

# Registered pharmacy inspection report

**Pharmacy Name:** Premier Chemist, Second Floor, Suite 6B,  
Landchard House, Victoria Street, West Bromwich, West Midlands,  
B70 8HY

**Pharmacy reference:** 9012415

**Type of pharmacy:** Internet / distance selling

**Date of inspection:** 12/11/2024

## Pharmacy context

This pharmacy is closed to the public. It is located within an office building near to West Bromwich town centre. The pharmacy does not offer NHS services. It mainly supplies non-surgical cosmetic products on behalf of [www.fillerworld.com](http://www.fillerworld.com) and occasionally for another third-party website. And the pharmacy also dispenses a small volume of veterinary prescriptions and supplies pet medicines through [www.smartvetmeds.com](http://www.smartvetmeds.com).

## 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
<b>1. Governance</b>	Standards met	N/A	N/A	N/A
<b>2. Staff</b>	Standards met	N/A	N/A	N/A
<b>3. Premises</b>	Standards met	N/A	N/A	N/A
<b>4. Services, including medicines management</b>	Standards met	N/A	N/A	N/A
<b>5. Equipment and facilities</b>	Standards met	N/A	N/A	N/A

## Principle 1 - Governance ✓ Standards met

### Summary findings

The pharmacy assesses the risks associated with the services that it provides and considers what steps are necessary to mitigate them. It keeps people's personal information safe and maintains the records it needs to by law. The pharmacy has procedures to make sure the team works safely, and team members are clear about their roles.

### Inspector's evidence

The main activity the pharmacy completed was the supply of non-surgical cosmetic treatments. These were supplied to practitioners for them to administer to people. Most of the items supplied were requested through the website [www.fillerworld.com](http://www.fillerworld.com). Both Fillerworld and Smartvedmeds were closely associated with the owners of the pharmacy.

The pharmacy had produced several written risk assessments for the services it provided, such as prescriber verification through Fillerworld, dispensing prescriptions for Botox, fillers, threads, and prescription delivery, including cold chain deliveries. A new risk assessment had been created for its working arrangements with Faces Consent, a third-party website offering supplies of non-surgical cosmetic treatments. The risk assessments covered the key risks involved, including the actions the pharmacy had taken to mitigate these risks. The pharmacy had current professional indemnity insurance available.

There were a range of standard operating procedures (SOPs) covering operational activities in the pharmacy. The procedures had been reviewed in 2024 by a dispenser and the superintendent pharmacist (SI). Team members had signed the SOPs to show they had read and understood them. The roles and responsibilities of team members were stated within the written procedures, so they knew what processes they were responsible for.

Prescribers registered an account with the Fillerworld website, which allowed them access to the 'ePrescription' function. They provided the details of their professional registration. A photographic identity document, proof of professional indemnity insurance, and aesthetic training or competency records were also requested. These details were checked and verified by a member of the team when an account was created. If any of the required details were missing, a team member contacted the prescriber to obtain the relevant information. An account was not authorised until all the information was received. Reconfirmation of professional registration, including a check for any conditions on a practitioner's practice, took place with each separate prescription order that was placed thereafter. An audit trail confirming these checks had been completed was recorded on the practitioner's account profile. The prescribers registered with the website were from various healthcare professions, including doctors, dentists, nurses, and pharmacists. For each electronic prescription generated, prescribing practitioners were required to submit a self-declaration that a physical examination of the person receiving the treatment had been carried out. The date of birth of each person receiving treatment was also supplied, as confirmation that treatments were not being carried out on individuals that were under the age of 18. Restricted accounts were set up for practitioners without the authority to prescribe. In this case, they could only purchase non-prescription items and medical devices.

Some prescriptions were received from Faces Consent <https://facesconsent.com/>, which was an

independent third-party platform. Practitioners using the platform were able to register for an account which provided them with access to the website's ePrescription portal. Pharmacy team members were not involved in the account registration process, but they had access to the 'back-end' and so they could check additional information such as photographic ID and proof of professional indemnity insurance had been provided. Pharmacy team members also completed their own checks of prescribers' professional registration, to help ensure that they were satisfied that these independent checks had been completed appropriately. Each prescription generated from Faces Consent required the practitioner to agree to several terms and conditions. As part of this agreement, one of the terms was that the practitioner confirmed that the appropriate clinical and physical assessments had been completed and that they were following all relevant prescribing guidance.

The correct responsible pharmacist (RP) notice was clearly displayed, and the RP log was in order. A private prescription register was maintained electronically and contained the details required. Records for veterinary prescriptions were recorded in a paper register. A few unlicensed medicines had been supplied and the associated records were maintained. The pharmacy did not supply controlled drugs (CDs).

There was information on the General Data Protection Regulation and how sensitive information was used and processed on each of the associated websites. The pharmacy was registered in the Information Commissioner's Office and a certificate of registration was displayed in the pharmacy. Confidential waste was disposed of using a shredder. The RP and one of the dispensers had completed training to help safeguard vulnerable people.

