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Checklist Final	فائمة التحقق النهائي
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Name of the Facility:	
Date of Inspection:/	

Ref.	General Requirements	Yes	No	N/A	Remarks
	Pharmacy is located on the ground floor and may be				
5.3.1.	located on a higher floor if it is within a commercial				
	center or mall.				
	The pharmacy provide adequate space wise for Patient				
5.3.2.	Counselling (counselling area) to enhance patient				
	convenience.				
F 2 2	The Pharmacy provide a display board on its working				
5.5.5.	hours and the pharmacy shifts' schedules (if applicable).				
524	Counselling (counselling area) to enhance patient convenience.  The Pharmacy provide a display board on its working				
5.3.4.	name as per the DHA and DED license.				
525	Pharmacy meet the building standards required by				
5.3.4. 5.3.5. 5.3.6.	Dubai Municipality or free zone authorities.				
526	Consideration given to provide access to "People of				
5.3.5.	Determination".				
E 2 7	Pharmacy should enforce a strict "No smoking" policy				
3.3.7.	within the pharmacy premises.				
	Pharmacy space requirements depends on the pharmacy				
5.3.9.	categories as follows:				
J.3.3.	a. Community/Retail Pharmacy (minimum 30 m²).				
	b. Hospital Pharmacy (minimum 30 m2).				





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	c. Ambulatory care pharmacy (minimum 25 m2).		
5.3.10.	The minimum ceiling height is not less than 2.70 m (8		
5.5.10.	feet 8 inches).		
14.2.2.	All Drug Storage Areas is fitted with temperature and		
14.2.2.	humidity controls.		
	Storage areas are designed to ensure the following good		
	storage conditions:		
	a. Proper cleanliness and hygiene.		
14.2.6.	b. Dryness (relative humidity not more than 60%).		
	c. Temperature within acceptable limits (8-25		
	degrees Celsius).		
	d. Suitable spaces to permit cleaning and inspection.		
	For medications and pharmaceutical products that		
14.2.7.a	require be stored at room temperature; the temperature		
	is maintained between 15-25 degrees Celsius.		
14.2.7.f	Vaccines, is stored in a separate refrigerator where		
14.2.7.1	temperature control is between 2 and 8 degrees Celsius.		
	A temperature monitoring system may be required to be		
14.2.9.	installed and connected to a centralized alarm/ warning		
	system.		
	A sufficient back-up emergency power supply for the		
14.2.10.	refrigerator is available to ensure protection and safety		
	of medication in the event of an emergency power cut.		
14.2.11.	A digital thermometer is available in the pharmacy,		
14.2.11.	storage area and medication refrigerator to ensure the		





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	validity and stability of the products.		
14.2.12.	Temperature and humidity monitoring charts readings		
14.2.12.	are logged on a separate sheet at least twice daily.		
	The pharmacy cabinets/shelves used to display and		
	store medications appropriately includes the following:		
	a. A secured double locked steel cabinet(s) for		
	Narcotic drugs (in hospitals/DSC only).		
	b. A secured lockable steel cabinet(s) for		
14.2.13.	Controlled Drugs.		
	c. Cabinets/shelves for Prescription Only		
	Medication (POM).		
	d. A dedicated and labeled cabinet(s)/area for the		
	storage of expired medications or		
	returned/withdrawn medications		
	The Person in-charge for each setting is set out below:		
	a. Hospital pharmacy: DHA licensed Clinical		
	Pharmacist or Pharmacist.		
18.5.4.	b. Ambulatory pharmacies: DHA licensed Clinical		
	Pharmacist, Pharmacist, or Anesthesiologist.		
	c. Community (only CD and SCD): DHA licensed		
	Clinical Pharmacist or Pharmacist.		
	The main storage area for Narcotic drugs, Narcotic		
18.7.4.	register books and Narcotic prescription books are		
10.7.4.	stored in a special secured lockable cabinet(s) with		
	the following features :		





