

# Registered pharmacy inspection report

**Pharmacy Name:** Superdrug Pharmacy, Unit 66 - 78 Lower Precinct,  
Coventry, West Midlands, CV1 1DX

**Pharmacy reference:** 9012008

**Type of pharmacy:** Community

**Date of inspection:** 01/08/2023

## Pharmacy context

This community pharmacy is situated in a busy shopping centre in Coventry, West Midlands. It is open seven days a week. It sells a range of over-the-counter medicines and dispenses prescriptions. It offers New Medicine Service (NMS) checks, a needle exchange scheme, substance misuse treatment, sexual health services, the Community Pharmacist Consultation Service (CPCS), the Hypertension Case Finding Service and a prescription delivery service. It also supplies medicines in multi-compartment compliance packs and administers seasonal flu vaccinations.

## 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	1.8	Good practice	Team members understand their role in safeguarding vulnerable people. And they can demonstrate ways in which they keep people safe.
<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	4.1	Good practice	The pharmacy offers a wide range of services and these are tailored to the needs of the local community.
		4.2	Good practice	The pharmacy's services are well-organised and are provided by well-trained team members. People have good access to care and advice from the pharmacy.
<b>5. Equipment and facilities</b>	Standards met	N/A	N/A	N/A

## Principle 1 - Governance ✓ Standards met

### Summary findings

The pharmacy identifies its risks adequately and it monitors the safety of its services. It is proactive about protecting more vulnerable people. It has written procedures to help its team members deliver services safely and effectively. And it keeps the records it needs to show that medicines are supplied safely and legally to people. Team members protect people's private information appropriately.

### Inspector's evidence

The pharmacy had a range of current standard operating procedures (SOPs) for the services it provided. These were available electronically, and members of the pharmacy team had read the SOPs relevant to their roles and responsibilities. The pharmacy technician explained how the system required each team member to complete a knowledge check to confirm their understanding of the SOPs.

The company had systems to help make sure its branches operated safely and effectively. Company compliance checks were completed in the branches twice a year by an external auditor, and these were used to identify areas for improvement. The pharmacy had systems for recording and reviewing dispensing mistakes made during the dispensing process. Team members discussed learning points when they identified a mistake, and they reviewed their error records periodically to help identify any emerging trends and mitigate similar events from happening again. Team members were aware of the risks associated with look-alike and sound-alike medicines. And the company circulated regular communications to the branches to promote learning from significant incidents.

The pharmacy had current professional liability and public indemnity insurance. Records about controlled drugs (CDs) were kept in line with legal requirements. CD running balances were kept and audited regularly. A separate register was used to record patient-returned CDs. The stock of a CD chosen at random matched with the recorded balance in the register. Records about the responsible pharmacist (RP) were kept and the correct RP notice was displayed. Team members understood their roles and responsibilities. And they could explain the tasks they could or could not undertake in the absence of a pharmacist.

The pharmacy displayed its privacy policy to inform people how their personal information was managed. Private information was kept securely and prescriptions awaiting collection were stored appropriately. People's personal details were not visible to the public. Confidential waste was separated and placed in designated bags which were collected by a waste disposal company. Members of the pharmacy team used their own NHS smartcards to access electronic prescriptions. The pharmacy had a complaints procedure. The pharmacy technician said that she would always endeavour to resolve complaints in the pharmacy and where appropriate she would escalate complaints to the store manager of the superintendent's office.

The pharmacist on duty and the pharmacy technician had completed Level 2 training about safeguarding vulnerable people. A safeguarding SOP and contact details for local agencies to escalate any safeguarding concerns were available in the pharmacy. The pharmacy technician said that team members shared a good rapport with various local agencies including the local community drug team. The pharmacy had received several awards from Coventry city council for promoting positive change and caring for the wellbeing of their substance misuse clients and for their work in keeping

service users and homeless people safe.

## Principle 2 - Staffing ✓ Standards met

### Summary findings

The pharmacy has enough team members to manage its current workload adequately. Team members understand their roles and responsibilities and they are supported with training resources to help keep their skills and knowledge up to date.

### Inspector's evidence

At the time of the inspection, the pharmacy team consisted of a locum pharmacist, pharmacy technician, a trainee technician, and a medicine counter assistant. The pharmacy did not currently have a regular pharmacist. A pharmacy manager had been recruited and was due to start in post imminently. Team members worked well together, and they were managing their workload comfortably. The pharmacy technician was experienced and a long-standing team member. She demonstrated very good knowledge about the way the pharmacy operated and cooperated very well during the inspection.

Team members felt comfortable making suggestions or raising concerns with the area manager. The whistleblowing policy had been signed by all team members. The pharmacy technician said that the team were very well supported by their area manager. Team members were supported with on-going training which was provided through the company's training platform. There were targets in place, but the team members did not appear to be under any undue pressure to deliver these targets.

## Principle 3 - Premises ✓ Standards met

### Summary findings

The pharmacy's premises are fitted to a good standard. And they are professional in appearance and suitable for the provision of healthcare services.

