

Registered pharmacy inspection report

Pharmacy name: Karsons Pharma

Address: 69-71 City Way, ROCHESTER, Kent, ME1 2BA

Pharmacy reference: 1090819

Type of pharmacy: Community

Date of inspection: 11/12/2025

Pharmacy context and inspection background

This is a community pharmacy in a convenience store on a busy main road in a largely residential area of Rochester. It provides NHS services such as the New Medicine Service, the Pharmacy First service and the Hypertension Case Finding service. It provides a flu and COVID vaccination service using patient group directions. And it uses a van to administer vaccines to the wider community. It supplies medicines in multi-compartment compliance packs to a large number of people who need this support. And it delivers medicines to some people's homes. It also provides supervised administration of certain medicines. And it provides a face-to-face private prescribing service for conditions such as urinary tract infections, period delay and other common infections.

This was an inspection of the pharmacy which focused on the core Standards relating to patient safety. Not all the Standards were inspected on this occasion. The pharmacy was last inspected in September 2023 and all standards were met.

Overall outcome: Standards not all met

Required Action: Statutory Enforcement

Follow this link to [find out what the inspections possible outcomes mean](#)

Standards not met

Standard 1.6

- The pharmacy's responsible pharmacist does not always reflect who the responsible pharmacist is. And its private prescription record does not always have all the relevant information recorded. This means that the pharmacy may not have access to this information if needed.

Standard 3.4

- The pharmacy does not always safeguard medicines which require a responsible pharmacist present before they can be supplied. And it doesn't ensure that the sales of pharmacy-only medicines are made from the registered premises.

Standard 4.3

- The pharmacy does not ensure that all its medicines which require safe storage are kept secure. This increases the chance of unauthorised access to these medicines.
- The pharmacy cannot demonstrate that all medicines requiring refrigeration are stored appropriately. So, the pharmacy is less able to demonstrate that the medicines inside are safe to use. There were some expired medicines and medicines not in their original packaging found with dispensing stock during the inspection. This increases the chance of expired medicines being supplied and could limit the pharmacy's ability to action drug alerts and recalls appropriately.

Standards that were met with areas for improvement

Standard 1.1

- The pharmacy has standard operating procedures and team members can access them. But not all team members have read them. And the procedure for the prescribing service does not contain clinical pathways or cover all the conditions treated as part of the prescribing service.

Standard 1.2

- The pharmacy team members are made aware of mistakes they make during the dispensing process and are given the opportunity to learn from them. But team members don't always record these mistakes. So, it may make it harder for them to identify patterns and take effective action to minimise the chance of similar mistakes.
- The pharmacy has undertaken an audit for its prescribing service but it didn't adequately review the prescribing against the guidelines set out in its standard operating procedure. And some consultation records did not show the clinical justification for prescribing decisions, particularly where National guidelines for antibiotics were not followed.

Standard 1.7

- Overall, the pharmacy manages people's personal information appropriately, but it doesn't always effectively dispose of its confidential waste and team members sometimes use NHS smartcards belonging to another team member.

Standard 4.2

- The pharmacy doesn't routinely highlight prescriptions for higher-risk medicines to help make sure appropriate checks are made with people when these medicines are supplied. So, it may be missing opportunities to provide further advice to people receiving these medicines to help them

take their medicines safely.

Principle 1: The governance arrangements safeguard the health, safety and wellbeing of patients and the public

Summary outcome: Standards not all met

Table 1: Inspection outcomes for standards under principle 1

Standard	Outcome of individual standard	Area for improvement/ Area of good or excellent practice
1.1 - The risks associated with providing pharmacy services are identified and managed	Met	Area for improvement
1.2 - The safety and quality of pharmacy services are regularly reviewed and monitored	Met	Area for improvement
1.3 - Pharmacy services are provided by staff with clearly defined roles and clear lines of accountability	Met	
1.4 - Feedback and concerns about the pharmacy, services and staff can be raised by individuals and organisations, and these are taken into account and action taken where appropriate	Standard not inspected	
1.5 - Appropriate indemnity or insurance arrangements are in place for the pharmacy services provided	Met	
1.6 - All necessary records for the safe provision of pharmacy services are kept and maintained	Not met	
1.7 - Information is managed to protect the privacy, dignity and confidentiality of patients and the public who receive pharmacy services	Met	Area for improvement
1.8 - Children and vulnerable adults are safeguarded	Met	

