

Registered pharmacy inspection report

Pharmacy Name: Easter Pharmacy, 54-56 Station Way, Buckhurst Hill, Essex, IG9 6LL

Pharmacy reference: 9012106

Type of pharmacy: Community

Date of inspection: 02/12/2024

Pharmacy context

This pharmacy is located in a residential area in the town of Essex. It dispenses NHS and private prescriptions. And it has a dispensing robot. The pharmacy provides services such as the NHS Pharmacy First and flu and Covid vaccinations. It also provides a private travel vaccination service and a private ear wax removal service. The pharmacy supplies medicines in multi-compartment compliance aids to some people. And it delivers medicines to people who cannot get to the pharmacy.

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	N/A	N/A	N/A
2. Staff	Standards met	N/A	N/A	N/A
3. Premises	Standards met	N/A	N/A	N/A
4. Services, including medicines management	Standards met	N/A	N/A	N/A
5. Equipment and facilities	Standards met	N/A	N/A	N/A

Principle 1 - Governance ✓ Standards met

Summary findings

Overall, the pharmacy manages the risks associated with its services. It has written procedures for team members to follow. And it keeps the records it needs to by law. Team members know how to protect people's confidential information. And they are aware of the actions to take if they have a safeguarding concern. Team members record their mistakes, but the records could contain more detail to help the pharmacy identify trends to learn from and improve practice.

Inspector's evidence

The pharmacy had a written set of standard operating procedures (SOPs) for team members to follow. These covered the activities of the pharmacy and helped team members to work safely and effectively. The SOPs had been prepared in July 2024 by the superintendent pharmacist (SI). Team members had signed to show they had read and understood the SOPs relevant to their roles. And they were clear about the activities they could and could not do in the absence of the responsible pharmacist (RP).

The pharmacy kept electronic records of near misses (mistakes that were identified and corrected during the dispensing process). The person who made the error generally recorded it. But the records did not always make it clear what the mistake was, so it could be difficult for the pharmacy to identify any trends. The RP said he would ensure the records were clearer going forward but did describe some changes the pharmacy had made from reviewing errors. For example, it had identified that sometimes errors were made when the dispensing assistants manually selected products from the pharmacy's dispensing robot. The RP explained that the team had implemented a process where they would highlight prescriptions if this was done so that the pharmacist checking the medicine was made aware. It also helped dispensing assistants double check their work before handing it to the pharmacist for a final accuracy check. The pharmacy had not had any recent dispensing errors (mistakes that had been handed out to people). But the RP explained the appropriate action he would take if one was brought to his attention.

The incorrect RP notice was on display at the start of the inspection. This was promptly corrected when the inspector made the RP aware. The RP record was completed correctly with start and finish times. The pharmacy kept electronic records of private prescriptions, but some entries were made with incorrect prescriber details. The RP said he would ensure these were made correctly going forward. Controlled drugs (CD) records were made electronically, and the pharmacy completed regular CD balance checks. A random check of a CD showed the balance in the register matched the physical quantity in stock. The pharmacy kept appropriate records of unlicensed medicines it supplied.

The pharmacy had indemnity insurance in place to cover its services. Team members kept confidential waste separately in the dispensary and this was then shredded. No confidential waste was seen mixed with normal paper waste. Prescriptions awaiting collection were stored in the dispensary and so sensitive information on bags was not visible to people using the pharmacy. The pharmacy had a complaints procedure. People could complain in person or over the phone. The RP said that he would try and resolve any complaints but would escalate to the SI if needed.

Team members were aware of how to recognise a potential safeguarding concern and they explained the actions they would take if needed. The RP had completed level three safeguarding training and

explained he could access details of the local safeguarding teams online.

Principle 2 - Staffing ✓ Standards met

Summary findings

The pharmacy has enough team members to provide its services safely. Team members have completed appropriate training relevant to their roles. The team works well together to manage the pharmacy's workload. And team members are comfortable about raising any concerns they may have.

Inspector's evidence

On the day of the inspection there was the RP, a locum pharmacist, a locum dispenser, and a medicines counter assistant (MCA). Another team member present had recently started working at the pharmacy and had not yet been enrolled onto a training course. She was working under the supervision of the more experienced team members. The RP explained that the pharmacy's regular team members were off, so it had arranged locum cover to support. The RP said that generally there were enough staff to manage the pharmacy's workload. And there were always two pharmacists present in the pharmacy. Team members were observed working well together and helping people who had come to use the pharmacy's services. No backlog of work was observed.

When asked the MCA explained how she appropriately managed sales of pharmacy medicines. And she was aware of the medicines which were liable to misuse. She said that if she had any concerns about selling pharmacy medicines, she would refer these sales to the pharmacist. Team members explained they tried to keep their knowledge up to date by reading pharmacy updates and the SI would also provide any relevant updates to the team. When team members were enrolled onto training courses, they would be given time to complete training at work. The SI was a pharmacist independent prescriber (PIP) and prescribed travel vaccinations for the private travel vaccination service. The SI had completed relevant training to demonstrate that he was prescribing these medicines safely and within his competence. He also prescribed for some minor ailments and provided certificates to show that he had completed the necessary training to prescribe these medicines safely. Team members had regular annual appraisals with their manager where they discussed performance and development objectives. They were set some targets but did not feel pressured to meet them. And team members said they were comfortable about raising any concerns they may have.

Principle 3 - Premises ✓ Standards met

Summary findings

The premises are clean, well maintained, and secure. They provide a professional environment to provide healthcare services. The pharmacy has several suitable consultation rooms so people can have a private conversation and access services the pharmacy provides.

