

# **Enforcement action summary** (Improvement notice)

**Pharmacy trading name: Rana Dispensing Chemist** 

## **Pharmacy address:**

Finch Road Primary Care Centre, Finch Road, Lozells, Birmingham, West Midlands, B19 1HS

# **Premises registration number:**

1097587

### **Enforcement action taken:**

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

### **Effective date:**

12/09/2022

### Premises standards failed:

1.1, 1.6 and 4.3

### **Summary:**

At an inspection on 7 June 2022, the inspector identified system wide failures in the governance and management of risk at the pharmacy. Pharmacy services are not being managed and delivered in a way that safeguards the health, safety and wellbeing of patients and the public, in particular with the way controlled drugs and some high-risk medicines are managed.

### Improvements required:

- 1. Undertake a complete balance check audit for all schedule 2 controlled drugs. This should include a physical count of all schedule 2 controlled drugs held in stock and comparison with running balances recorded in the register.
- 2. Fully investigate any discrepancies found during the balance check audit to identify the reasons. Investigations should include audits of controlled drug registers to ensure that all CDs received from wholesalers and all supplies made to patients have been entered correctly. Any unresolved

discrepancies must be reported to the Controlled Drug Accountable Officer using the online reporting tool.

- 3. Review the pharmacy's controlled drug standard operating procedures (SOPs) and incorporate a regular running balance check audit. The SOPs must specify how often balance audits will be carried out and who will be responsible for ensuring they are done. The SOPs should also outline the action to be taken in the event of a discrepancy. SOPs must also stipulate the need for the relevant balance to be checked every time a schedule 2 CD is dispensed.
- 4. Undertake a review of the pharmacy's SOPs to ensure they are complete, current, and cover all of the services provided by the pharmacy. This should include procedures for dispensing high-risk medicines, such as valproate.
- 5. Be able to demonstrate that the pharmacy team have read and understood the SOPs and that members of the team are following SOPs relevant to their roles.

Пешье	is of the team are	e following 30P3 re	elevant to their roles	)•	
Deadline for	compliance:				

Outcome:

11/10/2022

Met