

Registered pharmacy inspection report

Pharmacy Name: Boots, Terminal 3, Departure Lounge, London Heathrow Airport, Hounslow, TW6 3XA

Pharmacy reference: 9012090

Type of pharmacy: Community

Date of inspection: 19/10/2023

Pharmacy context

A Boots pharmacy in the airside departure area of a large, busy airport. The pharmacy is open from early morning until late at night all year round. And it sells a range of over-the-counter medicines and health and beauty products. It also provides anti-malarial tablets. And its team provides healthcare advice. The pharmacy does not provide NHS services. And it does not dispense prescriptions. But when needed, it transfers people's prescriptions to the branch in the airport's arrivals area for dispensing. And it brings the dispensed medicines back to the pharmacy for people to collect. People who use the pharmacy are airport passengers. And people working at the airport or working for one of the airlines.

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	1.1	Good practice	The pharmacy is good at identifying and managing the risks associated with its services.
		1.2	Good practice	The pharmacy is good at reviewing and monitoring the risks associated with its services.
2. Staff	Standards met	2.4	Good practice	The pharmacy team has a culture of openness, honesty and learning. And it is good at ensuring that team members are kept up to date, well informed and that they continually improve.
3. Premises	Standards met	N/A	N/A	N/A
4. Services, including medicines management	Standards met	4.2	Good practice	The pharmacy focuses on delivering its services well.
5. Equipment and facilities	Standards met	N/A	N/A	N/A

Principle 1 - Governance ✓ Standards met

Summary findings

The pharmacy identifies and manages its risks well. And it continually monitors the safety of its services to protect people and improve patient safety further. And team members take suitable action to prevent mistakes in the future. The pharmacy has insurance to cover its services. And it completes the records it needs to by law. The pharmacy has suitable written procedures in place to help ensure that its team members work safely and effectively. And the team understands and follows them. The pharmacy team knows how to protect the safety of vulnerable people. And it protects people's confidential information properly.

Inspector's evidence

The pharmacy mainly sold over-the counter medicines. Its team routinely provided advice to people about the condition they were trying to treat or prevent. The pharmacy had systems for recording its mistakes and any other patient safety incidents. And it reviewed them regularly. Members of the pharmacy team discussed and documented individual learning points when they found a mistake. They reviewed their mistakes regularly to help spot the cause of them and any trends. So, they could try to stop them happening again and improve the safety of the services they provided. The team had responded to a recent incident by reviewing their procedures to ensure that they consulted the pharmacist when they should. The pharmacy reviewed and monitored the safety and quality of its services regularly. Pharmacists carried out two five-minute mini observations on team members during every shift. Where they observed the way in which the team member responded to people's requests. And how they established the best treatment for them. By observing them, the pharmacist could identify any gaps in their knowledge. And they could intervene in the sale if necessary. After each observation pharmacists gave the team member feedback. And they provided further coaching if necessary to help them learn and improve. Recent checks had been done for eye conditions where the pharmacist checked the assistant's knowledge of the symptoms and treatment for conjunctivitis.

The pharmacy had up-to-date standard operating procedures (SOPs) for team members to follow. And its SOPs had been tailored to the pharmacy's activities. For example, the supply of prescription medicines, such as salbutamol inhalers, to people in an emergency. And the process to follow if someone presented a prescription which needed to be dispensed at the landside branch. The pharmacy team arranged for people's emergency supply or prescriptions to be dispensed at the landside branch and then brought back to the pharmacy. Even though the items had been checked by the pharmacist at the landside branch the responsible pharmacist (RP) here checked each assembled prescription before handing it out to make sure it was correct, in-date and for the right person. The pharmacy had appropriate insurance arrangements, including professional indemnity, for the services it provided.