Inspector's evidence

The premises were secure, clean, and consisted of a small retail space and pharmacy counter. And there was a large dispensary in which there was a dispensing robot. Staff facilities consisted of two clean WCs and handwashing facilities. There were three consultation rooms and a separate treatment room, which was predominantly used to provide the pharmacy's services from. The pharmacy's lighting and temperature was adequate for working and storing medicines. The dispensary was an appropriate size for the workload and there was sufficient workbench space for dispensing and checking prescriptions. There was a separate door into the dispensary for the pharmacy to receive their medicines deliveries. Most medicines were stored in the pharmacy's robot, with some bulky items and glass bottles stored neatly on shelves in the dispensary. There was a sink in the dispensary with hot and cold running water. And Pharmacy medicines were stored securely behind the pharmacy counter.

The consultation rooms and treatment room were clean and professional in appearance. They all had clean sinks. And they allowed people to have a private conversation without being overheard. No confidential information was visible in the consultation and treatment rooms. The premises were routinely kept clean by team members. But a cleaner would come to the pharmacy twice a month to carry out a deeper clean.

Principle 4 - Services ✓ Standards met

Summary findings

The pharmacy makes its services accessible. And it provides its services safely. The pharmacy obtains its medicines from licensed wholesalers and stores them appropriately. It actions drug alerts and recalls in a timely manner to help ensure the medicines it supplies are suitable for use. Team members highlight higher-risk medicines so people taking these medicines receive the appropriate safety advice.

Inspector's evidence

The pharmacy had step-free access from the street via an automatic door. There was suitable space for those with wheelchairs or pushchairs to be able to access the pharmacy's services. And the pharmacy's opening times were displayed clearly. Seating was available for people using the pharmacy. Team members were able to print large font labels if needed. The pharmacy provided a prescription delivery service to some people in the local area. A log was kept of deliveries and any failed deliveries were brought back to the pharmacy and another delivery attempted.

The pharmacy provided the NHS Pharmacy First service and NHS flu and Covid vaccinations. The RP and SI had completed the necessary training to provide these services. The RP could not locate the copies of the signed patient group directions (PGDs) during the inspection but said he had access to the PGDs online if he needed to refer to them. Copies of the signed PGDs were sent to the inspector by the SI following the inspection. The pharmacy also provided a private travel vaccination service. The SI prescribed vaccines to administer to people using the service. Private prescriptions for these vaccines and consultation records for the service were kept appropriately. The SI occasionally prescribed some medicines for minor ailments. Some examples of consultation records for these were seen. And they contained appropriate information to explain the reason why a prescription was required. The pharmacy provided a private ear wax removal micro suction service. The RP had completed the necessary training to provide the service safely. And consent forms and consultations for this service were completed appropriately and recorded onto the Tympa health platform.

The pharmacy generally prepared prescriptions as they were received into the pharmacy. Baskets were used to separate people's prescriptions to prevent them getting mixed up. Dispensing labels were seen to contain the initials of the dispenser and checker to help maintain an audit trail. Some people were supplied their medicines in multi-compartment compliance packs. The pharmacy ordered prescriptions for these people a week before they were due to start taking their medicines. Any changes to people's medicines were recorded on their patient record. And the pharmacy would manage any queries with the surgeries. Labels on prepared packs were seen to contain the required information. And drug descriptions were also included to help people identify their medicines. The RP said that patient information leaflets were generally only provided with the initial supply. This was discussed, and the RP agreed to ensure these were sent to people with each month's supply going forward.

The pharmacy obtained its medicines from licensed wholesalers. It stored most medicines in the dispensing robot. Some medicines which could not be kept in the robot were stored in a tidy and organised way on the shelves. The RP explained that team carried out date checking monthly, and any stock that was due to expire was removed. A random check of stock on the shelves and in the robot showed no expired stock amongst in-date stock. Medicines requiring cold storage were kept in the fridge. The fridge temperature was seen to be maintained within the required range. Waste medicines

were stored separately in designated bins and collected for safe disposal.

The pharmacy highlighted prescriptions for higher-risk medicines to help identify people who might need additional counselling about taking their medicines safely. Team members were aware of the guidance about the safe supply of medicines containing valproate. They explained people were provided with safety advice and that the medicines were supplied in their original packs. The pharmacy received drug alerts and recalls via the pharmacy's shared email. These were seen to have been printed and kept in a folder once the relevant action had been taken.

Principle 5 - Equipment and facilities ✓ Standards met

Summary findings

The pharmacy has the equipment it needs to provide its services safely. And it maintains its equipment, so it is safe to use.

Inspector's evidence

Team members were able to access online resources they needed. And all computers were password protected to prevent unauthorised access. Monitors were positioned so sensitive information was not visible to people visiting the pharmacy. The pharmacy had a cordless phone so phone calls could be taken privately if needed.

There was a large fridge with sufficient space for medicines requiring cold storage. The CD cupboard was secured as required. Access to the dispensing robot was restricted to pharmacists and dispensing assistants. And each team member had their own log in details. The robot was maintained appropriately, with cleaning modules running overnight. And it was re-booted once a week to ensure any updates were completed.

There were calibrated, glass liquid measures available in various sizes. And the pharmacy had tablet counting triangles. All equipment was kept clean. The pharmacy had a calibrated blood pressure machine in the consultation room. And there was also an otoscope and other disposable equipment available for use for the NHS Pharmacy First service.

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.