

Registered pharmacy inspection report

Pharmacy Name: Drugs2U Ltd, Unit 11, Evans Business Centre, Brunel Road, Leominster, Herefordshire, HR6 0LX

Pharmacy reference: 9012201

Type of pharmacy: Internet / distance selling

Date of inspection: 29/02/2024

Pharmacy context

This community pharmacy is located on a business park. It is not open to the public and instead it provides NHS services at a distance. The pharmacy dispenses prescriptions, and it provides some additional services including ear micro suction and flu vaccinations.

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 suitably identifies and manages the risks associated with its services. And it keeps the records it needs to by law. The pharmacy has procedures to help make sure team members complete tasks safely. And team members understand how to keep people's private information safe.

Inspector's evidence

The pharmacy had a range of standard operating procedures covering the operational tasks and activities in the pharmacy. The responsible pharmacist (RP) who was also the superintendent pharmacist had reviewed the procedures when the business had opened approximately six months ago. The procedures defined the roles and responsibilities of team members. And team members had signed a training record indicating that they had read and understood the procedures. The pharmacy had professional indemnity insurance and a certificate provided was valid until the end of January 2025.

There was a near miss log, but the RP confirmed that the pharmacy had only recently started to complete dispensing activity in the few weeks prior to the inspection and no near misses had been detected to date. The pharmacy had an incident reporting procedure and the RP explained how she would manage any dispensing incident that was reported to her.

The pharmacy complaint procedure was clearly explained on its website. A notice which explained the way in which concerns could be raised was also displayed in the dispensary. No concerns had been received.

The correct RP notice was clearly displayed in the dispensary and the RP log was in order. Controlled drugs (CD) registers kept a running balance and regular balance checks were completed. A patient returns CD register was also available. The pharmacy had a private prescription register, but it had not dispensed any private prescriptions since trading began. And no unlicensed specials preparations had been supplied.

The pharmacy had an information governance procedure and the RP had completed some online training. She explained how the pharmacy kept people's private information safe and confidential waste was segregated and shredded. No confidential information was visible to the public as patients accessed the premises by appointment only and were escorted through to the consultation room. The RP held her own NHS Smartcard and the pharmacy was registered with the Information Commissioner's Office.

The RP had completed safeguarding training and a certificate of training was presented. The contact details of local safeguarding agencies were accessible.

Principle 2 - Staffing ✓ Standards met

Summary findings

The pharmacy team members manage the workload effectively. And they complete some ongoing training to help keep their knowledge and skills up to date.

Inspector's evidence

The pharmacy team comprised of the RP and a part-time dispenser, who was the other director of the company which owned the pharmacy. He had begun working in the pharmacy since dispensing activity had commenced, and he was not present at the inspection. The pharmacy also employed a delivery driver on a zero-hour contract. The staffing level was suitable for the current volume of dispensing. There were times where the RP self-checked her own dispensing. But she explained that the current low volume of dispensing usually allowed her to leave at least a day between dispensing and checking to help identify any mistakes. There was a plan in place for the dispenser to increase his working hours if the workload in the pharmacy increased. And the RP had contacts for locum pharmacists and dispensers in the case of any sickness or unplanned absences.

The dispenser was not yet enrolled on a dispensing training course, but the RP understood the requirement that enrolment should be completed within three months of commencing the role of dispenser. The RP provided a folder of certificates showing the recent training modules that she had completed in order to commence some new services from the pharmacy in the coming weeks. The RP felt that she and the other director worked well together to manage the workload and there were no targets in place for professional services.

Principle 3 - Premises ✓ Standards met

Summary findings

The pharmacy is suitably maintained and provides sufficient space for the current volume of dispensing. Its website provides clear information about the pharmacy. And the pharmacy has a consultation room so that people can speak to pharmacy team members in private.

Inspector's evidence

The pharmacy was located inside a unit on a business park. It was suitably maintained, and any issues with the premises were escalated to a contractor who managed the business park. A maintenance contractor attended at the business park regularly and had been swift to resolve a previous issue. There was appropriate lighting throughout and the ambient temperature was suitable for the storage of medicines. Team members had access to a small tearoom area and WC facilities which had appropriate handwashing materials.

There was adequate space for dispensing, with four large desks used for different parts of the process including dispensing, accuracy checking, deliveries and queries. Medicines were stored on large shelving units and additional storage areas were available. The pharmacy had a consultation room which was accessible through the dispensary. Patients accessing the premises were escorted to the room by the RP and care was taken to ensure that no confidential information was visible.

