

**M O D E L
STANDARDS
FOR SELF AUDIT
IN COMMUNITY
PHARMACY
IN ENGLAND**

5

Premises and Equipment

Department of Pharmacy Policy and Practice
Keele University

October 1994



INTRODUCTION TO AUDIT STANDARDS

The purpose of this document is to:-

- define the main aspects of professional pharmacy practice
- propose criteria for good service in each aspect
- list standards of practice which contribute to successful accomplishment of each criterion.

What is contained in the manuals?

You will find criteria which reflect good pharmaceutical care. Proposed standards are given and it is these which can be amended to reflect your particular practice. Should a standard be mandatory, this is brought to your attention in the text.

Delete any standard which is not applicable to your situation. If you find that you undertake activities not covered by these booklets, add standards to cover them.

Most of the standards given are for self-audit of activities which take place on pharmacy premises. These activities are generally considered to be the core business of community pharmacy. You will be able to carry out audits which measure current “ability” against such standards and, thus, enable you to improve your practice should it be necessary.

The appendices contain written systems of work. Such protocols are becoming increasingly necessary to demonstrate adherence to good standards of practice. They are model documents to be amended as necessary for an individual pharmacy.

How were the standards determined and for what purpose?

Professional audit is a process which can help an individual or group to achieve and maintain standards of practice within their everyday working environment. The standards to be achieved are chosen by the people involved and are usually based on professional or business requirements.

These manuals have been produced, with the help of a grant from the Department of Health, by a research team at Keele University. They contain suggested criteria which can be used as written or amended to suit your situation.

The research team developed an initial list of criteria and possible standards. After discussion with a steering group of practising community pharmacists, a second draft set of standards was produced. The initial standards were amended and widened to include further aspects of practice.

A pharmacist researcher visited all participating pharmacies to measure the relevance of the proposed standards to pharmacy practice. Following this observational analysis, results from this study were anonymised and fed back to the participating pharmacists for further comment and discussion. It became clear that:

- **Some of the proposed standards were only necessary in some, not all, pharmacies**
- **Other standards were not currently achieved but could easily become so if pharmacists were given model written systems for adaptation**

For every aspect of standard setting the team sought to identify suitable outcome measurements. Pharmacists could then use them, within an audit cycle, to show the benefits of standard setting within their practice.

The refined standards were then sent to 100 community pharmacists in a number of locations to seek their views. All comments received were considered by the research team and the standards modified when appropriate.

How to use the manual

1. Choose an aspect of practice that you wish to audit. Discuss areas of concern with your staff. This will highlight particular problems which worry everyone. Narrow them down to one question which everyone feels needs to be answered.
2. Explain the purpose of the audit you are undertaking to everyone concerned. Emphasise that audit is to improve work flow, give better patient care, identify gaps in advice giving, not to find fault. If the exact purpose of the study is explained to all those involved in it, everyone should benefit.
3. Look through the criteria to find which set of standards applies to the question chosen for the audit. Decide which are relevant and delete any which do not apply. There may be other standards which relate to your situation. Add them if necessary.
4. Think about the period of time or the number of prescriptions which will be studied during the audit. Do not attempt too much. An audit gives a “snapshot in time” result and is not meant to be continuous process. The same “picture” can be taken at a point in the future to see how things have changed.
5. Decide who will collect the data and when and how they will do it. Consider the most appropriate time for data collection. It will not help you to only look at the process during a “quiet time”. Counselling may be easy when there are few prescriptions but more difficult when dispensing is in full swing!
6. Collect the data.
7. Look at the results and compare them with the standards which seemed to be appropriate to your audit question. If all standards have been met you may decide to set more challenging targets when you repeat the audit. If you were unhappy with the results, look at ways you could improve the situation. These may involve changes in procedure, staff training or developing written material for staff or patients.
8. Implement any changes which will improve your services to patients.
9. Re-audit, after a suitable period of time, to monitor the effectiveness of any changes.
10. Advertise your achievements! The staff involved should already know how the study turned out but the people you service and your purchasers, such as the Health Authority, local surgeries or Social Services, may also find the results interesting.

