

Enforcement action summary (Improvement Notice Met)

Pharmacy trading name: Gt. Berry Pharmacy

Pharmacy address:

Unit 4 Gt Berry Centre, Nightingales, Langdon Hills, Basildon, Essex, SS16 6SA

Premises registration number:

1031017

Enforcement action taken:

Issuing of an improvement notice - (Article 13 of the Pharmacy Order 2010)

Effective date:

25/03/2022

Premises standards failed:

1.1, 1.2, 1.6, 1.7, 2.2, 3.1, 4.2, 4.3 and 5.2

Summary:

At an inspection of the registered pharmacy on 21 March 2022, the inspector has found system wide failures in the operation of the pharmacy which presents a serious risk to patient safety. The pharmacy does not identify and manage all of the risks involved with its services. The pharmacy has failed to provide assurances that suitable controls are in place to make sure that medicines are stored and supplied safely. There are also serious systemic weaknesses in the management of controlled drugs, including failures to meet legislative requirements particularly in relation to record keeping and storage. Similar issues have been identified on previous inspections of the pharmacy.

Improvements required:

1. You must ensure that the pharmacy standard operating procedures are up to date and that all matters detailed in The Medicines (Pharmacies) (Responsible Pharmacist) Regulations 2008 are included. You must be able to demonstrate how services are provided by staff in accordance with the standard operating procedures.

2. You must make entries into the controlled drugs registers within the required timeframe as set out in the Misuse of Drugs Regulations 2001 (as amended). And you must ensure that all entries in the controlled drugs registers are brought up to date and any further records are made in accordance with the requirements in the Misuse of Drugs Regulations 2001 (as amended).
3. You must ensure responsible pharmacist records are made as specified in The Medicines (Pharmacies) (Responsible Pharmacist) Regulations 2008
4. You must ensure confidential waste is destroyed securely. And you must ensure confidential information is stored securely and not accessible to members of public using the pharmacy. Confidential patient records such as the private prescription register must be kept securely in the pharmacy.
5. All members of the pharmacy team must receive appropriate training relevant to their roles within the required timescales set out by the GPhC. Training records must be available showing their training and qualifications, together with records to show which SOPs they have read and agreed to follow. You must develop and implement an audit plan to monitor compliance with SOPs.
6. You must ensure that all controlled drugs requiring safe storage are stored in accordance with legal requirements and secure. And you must be able to demonstrate that you have robust systems to correctly store and account for out-of-date or patient-returned controlled drugs.
7. You must demonstrate that medicines requiring refrigeration are stored in accordance with the manufacturer's recommendations. And you must be able to show that you have robust systems to monitor and record the fridge temperatures on an ongoing basis.
8. You must ensure the pharmacy premises is safe, clean and maintained to a level of hygiene appropriate to the pharmacy services provided. This includes ensuring the premises are kept tidy, there is an adequate amount of clear workspace, and that the fire escape is not blocked.
9. Dispensed medicines must be labelled appropriately, as set out in Part 13 of the Human Medicines Regulations 2012 (as amended).
10. You must ensure equipment for measuring liquids is suitable.

Deadline for compliance:

25/04/2022

Outcome:

Met