The pharmacy displayed a notice that identified the RP on duty. And its RP records were adequately maintained. The pharmacy kept a record of any pharmacists who worked alongside the RP. And it kept a record of the prescriptions and emergency supplies that its pharmacist handed out which had been assembled at the other pharmacy. The pharmacy's team members wore name badges which identified their roles within the pharmacy. It was evident that team members knew what they could and could not do, what they were responsible for and when they might seek help. Their roles and responsibilities

were defined within their job descriptions and the pharmacy's SOPs. They could access other corporate procedures and policies online if they needed to. And they were required to read, sign and follow the SOPs relevant to their roles. The pharmacy had a complaints procedure. And the pharmacy team told people how they could provide feedback about the pharmacy in person, online or by contacting the company's customer care centre. But, in general if someone had a complaint or a concern about something they could speak to one of the managers or the RP. Most issues were generally dealt with this way.

The pharmacy had an information governance (IG) policy. And team members had completed online IG training. The pharmacy's confidential waste was collected securely and sent to a centralised point for safe destruction. The pharmacy team stored assembled prescriptions and the private prescription records in a locked cabinet. And access to the cabinet was restricted to authorised personnel. So, people's names and addresses could not be seen by someone who should not see them. The pharmacy had a safeguarding policy in place. And team members had completed safeguarding training relevant to their roles. Team members knew what to do or who they would make aware if they had concerns about the safety of a child or a vulnerable person. But the nature of the business and the lack of a consultation room meant that it may not always be easy for the team to identify a safeguarding need other than when someone reported their concerns to a team member directly.

Principle 2 - Staffing ✓ Standards met

Summary findings

The pharmacy has enough team members to provide its services safely and effectively. The pharmacy trains its team members well for the tasks they carry out. And it manages its workload safely and effectively. Team members work well together. And they support one another. They are comfortable about providing feedback to one another, so that they can improve the quality of the pharmacy's services.

Inspector's evidence

The pharmacy operated extended opening hours from 5am until 10pm daily, including weekends. It operated two shifts during its opening hours. The two shifts had slightly varying lengths according to the needs of the pharmacy. And the hours its team members were available to work. The shifts generally ran from 5am to late morning or early afternoon. And late morning or early afternoon until 10pm. After the pharmacy closed, its night team took over. And it generally worked from 10pm until 5am each night, restocking the pharmacy's shelves. Each shift had a healthcare assistant (HCA) manager present to oversee activities. At the time of the inspection, which took place during the early shift, the pharmacy had one of its regular RPs on duty. The RP was supported by a HCA who was also a store manager, three further HCAs and a small team of non-pharmacy staff. In the wider team the store had a full-time airport terminal manager (ATM). And a deputy ATM. The deputy ATM who was present during the inspection to support the team. But the pharmacy needed an extensive team of staff to cover all its shifts. And so, it had an additional full-time pharmacist, several part-time Boots relief pharmacists and a team of locums to cover the evenings and weekends. And it also had an additional 19 HCAs, six of whom were in training. Some of these worked full-time and some worked part-time. The team mainly consisted of experienced staff who had worked at the airport pharmacy for some time. And they were available to offer support to newer staff in training.

The pharmacy worked with the other airport pharmacy teams to cover any absences. Team members working at the pharmacy had airport security passes to gain access to the premises. Team members worked well with each other to make sure people were served promptly. The RP assisted on the counter when needed and he supervised and oversaw the supply of medicines and advice given by staff. The pharmacy had an induction training programme for its staff. Its team members needed to complete mandatory training during their employment. And they undertook accredited training relevant to their roles after completing a probationary period. The pharmacy's team members regularly discussed their performance and development needs with their line manager. And they helped each other to learn. They were encouraged to ask questions and familiarise themselves with new products. They were also encouraged to read any company newsletters and complete online training and assessments to make sure their knowledge was up to date. The pharmacy kept records that showed its team completed regular ongoing training. Pharmacists had meetings with staff at the beginning of each shift. And they used the 5-minute checks, team meetings and one-to-one discussions to update them, share learning and take feedback.

