

Registered pharmacy inspection report

Pharmacy Name: Automeds Pharmacy, Unit 52F, Enterprise Park,
Dorchester, DT2 7UA

Pharmacy reference: 9012148

Type of pharmacy: Internet / distance selling

Date of inspection: 26/04/2024

Pharmacy context

This is a closed pharmacy located in an industrial estate in Dorchester, Dorset. It provides pharmacy services to care homes across the county. The pharmacy is able to provide medicines in multi-compartment compliance aids and as well as the supply of medicines, they provide a New Medicines Service and a delivery service. The pharmacy also provides COVID-19 and flu vaccines.

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	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

The pharmacy's working practices are generally safe and effective. It has suitable written instructions for members of the team to follow to help to manage risks in providing its services. Team members learn from their mistakes and take action to prevent the same thing happening again. The pharmacy keeps the records it needs to by law to show how it supplies its medicines and services safely. Members of the pharmacy team protect people's private information. And they understand their role in safeguarding the welfare of vulnerable people.

Inspector's evidence

There were a range of policies and protocols in place and held electronically, including standard operating procedures (SOPs). The Superintendent Pharmacist reviewed them every two years or when there were any significant changes. They covered the relevant GPhC activity and requirements, including responsible pharmacist (RP) regulations. Pharmacy staff had read through these and confirmed they understood them and would follow them. The role of the responsible pharmacist was outlined in the SOPs, so responsibilities and lines of accountability were clear. The team also had SOPs for the rest of the pharmacy tasks which all included the roles and responsibilities of the staff. As well as written SOPs, the team also had video tutorials showing how to complete some of tasks they completed. Appropriate professional indemnity insurance from Numark was in place.

The pharmacy had processes in place to identify, record and learn from mistakes on its Asana electronic system. All errors would be reported on an electronic near miss log. The data from the incidents would be collated and any risks and trends would be identified regularly. The Superintendent explained that as the pharmacy was using a scanning system for the dispensing process, the near misses were caught prior to the accuracy checking process. This was due to the computer system not generating labels if the dispenser picked and scanned items which did not match the prescription. Any incidents or errors would be shared with the whole pharmacy team. People were able to raise complaints with the pharmacy by calling them and in writing. Details of how to do this were supplied to the care homes and were available online on the company's website.

The pharmacy used an electronic responsible pharmacist record, and a valid Responsible Pharmacist notice was on display in the pharmacy on a screen. Controlled drugs (CDs) registers were maintained electronically, and the balance of CDs was checked every month. The maximum and minimum fridge temperatures were checked daily and recorded electronically.

Information governance training was mandatory for each member of the pharmacy team and repeated annually. Passwords to access the pharmacy IT systems were only known by staff and each member of staff had their own profiles online so their work could be audited. Each member of the pharmacy team used their own NHS Smartcard and log in details to access the NHS systems. Confidential material was suitably located, and confidential paper waste was segregated and removed for safe disposal. Safeguarding training was mandatory for all staff, and this was repeated regularly online. The pharmacist and technicians had completed level 2 safeguarding training, and the team held the details of the local safeguarding authorities electronically should they be required. The Superintendent explained that the drivers had more safeguarding training as they would visit the care homes regularly

and they had all completed the Buttercups driver training program.

Principle 2 - Staffing ✓ Standards met

Summary findings

The pharmacy has enough staff to manage its workload. It makes sure its team members are appropriately trained for the jobs they do. They complete regular additional training to help them keep their knowledge up to date and they are able to raise concerns appropriately.

Inspector's evidence

There were enough suitably qualified and skilled staff present to manage the workload. During the inspection, there was one pharmacist, one foundation trainee pharmacist, one accredited checking technician (ACT), one trainee accredited checking technician, one trainee technician and one trainee dispenser. All the staff had either completed, or were in the process of completing, accredited training. The pharmacy team used Buttercups training modules. All the SOPs defined the staff roles which may work under the SOP.

Staff were observed working well together during the inspection and following the SOPs. Staff received feedback during their appraisals which were held annually on a one-to-one basis. Regular team meetings were used to communicate current issues and to provide updates. The pharmacy had an open culture, where staff were able to contribute ideas or raise issues, and there was a company whistleblowing policy in place which all staff members were aware of.

Team members were able to work within their own professional judgement and staff were empowered to ask questions and make changes as needed for the benefit of people using their services. The staff stated that there were no financial incentives in place within the pharmacy and they only had targets to ensure the care homes received their medicines on time.

Principle 3 - Premises ✓ Standards met

Summary findings

The pharmacy's premises are bright, clean and secure and suitable for the provision of healthcare services. The pharmacy prevents people accessing its premises when it is closed to protect people's private information and to keep its medicines stock safe. People can have a private conversation with a team member in the consultation room.