## Principle 2 - Staffing ✓ Standards met

### Summary findings

Pharmacy team members are suitably trained for the jobs that they do, and they manage the workload well. Team members work well together in a supportive environment, where they feel comfortable to provide feedback and raise concerns.

### Inspector's evidence

The pharmacy team comprised of the pharmacist, who was also the SI, and two qualified dispensers. The SI was usually only present in the pharmacy for a few hours each day. This was sufficient for the current workload in the pharmacy. In the absence of the pharmacist, team members completed administration tasks. Leave was usually planned to help make sure service levels were consistent. Team members completed some ad-hoc training to keep up to date such as data protection and safeguarding. And the SI shared learning they had completed about aesthetic treatments and products.

The SI had completed a training course in aesthetics as part of her continuing professional development. The pharmacy team members worked closely together. The dispenser explained that she escalated any concerns or queries to the pharmacist and provided several examples of there being an open dialogue when making decisions arising from prescription queries. Pharmacy team members could also contact the company director to escalate any issues.

## Principle 3 - Premises ✓ Standards met

### Summary findings

The premises are clean and well maintained. It provides a suitable space for the provision of healthcare services. The two websites associated with the pharmacy detail the information required so people know who is providing the services.

### Inspector's evidence

The pharmacy was located inside a large unit in an office block. The unit was in a good state of repair. There were large shelving units used for the storage of medicines, desks for the completion of administration tasks and additional workspace available for dispensing. An office room was available for team members to use if they needed to have a private conversation. There was adequate lighting throughout and the ambient temperature was suitably maintained. The pharmacy was secured overnight.

Both the Fillerworld and smart-vet-meds websites displayed the details of the pharmacy, including the registration number, address and details of the superintendent pharmacist. Links were also included to enable website users to check the relevant registration details.

## Principle 4 - Services ✓ Standards met

### Summary findings

The pharmacy's services are accessible and suitably managed to help make sure they are provided safely and effectively. The pharmacy sources and stores its medicines appropriately and it carries out regular checks to help ensure that medicines are kept at the right temperature when they are transported.

### Inspector's evidence

People using pharmacy services contacted the pharmacy via telephone or email. The contact number was included on dispensing labels. The details of the pharmacy, including a direct email address were also displayed on the Fillerworld and smart-vet-meds websites associated with the pharmacy.

Prescriptions were dispensed in baskets to keep them separate and reduce the risk of medicines being mixed up. An audit trail for dispensing was maintained on dispensing labels and on order invoices which accompanied prescriptions and were retained in the pharmacy. Prescriptions were received electronically and were printed before the appropriate stock was selected and dispensed. The pharmacist reviewed each prescription and explained that she would query any large volumes of items such as toxins to help ensure that they were being used appropriately. And they made a record of this on an intervention log so they could respond to any subsequent queries. The most common products were kept in stock and pharmacy team members explained that they contacted practitioners to advise them of any delays to their order. Once dispensed and checked medicines were securely packaged for delivery.

Standard items were placed in discreet cardboard boxes labelled with the delivery address. Cold chain items were stored in the fridge and were packaged in polystyrene boxes, with accompanying ice packs, which were assembled and sealed immediately prior to the courier collecting them. These medicines were also labelled to indicate the need for immediate refrigeration upon arrival.

Prescriptions were delivered by a courier with a specified next day delivery. Delivery was requested by 12 noon for cold chain deliveries. The pharmacy completed a delivery audit with each change in season, where a data logger was used to confirm that the temperature range stayed within acceptable limits during the delivery process. Records of this were retained in the pharmacy for reference.

Medicines were stored in an organised manner and in the original packaging provided by the manufacturer. A stock audit and date check were completed each month and no expired medicines were identified during random checks. Obsolete medicines were stored in a medicine waste bin. The pharmacy received alerts for the recall of faulty medicines and medical devices. An audit trail was kept for relevant alerts to demonstrate what action the pharmacy had taken, if any.

The pharmacy fridge was fitted with a maximum and minimum thermometer. The temperature was checked and recorded each day and the fridge was within the recommended temperature range. There was also a freezer, which stored ice packs used as part of the delivery process.

## Principle 5 - Equipment and facilities ✔ Standards met

### Summary findings

The pharmacy has the equipment it needs for the services it provides. And team members use the equipment in a way that protects people's privacy.

### Inspector's evidence

The pharmacy had access to up-to-date resources through unrestricted internet access. Electrical equipment appeared to be in good working order and there was no risk of information being seen or telephone conversations overheard as public access to the pharmacy was restricted.

### What do the summary findings for each principle mean?

Finding	Meaning
<span style="color: green;">✔</span> <b>Excellent practice</b>	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.
<span style="color: green;">✔</span> <b>Good practice</b>	The pharmacy performs well against most of the standards and can demonstrate positive outcomes for patients from the way it delivers pharmacy services.
<span style="color: green;">✔</span> <b>Standards met</b>	The pharmacy meets all the standards.
<b>Standards not all met</b>	The pharmacy has not met one or more standards.