

Registered pharmacy inspection report

Pharmacy Name: Trustmed Pharmacy, Unit 2, Leicester General Hospital, Gwendolen Road, Leicester, Leicestershire, LE5 4PW

Pharmacy reference: 9012191

Type of pharmacy: Hospital

Date of inspection: 21/06/2024

Pharmacy context

The pharmacy is situated in a small room in the grounds of Leicestershire General Hospital. The pharmacy dispenses out-patient renal prescriptions for Leicestershire NHS Hospitals Trust.

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 identifies and manages the risks associated with the provision of its services. Its team members have defined roles and accountabilities. The pharmacy keep people's private information safe. The pharmacy has procedures to learn from its mistakes but because it may not record all of its near misses it may miss opportunities to learn from its mistakes and improve its ways of working

Inspector's evidence

The pharmacy dispensed medicines for renal outpatients for Leicestershire NHS Hospitals Trust. It was open for around two or three days a week and the number of medicines dispensed varied week by week. A responsible pharmacist (RP) was present when required but at the time of inspection no registrable activity was taking place. The pharmacy had a RP notice which was visible to people visiting the pharmacy. RP records were held electronically and seemed complete. The pharmacy had a set of up-to-date electronic standard operating procedures (SOPs) for the services that it provided. Team members were required to read the SOPs relevant to their roles and training records were maintained for each team member.

The pharmacy had processes for learning from dispensing mistakes that were identified before reaching a person (near misses) and dispensing mistakes where they had reached the person (errors). Near misses were discussed with the member of staff at the time the mistake was found. The pharmacist said that near misses were recorded in a near miss log but there was not a near miss log in the pharmacy. The pharmacist said it might have been taken to the main TrustMed pharmacy for review.

The pharmacy did not dispense any controlled drugs (CDs) or receive patient-returned CDs. The pharmacy had a complaints procedure and an information governance policy. Access to the electronic patient medication record (PMR) was password protected. Confidential information was destroyed securely. Professional indemnity insurance was in place. The pharmacist understood safeguarding requirements and could explain the actions they would take to safeguard a vulnerable person.

Principle 2 - Staffing ✓ Standards met

Summary findings

There are enough team members to manage the pharmacy's workload. They are suitably trained for the roles they undertake. Team members are supported in their development and can raise concerns if needed.

Inspector's evidence

During the inspection there was one pharmacist present who was clinically checking prescriptions. She explained that staff worked across the various TrustMed pharmacies and worked in the pharmacy according to a rota. Team members who worked in the pharmacy had to undergo additional training because of the specialised nature of the service.

Team members had regular reviews with their manager. There was mandatory training such as safeguarding and data protection. New team members had a structured training program. When asked, the pharmacist said she enjoyed working at the pharmacy and would be able to raise any issues she had at work with her manager or the superintendent.

Principle 3 - Premises ✓ Standards met

Summary findings

The pharmacy keeps its premises safe, secure, and appropriately maintained.

Inspector's evidence

The pharmacy was a reasonable size for the number of people and the items dispensed. The dispensing benches were sufficient and there was enough space to store stock medicines. Air conditioning provided a suitable temperature for storing medicines, lighting was appropriate, and hot and cold running water was available. Unauthorised access to the pharmacy was prevented during working hours and when closed.

Principle 4 - Services ✓ Standards met

Summary findings

The pharmacy offers healthcare services which are mainly suitably managed and are accessible to people. The pharmacy gets its medicines and medical devices from reputable sources. It stores them safely. It takes the right actions if medicines or devices are not safe to use to protect people's health and wellbeing. But the pharmacy does not make a record of the action it has taken which could make it harder for it to show what action it has taken in response to an alert.

Inspector's evidence

There was no public access to the pharmacy. Medicines were either delivered to the person's home or collected at one of the other TrustMed pharmacies dependent on the person's choice. The pharmacist explained that she completed a clinical check before the medicines were dispensed. She had access to the hospital's clinical records so she could check that the appropriate tests had been carried out before the medicines were supplied. She highlighted a recent intervention where a person's levels of a medicine had been outside of the standard range, so she had contacted the specialist renal pharmacist to seek reassurance before the medicine was supplied. The pharmacist explained that counselling on medicines was provided by the renal pharmacist, but that people could phone if they had a query which was related to the pharmacy. The number provided was for the other TrustMed pharmacy at Leicester General Hospital because it was open every day.

The pharmacy used a dispensing audit trail which included use of 'dispensed by' and 'checked by' boxes on the medicine label to help identify who had done each task. There was also a section on the prescription to record who had carried out the clinical check, dispensed, accuracy checked, and bagged the medicine. But when a sample of these were checked looked at during the inspection, some of the sections were not all signed. The pharmacist said that she would discuss this with the team. Baskets were used to keep medicines and prescriptions for different people separate to reduce the risk of error.

Medicines were stored tidily on shelves in their original containers. The pharmacist said that the team had a process for date checking stock medicines. But a check during the inspection found several stock medicines that were out of date. And no date checking records could be found in the pharmacy. The pharmacist said that she would arrange for date checking to be completed as soon as possible and would discuss the issue with the team. A record of invoices showed that medication was obtained from licensed wholesalers. The pharmacist understood the process for managing drug alerts and explained that when an alert was received at the other TrustMed pharmacy on the same site this pharmacy would also be checked. But there were no records of checks at the pharmacy, and she was not sure if the records at the other pharmacy would specifically show that this pharmacy had been checked. She said that she would make sure that records of action taken were kept in the pharmacy.

Principle 5 - Equipment and facilities ✓ Standards met

Summary findings

The pharmacy has the equipment and facilities it needs for the services it provides. It maintains its equipment so that it is safe to use.

Inspector's evidence

The pharmacy used suitable measures for measuring liquids. The pharmacy had a range of up-to-date reference sources. Records showed that the fridges were in working order and stored medicines within the required range of 2 and 8 degrees Celsius. The pharmacy's portable electronic appliances were new when the pharmacy opened and looked in good condition.

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.