

# Registered pharmacy inspection report

**Pharmacy Name:** Pearlfect Care Pharmacy, 40b Cambridge Street,  
Aylesbury, HP20 1RS

**Pharmacy reference:** 9012048

**Type of pharmacy:** Community

**Date of inspection:** 12/10/2023

## Pharmacy context

This is a private pharmacy in the centre of Aylesbury, Buckinghamshire. The pharmacy does not have an NHS contract. It dispenses private prescriptions and provides a range of private services only. This includes administration of travel and seasonal flu vaccinations, ambulatory blood pressure monitoring, ear wax removal, lung function testing and phlebotomy services. The pharmacy also has an online presence <https://www.pearlfectcarepharmacy.co.uk/>.

## 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	2.4	Good practice	Team members are provided with learning resources and complete relevant training to provide services. This ensures their knowledge and skills are kept up to date.
<b>3. Premises</b>	Standards met	3.3	Good practice	The pharmacy's premises are extremely clean which provides a suitable environment for the services offered.
<b>4. Services, including medicines management</b>	Standards met	4.2	Good practice	The pharmacy delivers its services in a safe and effective way. It has the appropriate systems in place underpinning each service. Comprehensive reports sent to healthcare professionals as well as counselling for people using its services helps provide positive outcomes.
<b>5. Equipment and facilities</b>	Standards met	5.1	Good practice	The pharmacy has invested in state-of-the-art equipment. The equipment provides a high level of technical expertise. This helps provide a greater degree of assurance for people using the pharmacy's services.
		5.2	Good practice	The pharmacy's equipment is fit for purpose, kept clean and maintained well.

## Principle 1 - Governance ✓ Standards met

### Summary findings

The pharmacy is operating safely. It has systems in place to identify and manage the risks associated with its services. Members of the pharmacy team can protect the welfare of vulnerable people. The pharmacy suitably protects people's confidential information. And it maintains its records as it should.

### Inspector's evidence

This is a new pharmacy which had recently relocated to the area. The pharmacy was very organised, tidy, and well-run. The superintendent pharmacist (SI) had suitably identified and managed the risks associated with the pharmacy's services. This included a business continuity plan, considered relevant risks, and completed appropriate risk assessments. The pharmacy had a range of current standard operating procedures (SOPs) to provide guidance on how to complete tasks appropriately. The appropriate staff had read the SOPs. The correct notice to identify the pharmacist responsible for the pharmacy's activities was on display.

The pharmacy ensured people's confidential information was kept secure. Confidential waste was shredded. The pharmacy's computer systems were password protected, encrypted and backed-up appropriately. The responsible pharmacist (RP) who was also the SI had trained to level two to safeguard the welfare of vulnerable people. This was through the Centre for Pharmacy Postgraduate Education (CPPE). Staff were also trained appropriately. The pharmacy had contact details available for the local safeguarding agencies.

The pharmacy's records were compliant with statutory and best practice requirements. This included records of supplies made against private prescriptions, the RP record, and records verifying that the temperature of the fridge had remained within the required range, had been maintained. The pharmacy was insured to provide the private services on offer. The pharmacy's professional indemnity insurance was through the National Pharmacy Association and due for renewal after 31 August 2024. The pharmacy did not hold and had not supplied any controlled drugs (CDs).

The pharmacy had a complaints and incident handling process in place. The RP confirmed that there had been no dispensing incidents or formal complaints since the pharmacy had opened. The pharmacy ordered medicines against private prescriptions on a one-to-one basis. This helped reduce the risk of a selection error occurring. When working alone, the RP took a physical and mental break between the assembly and the checking process if required. Relevant details were checked against prescriptions. There had been no near miss mistakes made. However, there were no details recorded. This was advised accordingly.

People could provide feedback about the pharmacy's services online and in person. At the time of the inspection, the pharmacy had received over 600 reviews online, rating the service as five stars. Staff explained that verbal feedback received was incredibly positive, people had commented and liked that the pharmacy was a hybrid or a cross between a clinic and a pharmacy, the extremely clean environment was noted along with the state-of-the-art equipment (see Principle 5). Feedback was also obtained through the local community. This was by word of mouth as the pharmacy had begun to build a reputation and other providers of care or fitness referred people to them (see Principle 4). The SI described 'going beyond' for people. He stated that demand for private services was high because of

the current challenges with the NHS.