### Inspector's evidence

The pharmacy's front fascia and its public facing areas were clean and well maintained. The retail area of the pharmacy was clean and spacious. It was kept clear of slip or trip hazards. There was enough storage and work bench space in the dispensary to allow safe working. The sink in the dispensary for preparing medicines was clean and it had a supply of hot and cold running water. There was adequate heating and lighting throughout the premises. The dispensary was separated from the retail area, and it afforded privacy for dispensing, and any associated conversations and telephone calls. A private signposted consultation room was available to enable people to have private conversations with team members. The room was kept clean and tidy. Team members had access to hygiene facilities. The premises were lockable and could be secured against unauthorised access.

## Principle 4 - Services ✓ Standards met

### Summary findings

Overall, the pharmacy manages its services well and its working practices are safe and effective, so people receive appropriate care and the support they need to use their medicines safely. People with different needs can access the pharmacy's services. The pharmacy gets its medicines from reputable sources, and it stores them safely. Team members take the right action in response to safety alerts so that people get medicines and medical devices that are fit for purpose.

### Inspector's evidence

The entrance to the pharmacy was step free. The retail area of the pharmacy was clear of slip or trip hazards and could accommodate wheelchairs and prams. There was seating available for customers. The pharmacy's opening hours and a list of the services available were advertised in-store. Team members used local knowledge to signpost people to other providers when a service required was not offered at the pharmacy.

The workflow in the dispensary was well organised. Team members used baskets during the dispensing process to prioritise workload and minimise the risk of medicines getting mixed up. 'Owing notes' were issued to people to keep an audit trail when prescriptions could not be supplied in full when first dispensed.

Dispensed multi-compartment compliance packs checked during the inspection were labelled appropriately and included descriptions of the medication and patient information leaflets were supplied. Records were kept for each person receiving compliance packs so any regime or medication changes could be recorded, monitored, and queried where appropriate. Overall, the service was well organised.

Team members were aware of the guidance about pregnancy prevention to be given to people in the at-risk group who took sodium valproate. The stock packs on the shelf included the appropriate warnings and alert stickers. Additional patient information leaflets and warning cards were available to supply to people if a complete pack was not dispensed.

The pharmacy's substance misuse treatment was very well organised, and instalments were prepared in advance. A dedicated pump was used to dispense methadone. Prescriptions for daily, weekly, and take-home doses were marked and separated to minimise the chances of mistakes from happening. The machine was kept clean, and the tubing was flushed out each day. The system was calibrated at regular intervals.

The pharmacy's needle and syringe exchange scheme was popular. And approximately 15 packs were issued on a typical day. But the rate of return of used syringes was comparatively low. The pharmacy technician said that people were counselled about safe disposal and routinely reminded to bring used syringes back to the pharmacy for safe disposal.

Recognised wholesalers were used to obtain stock medicines, which were stored in an organised manner in the dispensary. Pharmacy-only medicines were restricted from self-selection. Team members had completed training on high-risk over the counter medicines such as codeine containing

painkillers and pseudoephedrine, so they knew to be vigilant when selling these.

CDs were stored in a cabinet which was securely fixed, and access to the cabinet was appropriately managed. Date expired and patient-returned CDs were separated in the cabinet. Patient-returned CDs were recorded and destroyed using denaturing kits. Stock medicines were stored in their original containers and at an appropriate temperature. Medical fridge temperatures were monitored and recorded daily.

The pharmacy technician explained how date checking of stock medicines was carried at regular intervals. Short-dated medicines were marked and removed from the shelves in advance of expiry. Stock medicines were randomly checked during the inspection and no date-expired medicines were found amongst in-date stock. Waste medicines and sharps were separated and placed in designated containers. Alerts and recalls were sent to the pharmacy from the head office and the MHRA. A recent alert had been actioned and an audit trail was kept.



## Principle 5 - Equipment and facilities ✔ Standards met

### Summary findings

The pharmacy has the equipment and facilities it needs to provide its services safely. And it maintains its facilities and equipment well.

### Inspector's evidence

The pharmacy's computers were password protected and computer terminals were not visible to people visiting the pharmacy. Members of the pharmacy team had access to current reference sources. All electrical equipment appeared to be in good working order. There was a range of clean crown-stamped measures available for measuring liquid medicines. And the equipment for counting loose tablets and capsules was clean. Medicine containers were capped to prevent cross-contamination.

### What do the summary findings for each principle mean?

Finding	Meaning
<span style="color: green;">✔</span> <b>Excellent practice</b>	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.
<span style="color: green;">✔</span> <b>Good practice</b>	The pharmacy performs well against most of the standards and can demonstrate positive outcomes for patients from the way it delivers pharmacy services.
<span style="color: green;">✔</span> <b>Standards met</b>	The pharmacy meets all the standards.
<b>Standards not all met</b>	The pharmacy has not met one or more standards.