The pharmacy's website provided the details of the superintendent pharmacist and GPhC registration number, including how both of these could be checked. The pharmacy's location was also clearly stated.

Principle 4 - Services ✓ Standards met

Summary findings

The pharmacy's services are generally accessible and suitably managed so that people receive appropriate care. It gets its medicines from reputable sources and team members complete checks to help make sure medicines are suitably stored and fit for supply.

Inspector's evidence

The pharmacy's services were advertised through its website, but there were some services such as a urinary tract infection test and treat service which were no longer available. The RP explained that services commissioned within the area had changed slightly with the introduction of the Pharmacy First service and agreed to update the website to reflect this. The pharmacy opening hours and contact details were also clearly displayed. The pharmacy had also issued leaflets within the local area to promote its services. There was a health promotion zone on the pharmacy's website which linked to NHS health resources.

Prescriptions were dispensed using baskets in order to keep them separate and reduce the risk of medicines being mixed up. The pharmacy patient medication record system scanned medicines which were being dispensed to help detect any errors. Each user had an allocated account which restricted the activity dependent on their role. For example, the RP was the only user who could complete a clinical check of a prescription. The system kept an electronic record of the accounts involved in dispensing and checking processes and this was linked to a QR code on the dispensing label. The RP was aware of recent guidance regarding the supply of valproate-based medications and had up to date guidance materials. She had discussed the monitoring plans of a patient on a high-risk medicine with the relevant care home and prescriptions for CDs were highlighted to help ensure supplies were made within the valid 28-day expiry date.

The overwhelming majority of the pharmacy's dispensing workload was from four local care homes and the work was planned on a four-week schedule. Team members at each care home requested repeat medications from the GP surgery and they provided an audit trail to the pharmacy. The RP checked returned prescriptions and any discrepancies were escalated, as appropriate. The care home informed the pharmacy of any interim and urgent prescriptions that were issued out of cycle. The pharmacy had a cut-off time for same day supplies and if a medication was out of stock, or could not be supplied in time, care homes were signposted to other local pharmacies in the area. A small number of non-care home patients requested their medicines directly from the GP surgery. All medications were delivered, usually by the RP or delivery driver and signatures were obtained as confirmation of delivery. The pharmacy also held an account with Royal Mail and a tracked service was used to help ensure the safe delivery of medicines. Fridge items were transported in cool bag with ice packs, and a thermometer to help ensure the appropriate ambient temperature was maintained.

The pharmacist had completed training for the ear micro suction service and the necessary equipment was available. This was sterilised between each use. Any issues detected during the procedure were referred to consultants working for the company for further advice. Training had also been completed for the administration of the flu vaccination, although requests for this had decreased in the new year. A vaccination kit including adrenaline and a sharps bin was available. A contract for the spring COVID-19

vaccination service had been received in the days prior to the inspection, which the RP was in the process of completing.

The pharmacy had signed up to begin to offer the Pharmacy First service. The RP explained that this would be available after some IT issues had been resolved. They had access to a secure video calling facility and the pharmacist had completed all relevant training. Copies of training records, clinical pathways, and patient group directives were available.

A local sexual health service had also recently commissioned the pharmacy to provide a contraceptive service. The pharmacy had completed training modules for this and a service specification was available ready for the service to launch.

Stock was sourced from a few licensed wholesalers and a contract was in place with a supplier for unlicensed specials. Stock medicines were stored in the original packaging provided by the manufacturer and a recent date check had been completed when the pharmacy had acquired the stock. A date checking matrix as in place to use moving forward. No expired medicines were identified from random checks of the dispensary shelves. Obsolete medicines were stored in medicines waste bins. Alerts for the recall of faulty medicines and medical devices were received via email and an audit trail was maintained.

The pharmacy fridge was fitted with a thermometer and the temperature was within the recommended range. A temperature log was completed each day by the RP. CDs were stored securely, and a random balance check was found to be correct.

Principle 5 - Equipment and facilities ✓ Standards met

Summary findings

The pharmacy has the equipment and facilities it needs for the services it provides. Team members suitably maintain the equipment, and they use it in a way that protects people's privacy.

Inspector's evidence

The pharmacy had internet access to support any necessary research. There was a clean glass liquid measure available. This did not measure quantities below 10mL. The pharmacist explained that a syringe would be used to measure smaller volumes. Counting triangles for tablets were available and equipment seen was clean and suitably maintained.

Electrical equipment was in working order. Computer systems were password protected and a cordless phone was available to enable conversations to take place in private.

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.