The team members felt comfortable about making suggestions on how to improve the pharmacy and its services. The pharmacy had a whistleblowing policy in place. And staff had access to information explaining who they should raise a concern with if they had one or how to raise it anonymously. The team had raised feedback that the pharmacy's layout meant that people buying non pharmacy items

often joined the pharmacy queue automatically, as the self-service pay points were not immediately obvious. They were concerned about the potential breach of confidentiality for those who needed the pharmacy's services. And the impact of the unnecessary longer queues on pharmacy services in general. So, they had raised this with their line managers. The pharmacy team worked well together and it was clear that they were well supported by the RP. The RP was free to make his own professional decisions on behalf of people. And he was not put under pressure to meet business targets.

Principle 3 - Premises ✓ Standards met

Summary findings

The pharmacy's premises provide a suitable environment for people to receive its services. And they are sufficiently secure, clean, tidy and organised.

Inspector's evidence

The registered pharmacy area consisted of a counter and five bays of back wall shelving. It had a corridor behind it where it stored locked cages of stock for short periods of time before being brought onto the shop floor for stock replenishment. Pharmacy only medicines tended to be brought straight into the premises when they were needed. The premises were bright, clean, modern and air-conditioned. The pharmacy had the space it needed for the services it provided. But it did not have a consultation room. And so, the RP generally took people to the side of the counter or to a quieter area of the premises if he needed to talk more privately with them. And he tried not to talk too loudly to reduce the chances of their conversations being overheard. A cleaning contractor regularly cleaned the store. And the pharmacy team also kept the pharmacy clean and tidy. The pharmacy didn't have a sink. So, its team members used the airport's handwashing facilities when they needed to. And they had access to hand sanitising gel.

Principle 4 - Services ✓ Standards met

Summary findings

The pharmacy makes sure its services meet the needs of the people who use it. And it makes them accessible to people. The pharmacy is good at providing its services safely and effectively. And it supports people with suitable advice and healthcare information. The pharmacy team gets its medicines and medical devices from appropriate sources. And team members make the necessary checks to ensure they are safe to use to protect people's health and wellbeing. The pharmacy ensures that all its medicines are stored correctly and safely.

Inspector's evidence

The pharmacy had a step-free entrance, which extended across its full width. Its customer area was on one level. And it was free of unnecessary obstacles. So, it was suitable for people with mobility issues. Members of the pharmacy team had access to mobile phone applications to help ask people questions or provide advice if they did not speak the same language. The pharmacy had a business continuity plan. The plan identified the potential risks to the pharmacy, its services and its staff in the event of an emergency. And it told staff what they should do to minimise impact on people and general safety. The pharmacy predominantly sold over-the-counter medicines. And it had sales protocols in place. It had procedures to ensure that it sold medicines appropriately. And it took care not to sell unnecessarily large quantities of items to people who may not be able to buy a particular medicine such as codeine, in their own country or where they were travelling to. Team members also took care to closely monitor sales of laxatives and other medicines which could be abused. The pharmacy provided anti-malarials to people. And it had a specific Patient Group Direction (PGD) protocol for the sale of malarone. It kept records of each consultation for malarone, including details of what it had supplied. And it kept the records securely in a locked container.

The pharmacy obtained its medicines and medical devices from suppliers holding the appropriate licences. The team stored its medicines, appropriately. And stock on the shelves was tidy and organised. The pharmacy rotated its medicines so that the older packs were sold first. It checked their expiry dates regularly. And it kept records to show what had been checked and when. The team identified any short-dated items. And it removed them from stock. And a random sample of stock checked by the inspector was in date. The team put its out-of-date medicines into dedicated waste containers. The pharmacy responded promptly to drug recalls and safety alerts. But it had not had any stock affected by recent recalls.

Principle 5 - Equipment and facilities ✓ Standards met

Summary findings

The pharmacy has the right equipment to provide its services safely. It makes sure its equipment is stored securely.

Inspector's evidence

The pharmacy team had access to up-to-date reference sources. The team could also contact the Superintendent's office to ask for information and guidance. And it had a laptop which provided internet access to approved information sites. The laptop was password protected and was stored securely when the pharmacy was closed. When in use, its screen was positioned so only staff could see it. The pharmacy had a cordless phone which team members could use to have private conversations with people.

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.