## Principle 2 - Staffing ✓ Standards met

### Summary findings

The pharmacy has enough staff to manage the workload safely. Members of the pharmacy team are trained appropriately and via accredited courses. Team members keep their skills and knowledge up to date by completing regular training.

### Inspector's evidence

Other than the superintendent pharmacist who was also the owner, there was also a part-time, trained dispenser and the SI's wife, who was the quality manager. The latter only undertook customer service-related tasks and administrative duties. They were a small team who communicated regularly, held monthly meetings, and kept minutes. Relevant details such as challenges, how services could be improved, feedback and demand for new services were discussed to keep everyone informed and involved in the shaping of the pharmacy's future. Performance reviews were held every two months.

The RP explained that he, and his staff had attended relevant training courses to deliver the services they provided. Certificates to verify this were seen. The RP had completed phlebotomy training through Maxis Healthcare, he was trained to administer travel vaccinations via Voyager and spirometry through Rotherham Respiratory Ltd. Staff held their own individual training files and various certificates were also on display. Ongoing training included utilising pharmacy support organisations and resources from relevant organisations. In addition, staff were accredited through certain professional organisations to provide some services and relevant training kept up to date via them. This included the regulator for lung function testing, the Association for Respiratory, Technology and Physiology (ARTP) where questions could also be asked, or resources used for counselling. The RP was a member of the Infection Prevention Society which he used for advice on infection control. He described undergoing his initial training at Moorfields eye hospital and said that working on a specialist ward had helped him to bring the level of cleanliness required into this environment.

## Principle 3 - Premises ✓ Standards met

### Summary findings

The pharmacy premises provide a suitable environment to deliver healthcare services from. The pharmacy is kept spotlessly clean and tidy. And it has enough space to provide its services.

### Inspector's evidence

The pharmacy was situated in the town centre. The pharmacy premises consisted of a small retail area made up of clear open space, behind which numerous services were provided in different areas. There was also a consultation room available for services or private conversations at the very rear of the premises. This was of a suitable size for its intended purpose and kept locked when not in use. The pharmacy's premises were very professional in appearance, spotlessly clean and smelt clean on arrival. Staff wiped down surfaces and used additional measures to ensure equipment was clean (see Principle 5) after each use and the premises were cleaned several times a day. This assisted in providing a suitable environment for the various clinical services. The ambient temperature inside the premises was suitable for the storage of medicines and the pharmacy was bright and well ventilated. The pharmacy was also appropriately secured against unauthorised access. It had enough workspace for dispensing, and for holding or storing any necessary equipment.

The pharmacy had its own online website (<https://www.pearlflectcarepharmacy.co.uk/>) where its services were advertised. This website gave clear information. It displayed information about the pharmacy's opening times, the pharmacy's contact details, specific information about the SI and details about the pharmacy's complaints procedure.

## Principle 4 - Services ✓ Standards met

### Summary findings

The pharmacy's services are managed effectively and safely. The team ensures that people have the information that they need when they use their services. The pharmacy actively promotes healthier lifestyles and provides valuable services to the local community. People with high blood pressure, co-morbidities or unexpected problems are identified, monitored, suitably counselled, and referred. This makes them better informed about their condition(s). And the pharmacy sources its medicines from reputable suppliers. It stores and manages its medicines well.

### Inspector's evidence

Entry into the pharmacy was via a step but the SI explained that they easily assisted people with wheelchairs to enter and there was enough room inside, for them to use the pharmacy's services. Three seats were available in the retail space for people to wait if required. Parking spaces were also available within the vicinity. The pharmacy's opening hours were on display along with leaflets highlighting some of the services offered. In addition, the pharmacy had partnered with local gyms to advertise their services by using pop up banners in those premises. This helped them to promote health as well as fitness for people. Staff could make reasonable adjustments for people with different requirements. This included speaking different languages such as Italian and Nigerian or using representatives for people whose first language was not English. They also spoke clearly for people who were partially deaf, the consultation room could be used, and they physically assisted people if needed.

The pharmacy dispensed very few private prescriptions; no higher-risk medicines had been supplied. Licensed wholesalers were used to obtain medicines and medical devices. Medicines were stored in an organised way. The team date-checked medicines for expiry regularly and kept records of when this had happened. Short-dated medicines were identified. There were no date-expired medicines seen. Drug alerts were received by email and actioned appropriately. Records were kept verifying this.

