



**L-Università ta' Malta**  
Faculty of  
Medicine & Surgery

Department  
of Pharmacy

## **Validation Tools for Community Pharmacy**

Internal Validation Tool 1

## Tool 1

### THE SETTING OF THE COMMUNITY PHARMACY

The pharmacy setting can alter the quality of patient care and may influence patient satisfaction. An appropriate setting may influence the patient's expectations of pharmacy services.

Number of clinics

Separate toiletries area YES/NO

Separation of display of medicines from other merchandise YES/NO

*The tool is used once for every community pharmacy being studied. It is advisable to perform the tool after the completion of all the other tools. In this way the monitor acquires more background information on the pharmacy by the time this tool is used. Base the assessment on observations made and where necessary on information obtained from the managing pharmacist. For each step choose the relevant statement(s) as appropriate. Before proceeding any further refer to Definition Sheet 01.*

#### 1. PHARMACY LICENSES

*Tick where applicable*

- |   |   |
|---|---|
| i All pharmacy licenses and permits are current                           | <div style="border: 1px solid black; padding: 2px 5px;">2</div> |
| ii All pharmacy licenses are properly displayed or filed as appropriately | <div style="border: 1px solid black; padding: 2px 5px;">2</div> |

- iii The name of the managing pharmacist, address and telephone number are displayed on the outside of the pharmacy 2
- iv The pharmacies opening on Public Holidays and Sundays according to the rosters issued by the Department of Health are displayed on the outside of the pharmacy 2
- v The managing pharmacist and all pharmacists working at the pharmacy are legally qualified and appropriately licensed 2

## 2. STAFFING

*Tick one*

- i The managing pharmacist is employed on a full-time basis 10
- ii The managing pharmacist has contacts with locum pharmacists when he takes leave 10
- iii The managing pharmacist is employed on a part-time basis and is assisted by additional pharmacists to ensure that a pharmacist is available to give services to the community at all times when the pharmacy is open
- One to two part-time pharmacists 8
- Three to five part-time pharmacists 7
- Five or more part-time pharmacists 6

## 3. APPEARANCE OF THE PHARMACY

*Tick where applicable*

- i The pharmacy is suitably ventilated and lighted 3
- ii The pharmacy is kept clean 4
- iii The pharmacy is maintained in an orderly and tidy condition 3

#### 4. THE PHARMACY IS ACCESSIBLE

*Tick where applicable*

- i Doors are not obstructed by the exhibition of merchandise 3
- ii Entrance and doorways are wide enough to allow pushchairs/wheelchairs to enter 4
- iii There is a separate entrance to the doctor's clinic 3

#### 5. THE ENVIRONMENT WITHIN THE PHARMACY

*Tick where applicable*

- i The pharmacy does not encourage sale of ordinary confectionery by impulse purchase at till points or at the medicines counter 3
- ii *In the pharmacy* There is a separate area for counseling within the pharmacy 4
- iii The dispensing counter does not obstruct the communication between the patient and the pharmacist 3

#### 6. DISSEMINATION OF HEALTH RELATED INFORMATION

*Tick where applicable*

- Health promotion material (for example, leaflets and posters distributed by the Department of Health) which can increase the patient's knowledge and understanding of the health issues relevant to their personal circumstances are available in the pharmacy 2
- Health promotion advertisements are displayed in the pharmacy 2
- Pharmacist is able to identify patients who can benefit from opportunistic advice and appropriate advice is given 2

Prescription linked advice is given by the pharmacist

2

The pharmacist has at hand an updated list of additional sources of information and advice

2

## 7. PARTICIPATION IN HEALTH RELATED CAMPAIGNS

*Tick if applicable*

Pharmacy participates in Health related campaigns

*Tick one*

The pharmacy has participated in:

a. 1-2

1

b. 3-4

2

c. 5-6

3

d. All or >6

4

Health campaigns during the last 12 months

*Tick one*

How many people were provided with advice by the pharmacist in a day?

- |      |                          |
|------|--------------------------|
| None | <input type="checkbox"/> |
| Few  | <input type="checkbox"/> |
| Some | <input type="checkbox"/> |
| Many | <input type="checkbox"/> |

## 8. PROFESSIONAL IMAGE IN THE PHARMACY

*Tick where applicable*

- |   |                          |
|---|--------------------------|
| i Pharmacist wearing lab coat   | <input type="checkbox"/> |
| ii Pharmacist wearing an identity card showing name, designation and registration number                        | <input type="checkbox"/> |
| iii There is a dress code for pharmacist  | <input type="checkbox"/> |
| iv Background music or other broadcasts in the pharmacy are not played at such a volume as to cause distraction | <input type="checkbox"/> |

## 9. TOILET FACILITIES AVAILABLE

*Tick where applicable*

- |  |                          |
|--|--------------------------|
| i Toilet does not open directly into dispensary  | <input type="checkbox"/> |
| ii Toilet is kept clean and in good order  | <input type="checkbox"/> |
| iii Toilet is not used as a source of water for dispensing or as a storage area            | <input type="checkbox"/> |
| iv Hand washing facilities in the toilet include hot and cold water, soap and nail brushes | <input type="checkbox"/> |

v There are hand dryer or toweling facilities in the toilet 2

## 10. WINDOW DRESSING OF THE PHARMACY

*Tick where applicable*

i Sign denoting pharmacy on the outside 5

ii Main door is not obscured by notices, stickers or other materials 2

iii The shop window displays health promotion advertisements and items related to the pharmacy 3

## 11. THE SIZE AND AREA OF THE DISPENSARY

The size of the dispensary is:

*Tick where applicable*

i Is adequate for the volume of dispensing carried out 3

ii Allows effective communication and supervision 2

The dispensing area is:

*Tick where applicable*

i Set in a separate part from the dispensing counter where personnel are not interrupted 3

ii Set in a secluded area 2

iii Located within the dispensing counter 1

iv Work surface is kept free of equipment, supplies, records and labels 2

v Work surface is cleared prior to use 2

## 12. IN THE DISPENSARY

*Tick where applicable*

- |   |   |
|---|---|
| i There is a source of potable water                  | 4 |
| ii There is a wash hand basin with hot and cold water | 3 |
| iii There is a wash hand basin with cold water only   | 2 |
| iv There are facilities for waste disposal            | 3 |

## 13. FORMULARY

*Tick where applicable*

- |  |   |
|--|---|
| i There is a formulary that lists medications readily available in the pharmacy                              | 5 |
| ii The health professionals are kept regularly informed of additions, deletions and changes in the formulary | 5 |

## 14. FORMULARY SYSTEM

*Tick where applicable*

Criteria for inclusion of items to the stock list

- |                                     |   |
|-------------------------------------|---|
| i Monitoring of requests by clients | 5 |
| ii Monitoring of prescriptions      | 5 |

## 15. NON-FORMULARY REQUESTS

*Tick one*

- |  |    |
|--|----|
| i Patient is told to come again and medicine is ordered                        | 10 |
| ii Request documented for consideration for inclusion                          | 8  |
| iii Patient is told that medicine is not available and no further action taken | 2  |