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	a. Made of steel with internal hinges.		
	b. Have a double locking system.		
	c. Be securely fixed to the wall or floor.		
	d. Non-duplicable keys.		
	e. Security/alarm system and/or security camera.		
	Narcotic drugs stored outside the pharmacy (in the		
10.7.5	inpatient units or medication room) should be placed		
18.7.5.	in a double locked steel cabinet inside a secured		
18.7.5.  18.7.7.  5.7.1  5.7.2  5.4.1  22.3.4.  5.2.1.g.ii	medication room.		
	The cabinet should be designated by a label and the		
18.7.7.	key(s) must be kept in the custody of the Person in-		
	charge or the authorized Deputy in-charge.		
18.7.7. 5.7.1 5.7.2 5.4.1 22.3.4. 5.2.1.g.ii	Taps to Hand Basins in pharmacies should be either		
	elbow-action taps or automatic taps.*		
E 7 2	Antiseptic Hand Rubs should be located so they are		
5.7.2	readily available for use.*		
5.4.1	First aid kit, Fire services and egress/ exit signs will be		
	installed in accordance with the UAE Fire and Life		
	Safety Code, Dubai Universal Design Code.*		
	Providing and easy access to soap and water or hand		
22.3.4.	sanitizer for staff.		
5.2.1.g.ii	Clear signage to direct people that the facility is		
	operating 24 hrs.		
8.6	Scientific pharmaceutical references are available in		
	the pharmacy either as hard copy or electronic		





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# قائمة التحقق النهائي Outpatient Pharmacies

## format, such as but not limited to: BNF, Martindale: The Complete Drug Reference. **MEDICATION DELIVERY** 15 For application of delivering POM via a delivery system the facility should seek the approval of Telepharmacy 15.2.2.a services and must meet the licensure requirements such as but not limited to electronic platforms, online websites and mobile applications. For application of delivering OTC medications and general medical products via a delivery system the 15.2.2.b facility should seek the approval of "Pharmacy Delivery" add on services to the facility. The DHA licensed Pharmacy and pharmacists in charge must take full responsibility for any medication errors or 15.2.8. adverse events resulting inappropriate or unsafe delivery of medications through the facility delivery service or/third-party delivery company services. Medication supply with delivery services will encompass a review of the prescription and patient counselling 15.2.9. including; provision of information on how to use their medication safely, management of potential side effects, ADR, and when to seek medical attention, if required. Delivery of medication is transported using packaging or 15.2.10. devices, which will ensure that they are maintained within appropriate standards pertaining to temperature,





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	light, humidity and storage as described in the		
	manufacturer's specifications to prevent deterioration.		
	Medications are supplied in their original manufacturer		
15.2.11.	packs and leaflets, and delivered in appropriately sealed		
15.2.11.	delivery containers that conceal the contents and		
	maintain patient confidentiality.		
	Cold chain products are packed in a way to ensure that		
15.2.12.	the required temperature is maintained throughout its		
	transport.		
	The pharmacy is providing special temperature and		
	humidity-controlled containers designed for medication		
15.2.13.	requiring cold chain during transporting e.g. insulated		
15.2.15.	Styrofoam coolers, refrigerant gel packs and storing		
	should be within the recommended temperature range		
	of +2 to +8 degrees Celsius (°C).		
15.2.15.	Soft packaging materials such as cushioning, foam or		
13.2.13.	packing Peanuts may be provided to absorb shocks.		
	Liquid medicines e.g. syrups are required to be delivered		
15.2.16.	to the patient intact and in good condition through leak-		
15.2.16.	proof bag /absorbent material to deliver glass bottles		
	safely.		
	Pharmacist is able to to supply documentary evidence		
15.2.17.	that the pharmaceutical product has not exceeded the		
13.2.11.	acceptable limits temperature and humidity, as		
	determined by the manufacturer's instructions.		





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	Outpatient Phari	macies		
	The delivery system is conducted in a secured manner,			
15.2.18.	and the delivery of medicines and medical products			
	must comply with patient privacy and confidentiality.			
	The pharmacy may develop a mechanism for contacting			
15.2.22.	patients regarding delays in delivering medication and			
13.2.22.	medical products in addition to communicating any			
	known recalls.			
	A comprehensive audit trail of all deliveries is essential			
15.2.23.	to be recorded in a delivery record book			
15.2.23.	(manual/electronic) including patient information and			
	delivery address and patient counseling logs.			
	A receipt is required on delivery of medicines with the			
	full name of the pharmacist who dispended the			
15.2.24.	medications and the facility name. The pharmacist will			
	need a mechanism to do this, and emailed			
	acknowledgment of receipt would be reasonable.			
15.2.27.	It is prohibited to deliver Narcotic, CD and SCD			
13.2.21.	medications via a delivery system.			

Clinical Audit Staff	Name	Signature	Date
Team Leader			
Inspection Member			
Inspection Member			
Inspection Member			





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### **Outpatient Pharmacies**

Summary of Findings and Recommendations for the Facility:			
Date of Next Visit:			
Summary of Findings and Recommendations to DHA Management:			

#### **References:**

- 1- DHA Pharmacy Guideline 2021.
- 2- \*DHA Health Facility Guidelines 2019, Part B Health Facility Briefing & Design, 370 Pharmacy Unit.