Principle 2: Staff are empowered and competent to safeguard the health, safety and wellbeing of patients and the public

Summary outcome: **Standards met**

Table 2: Inspection outcomes for standards under principle 2

Standard	Outcome of individual standard	Area for improvement/ Area of good or excellent practice
2.1 - There are enough staff, suitably qualified and skilled, for the safe and effective provision of the pharmacy services provided	Met	
2.2 - Staff have the appropriate skills, qualifications and competence for their role and the tasks they carry out, or are working under the supervision of another person while they are in training	Met	
2.3 - Staff can comply with their own professional and legal obligations and are empowered to exercise their professional judgement in the best interests of patients and the public	Met	
2.4 - There is a culture of openness, honesty and learning	Standard not inspected	
2.5 - Staff are empowered to provide feedback and raise concerns about meeting these standards and other aspects of pharmacy services	Standard not inspected	
2.6 - Incentives or targets do not compromise the health, safety or wellbeing of patients and the public, or the professional judgement of staff	Standard not inspected	

Principle 3: The environment and condition of the premises from which pharmacy services are provided, and any associated premises, safeguard the health, safety and wellbeing of patients and the public

Summary outcome: Standards not all met

Table 3: Inspection outcomes for standards under principle 3

Standard	Outcome of individual standard	Area for improvement/ Area of good or excellent practice
3.1 - Premises are safe, clean, properly maintained and suitable for the pharmacy services provided	Met	
3.2 - Premises protect the privacy, dignity and confidentiality of patients and the public who receive pharmacy services	Met	
3.3 - Premises are maintained to a level of hygiene appropriate to the pharmacy services provided	Standard not inspected	
3.4 - Premises are secure and safeguarded from unauthorized access	Not met	
3.5 - Pharmacy services are provided in an environment that is appropriate for the provision of healthcare	Standard not inspected	

Principle 4: The way in which pharmacy services, including management of medicines and medical devices, are delivered safeguards the health, safety and wellbeing of patients and the public

Summary outcome: Standards not all met

Table 4: Inspection outcomes for standards under principle 4

Standard	Outcome of individual standard	Area for improvement/ Area of good or excellent practice
4.1 - The pharmacy services provided are accessible to patients and the public	Met	
4.2 - Pharmacy services are managed and delivered safely and effectively	Met	Area for improvement
4.3 - Medicines and medical devices are: obtained from a reputable source; safe and fit for purpose; stored securely; safeguarded from unauthorized access; supplied to the patient safely; and disposed of safely and securely	Not met	
4.4 - Concerns are raised when medicines or medical devices are not fit for purpose	Met	

Principle 5: The equipment and facilities used in the provision of pharmacy services safeguard the health, safety and wellbeing of patients and the public

Summary outcome: **Standards met**

Table 5: Inspection outcomes for standards under principle 5

Standard	Outcome of individual standard	Area for improvement/ Area of good or excellent practice
5.1 - Equipment and facilities needed to provide pharmacy services are readily available	Met	
5.2 - Equipment and facilities are: obtained from a reputable source; safe and fit for purpose; stored securely; safeguarded from unauthorized access; and appropriately maintained	Standard not inspected	
5.3 - Equipment and facilities are used in a way that protects the privacy and dignity of the patients and the public who receive pharmacy services	Standard not inspected	

What do the summary outcomes for each principle mean?

Finding	Meaning
✓ Excellent practice	The pharmacy demonstrates innovation in the way it delivers pharmacy services which benefit the health needs of the local community, as well as performing well against the standards.
✓ Good practice	The pharmacy performs well against most of the standards and can demonstrate positive outcomes for patients from the way it delivers pharmacy services.
✓ Standards met	The pharmacy meets all the standards.
Standards not all met	The pharmacy has not met one or more standards.