Staff provided a variety of private services and sold some medicines over the counter. The former included administration of travel and seasonal flu vaccinations under private patient group directions (PGDs), ear wax removal, lung function testing, measurement of ambulatory blood pressure (BP) and phlebotomy testing. People used an online platform to book appointments, once people made their initial booking, a consultation took place with the SI where informed consent was obtained, necessary details were obtained in writing, retained and additional advice subsequently provided. All services were provided face to face. The pharmacy held relevant equipment (see Principle 5). As described under Principle 2, staff were trained appropriately to provide these services and PGDs to authorise this were readily accessible. The RP had signed them. People who used the pharmacy services and staff were also provided with a free test for COVID-19 if required.

The pharmacy had recently initiated monitoring of ambulatory BP. The RP explained that they had received positive feedback and seen successful outcomes as the service had enabled the potential diagnosis of co-morbidities such as atrial fibrillation. People using this service were subsequently referred to their GP for follow up, along with a report of the data obtained over a 24-hour period. This had been well received by the GP as the details had assisted with and supported the potential diagnosis.

The pharmacy's ear wax removal service involved microsuction using an otoscope. This also took photos and videos of the ear canal which helped educate people using this service. In addition, the RP used a model of the ear canal to explain the anatomy of the ear and had photos of potential ear problems on display. This was described as much appreciated by service users. In addition, the pharmacy kept individual records for people so that they could look back and visually see what their ear(s) looked like before using this service. The RP explained that this service was not offered routinely by other places. Consultation notes were sent to people and their GP, which included details of the examination and outcome. This service had also helped identify unexpected conditions such as perforations. People affected were referred to their GP with relevant details provided.

For the phlebotomy service, bloods were taken, sent off to a laboratory and the results were back within 48 hours. The RP then interpreted the data and in a subsequent consultation with him, he advised people accordingly depending on what was seen. This included providing lifestyle advice, such as reducing alcohol intake, modifying diet etc. The RP explained that the outcome was demonstrable with the next blood test result as the relevant levels had either subsequently increased or decreased. People using this service could also access the relevant information about their levels online through the portal mentioned above.

The RP explained that referrals from other local pharmacies for these services and other providers of care (such as opticians) were common. This was said to be due to the quality of the service provided and the fact that they were not offered elsewhere. Service models had also developed with time and been adjusted to provide more benefit. The pharmacy initially used a standard otoscope to remove ear wax without photos and videos. The service had improved with the added technology and equipment so that people as well as other health care professionals could see for themselves and keep visual records. The team had also reviewed the layout of the pharmacy in relation to how some of the services were partitioned in the premises and taken on board feedback from people. This included setting up a screen for the lung function testing section.



## Principle 5 - Equipment and facilities ✓ Standards met

### Summary findings

The superintendent pharmacist has ensured that the pharmacy has the relevant equipment it needs to provide its services safely and effectively. The equipment provides a higher level of technical expertise which helps provide additional assurance to people using the pharmacy's services. The pharmacy's equipment is exceptionally clean and used in a way that protects people's privacy and confidential information.

### Inspector's evidence

The pharmacy had significantly invested in the equipment it required to provide its services safely and effectively. The pharmacy's equipment was calibrated regularly, and portable appliance testing (PAT) had been conducted. A second or spare piece of each equipment was also available in case of breakdown. The pharmacy's equipment for its services included adrenaline in case of severe adverse reactions, designated containers for sterile waste, alcohol wipes, gloves, and lateral flow tests for COVID-19. There were also ambulatory blood pressure monitors, spirometers for the lung function test and pocket hand-held vein finder systems which were described as useful to locate veins for the phlebotomy service. The pharmacy had otoscopes with the relevant technology to take photos and videos of the ear canal (as described under Principle 4) alongside a large model of the ear canal used for demonstrations and to reinforce understanding of the person's condition. There was also associated equipment such as tubing, a fan in the spirometry section to help with ventilation and a screen to partition this area off from other sections. The team used chlorinated tablets to clean the equipment and all equipment and surfaces were wiped down after each use. The pharmacy had access to current versions of reference sources. A shredder was used to dispose of confidential waste. The computer terminal was password protected. Hot and cold running water was available as well as hand wash. The pharmacy had its computer terminals positioned in a way and location that prevented unauthorised access.

### 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.