Introduction to Premises and Equipment Standards

The following criteria and standards ensure a high quality of premises and equipment.

Throughout this document where the standards proposed are close in wording or intent to those referred to in Royal Pharmaceutical Society documents this has been indicated. These are annotated as legal (L), ethical (E) and standards of good professional practice (S).

Criteria

- 5.1 *Premises management ensures the well being of all customers and staff.*

- 5.2 *Relevant information is accessible to customers.*

- 5.3 *A comprehensive policy exists which ensures security in the pharmacy is maintained.*

- 5.4 *The pharmacy is securely maintained.*

5.1 Criterion

Premises management ensures the well being of all customers and staff.

Standards

	Scoring	Score
1. All RPSGB requirements for standards of premises and equipment are met.*	Yes=4 No=0	
2. Every effort is made to accommodate disabled customers.	Yes=1 No=0	
3. A cleaning procedure exists for all parts of the premises.	Yes=1 No=0	
4. A no smoking policy exists.	Yes=1 No=0	
5. Adequate seating is available for:		
a. customers**	Yes=0.5 No=0	
b. staff	Yes=0.5 No=0	
6. Medicines are displayed separately from non-medicinal products.	Yes=2 No=0	
Total Score	####	

RPSGB References

* S 1.1 - 1.7 - Standards for Premises

S 2.1 - 2.7 - Standards for dispensary design and equipment.

** Legal requirement under Offices, Shops and Railway Premises Act.

Measurement Options

- Maintenance of a cleaning procedure.
- Maintenance of a customer complaint book to identify complaints related to access and seating.

Outcome for the Pharmacist

Compliance with the requirements of the Royal
Pharmaceutical Society.

**Outcome for the Patient, General
Practitioner and/or FHSA.**

Patient Comfort.

5.2 Criterion

Relevant information is accessible to customers.

Standards

1. The certificate of the pharmacist on duty is displayed.*
2. Technicians certificates are displayed.
3. Practice leaflets are available.
4. Health promotion leaflets are available.
5. All statutory notices are clearly displayed*.

Scoring	Score
Yes=2 No=0	
Yes=2 No=0	
Yes=2 No=0	
Yes=2 No=0	
Yes=2 No=0	
#####	

Total Score

RPSGB Reference

*L

Measurement Option

- Record which leaflets are taken and any recurrent questions to staff.

Outcomes for the Pharmacist	Outcome for the Patient, General Practitioner and/or FHSA.
Increased use of available services.	Knowledge of the services available from the pharmacy.
Use of pharmacist's knowledge of health promotion.	Knowledge of qualifications of dispensary staff.

5.3 Criterion

A comprehensive policy exists which ensures security of the pharmacy is maintained.

Standards

1. Dispensary access is limited to authorised personnel.
2. A health and safety procedure has been read and signed by all staff.*
3. An accident book exists.*
4. Fire extinguishers are checked regularly.*
5. The fire procedure is known by all staff.*
6. Electrical equipment is regularly maintained.

Scoring	Score
Yes=2 No=0	
Yes=2 No=0	
Yes=2 No=0	
Yes=2 No=0	
Yes=1 No=0	
Yes=1 No=0	
####	

Total Score

RPSGB Reference

* Health and Safety at Work Act

Measurement Options

- Test fire drill.
- Examination of accident book.

Outcome for the Pharmacist	Outcome for the Patient, General Practitioner and/or FHSA
Staff and customer safety.	Patient safety.

5.4 Criterion

The pharmacy is securely maintained.

Standards

1. A suitable alarm system exists.
2. Alarm system is regularly checked.
3. A panic button exists.
4. All staff are aware of procedure to follow if demands are made for cash or medicines.
5. An opening and locking up procedure exists.

Scoring	Score
Yes=2 No=0	
Yes=2 No=0	
Yes=2 No=0	
Yes=2 No=0	
Yes=2 No=0	
####	

Total Score

Measurement Options

- Maintenance of a written record of services for the alarm.
- Test staff knowledge of response to emergency situations.

Outcomes for the Pharmacist	Outcome for the Patient, General Practitioner and/or FHSA
Improves staff safety.	Secure storage of medicines.
Reduces insurance premiums.	