

# Enforcement action summary (Improvement notice)

**Pharmacy trading name: T H Dolman Ltd**

Pharmacy address: 9 Linkfield Corner, Redhill, Surrey, RH1 1BD

**Premises registration number:**

1036725

**Enforcement action taken:**

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

**Effective date:**

23/05/2024

**Premises standards failed:**

1.1, 1.4, 1.6, 2.1, 3.1, 4.2, 4.3 and 5.2

**Summary:**

Following an inspection at the pharmacy on 6 June 2023, and subsequent inspections on 29 February 2024 and again on 25 April 2024, the pharmacy was found not to be meeting all the standards and little or no improvement had been made, or sustained, between inspections. The failings included inadequate management of controlled drugs (CDs) with respect to storage and record keeping, as well as other failings in relation to the appropriate storage and monitoring of medicines that require refrigeration. Other system wide failings were also found. There were issues which were identified at previous inspections which have re-occurred repeatedly.

**Improvements required:**

- 1) The pharmacy owner must make sure:
  - there are up-to-date standard operating procedures (SOPs) that meet the requirements of The Medicines (Pharmacies) (Responsible Pharmacist) Regulations 2008 and cover all the services the pharmacy provides.

- the SOPs are available at the pharmacy, reviewed regularly and are read and signed by those who work at or for the pharmacy.
- people who work at or for the pharmacy follow the SOPs.

The pharmacy owner needs to show who is responsible for a particular pharmacy service, such as the dispensing process, at any given time. And makes sure the pharmacy keeps a record to show it has delivered the right medicine to the right person.

2) The pharmacy owner must demonstrate that it takes into account and takes appropriate action in response to feedback or concerns raised about the pharmacy by individuals or organisations such as the General Pharmaceutical Council.

3) The pharmacy owner must make sure the pharmacy maintains up-to-date controlled drug (CD) registers in accordance with The Misuse of Drugs Regulations 2001. And it must make sure the CD registers are available for inspection at or from the pharmacy.

The pharmacy owner must make sure the private prescription records are up to date, available for inspection at or from the pharmacy and maintained in line with legal requirements.

4) The pharmacy owner must make sure the pharmacy has enough suitably qualified and skilled staff to manage the workload and deliver services safely and effectively.

5) The pharmacy owner must make sure the pharmacy premises are safe, clean, properly maintained and suitable for the pharmacy services provided. The pharmacy needs to be tidied with clutter and obstacles being removed from:

- within and outside of the consulting room
- the corridor leading to the stockroom
- the stockroom
- the worksurfaces and flooring in the dispensary and behind the pharmacy counter

6) The pharmacy owner must make sure that medicines that require refrigeration are stored within the appropriate temperature range (between 2°C and 8°C). And a record of the temperature range for any refrigerator used to store these medicines is maintained for each day the pharmacy is open.

The pharmacy owner must make sure that CDs, which are **not** exempt from safe custody requirements, are stored in line with The Misuse of Drugs (Safe Custody) Regulations 1973.

7) The pharmacy owner must make sure that the pharmacy has equipment (refrigerator) that is safe to use, fit for purpose, appropriately maintained and is of an adequate size to store medicines that require refrigeration. And the equipment (thermometer) used to check the temperature range of the refrigerator(s) is used properly by those who work at the pharmacy.

**Deadline for compliance:**

18/07/2024

**Outcome:**

Not Met – referral to a Fitness to Practise (FTP) Committee to consider disqualification