Inspector's evidence

The pharmacy had recently opened and was located in a business park. There was plenty of free parking in front of the pharmacy. People could access the pharmacy by pressing a video buzzer which the staff could monitor and allow people to enter for some services. On entry, there was a waiting area with seats for people. The main pharmacy included a large bright dispensary, a side room which was sectioned in two; one part for the consultation area and one part for the deliveries due to go out. On the first floor, the pharmacy had a large storage room, a training room and a staff kitchen and a room set up with shelving, but it was not currently being used.

The dispensary fixtures and fittings were brand new, and the pharmacy was well-presented, bright, and airy. There was plenty of space for the staff to work and lots of storage for stock and consumables. Lighting was bright throughout the pharmacy, and it was temperature controlled by an air conditioning system to ensure that medicines were kept in an appropriate environment. Air conditioning units were also available throughout the pharmacy building.

The public could not walk into the pharmacy freely and any visitors were spoken to via an intercom which also took an image of the visitors for security purposes. Cleaning was completed daily and there was a rota in place showing the different cleaning tasks the staff members would carry out.

Principle 4 - Services ✓ Standards met

Summary findings

The pharmacy delivers its services in a safe and effective manner, and people with a range of needs can access them. Team members identify people supplied with high-risk medicines so that they can be given any extra information they may need to take their medicines safely. The pharmacy sources, stores and manages medicines safely, and so makes sure that the medicines it supplies are fit for purpose. The pharmacy responds satisfactorily to drug alerts or product recalls so that people only receive medicines or devices which are safe for them to take.

Inspector's evidence

The Superintendent explained that while they service care homes locally, they also provide services for domiciliary patients who are unable to access similar services elsewhere. The pharmacy was open five days a week throughout the year and had business continuity plans in place should any of its systems go down. People could contact the pharmacy by phone if required. The pharmacy was able to produce large print labels for people with poor sight and had access to translation services.

The pharmacy assisted care homes in managing their medicines safely by ensuring they receive medicines when required and that they do not have excessive stocks of medicines. The pharmacy also provides training to care home teams so that they are able to administer medicines safely to patients and ensure that they store medicines safely.

The pharmacy computer system allowed the team to track prescriptions around the pharmacy and know which stage each prescription was at. Any messages or notes could also be placed on the records so that the messages were passed around from the clinical checking stage right through to the accuracy checking stage. Audit trails on the system meant that it was easy to identify who had changed anything or left messages. Once a prescription was prepared, QR codes were generated on the labels which when scanned, would bring up all the prescription details. The team demonstrated how the labels would change once a prescription had been fully checked and was ready to be delivered. The pharmacy offered care homes the eMAR system (electronic medicines administration record system) which allowed both the pharmacy and the care home to monitor the administration of medicines in real time.

Medicines were delivered daily to various local care homes and the team used a full audit trail for the delivery of the medicines. It allowed them to locate which delivery tote each prescription item was in and this was useful when the care homes couldn't find medicines. The team members took images of tote boxes when packed so that they had a visual image of each item in the box. If there were any queries with the medicines, the pharmacy could be contacted for clarification. The pharmacist explained that this was helpful when care homes called them trying to locate medicines.

There were clear working processes and work would be prioritised on their computer systems, and tasks were allocated to different staff members. All supplied medicines were labelled appropriately, and all high-risk medicines were double checked prior to issue. The pharmacy team were aware of the strengthened warnings and measures to prevent valproate exposure during pregnancy. Valproate cards and leaflets were available for use during dispensing of valproates to all people in the at-risk group.

The pharmacy sourced stock from various licensed suppliers and direct from some manufacturers. Medicines were stored in controlled environments and monitored. The pharmacy had air conditioning throughout the building to keep all medicines in the acceptable temperature range.

The pharmacy had a suitable waste contract and medicines that had been returned were segregated and sorted prior to disposal. Hazardous waste and confidential waste were all disposed of appropriately using the correct disposal methods. Drug alerts and recalls were received by the pharmacy regularly on the Pharmsmart system and any follow-up action was taken as necessary. There was an audit trail for the recall notices showing the actions that were taken. Expiry date checks were undertaken on a rolling basis and the team kept a record of the date checking.

Principle 5 - Equipment and facilities ✓ Standards met

Summary findings

The pharmacy has the equipment it needs for the delivery of its services. It looks after this equipment to ensure it works and is accurate.

Inspector's evidence

There were crown-stamped measures available for use and amber medicine bottles were seen to be capped when stored. There were also clean counting triangles available as well as capsule counters. Up-to-date reference sources were available such as a BNF and other reputable information sources and texts. Internet access was also available should the staff require further information sources.

There were suitable pharmacy facilities including a CD cupboard and a fridge. There were maintenance contracts for the refrigerator and the air conditioning system. Designated bins for the disposal of waste medicines were available for use and the team also had separate bins for the disposal of hazardous waste.

All computer screens were suitably located and access to computers containing patient data was protected using individual passwords which were changed regularly. All data was saved on secure servers.

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.