not checked.

Confidentiality and data protection training was mandatory for all hospital staff. The pharmacy's privacy policy was available on the hospital's website. Confidential material was stored securely, and confidential waste was segregated prior to removal and disposal by suitable waste contractors. The pharmacist had completed safeguarding training and explained how they would report any concerns about vulnerable people through the appropriate channels within the hospital.

## Principle 2 - Staffing ✓ Standards met

### Summary findings

The pharmacy has enough staff to deliver the services it provides. All team members have professional qualifications relevant to their role. The pharmacist can raise concerns and contribute ideas to support the safe running of the pharmacy.

### Inspector's evidence

The pharmacist was working alone in the dispensary. The workload was easily manageable. A second pharmacist was usually working but they had recently left the business. Recruitment for a replacement was due to commence. The pharmacist explained that locum pharmacists could be requested to provide cover for any absences during the intervening period. Otherwise, the two regular pharmacists usually planned absences so they were not off at the same time. The pharmacist could contact members of the wider clinical team for advice and support if needed, and they had the opportunity to attend wider team meetings. The hospital had mechanisms so staff could report whistleblowing concerns.

## Principle 3 - Premises ✓ Standards met

### Summary findings

The pharmacy is bright, clean and professional in appearance. It provides a suitable environment for the services it offers.

### Inspector's evidence

The pharmacy was located on the ground floor. It consisted of a small room with dispensing, storage and administration areas. It was bright, clean, and suitably well maintained. Work areas were clear. The room temperature was controlled. Staff had access to handwashing facilities.

People were greeted at a hatch in the pharmacy door. People could wait in the hospital reception area and the pharmacist often attended and handed out medicines to people there. The pharmacy did not have a dedicated consultation room, but the pharmacist could use one of the hospital's consultation rooms if needed. The pharmacy was secured when closed and out of hours access was not permitted.

## Principle 4 - Services ✓ Standards met

### Summary findings

The pharmacy provides its services safely. It obtains medicines from licensed suppliers, and it carries out checks to make sure that they are kept in good condition and are suitable to supply.

### Inspector's evidence

There was a ramp at the entrance. Access to the main building was restricted by means of an intercom system and security door. Reception staff could direct people and signage indicated the location of the pharmacy on the ground floor.

Prescriptions supplies were screened, assembled and checked by the pharmacist. Medicines were appropriately labelled, and patient information leaflets were routinely supplied. Most medication was supplied in original packs. The pharmacy supplied less than 20 external prescriptions each week. These were generally presented as walk-ins so collected by the patient themselves. Most prescriptions were for patients attending external clinics that operated on an occasional basis from the hospital's consultation rooms. The pharmacist handed out all prescription medication so there was an opportunity to provide people with advice. They were aware of the risks and requirements associated with taking valproate during pregnancy.

The pharmacy sourced its medicines from licensed suppliers. The stock holding was fairly small. Medicines were stored in lockable cupboards. The cupboards were sometimes over full and untidy. But the pharmacist was in the process of reorganising them and had requested additional cabinets to be installed. The pharmacy had a date checking system. CDs were stored in accordance with the regulations. Pharmaceutical waste was stored separately and collected periodically for disposal by an authorised contractor. The pharmacy received email drug and device alerts and recalls, and there was an internal process for logging these.

## Principle 5 - Equipment and facilities ✓ Standards met

### Summary findings

Members of the pharmacy team have the equipment and facilities they need for the services they provide. Equipment is appropriately maintained so that it is safe to use, and it is used in a way that protects privacy.

### Inspector's evidence

The pharmacist had access to relevant reference sources including the British National Formularies, and they had access to the internet. The dispensary had several medical fridges, a sink, and a suitably secured CD cabinet. The fridge temperatures were monitored to make sure they were suitable for the storage of cold chain medicines. Most of the fridges were used for clinical trials storage but one was reserved for general use. The pharmacy computer terminal was located so it was not visible to members of the public. Computer systems were password protected. And the pharmacy had a dedicated telephone line, so people could make direct contact. All electrical equipment appeared to be 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.