

General Pharmaceutical Council

Fitness to Practise Committee

Principal Hearing Review

Remote videolink hearing

5 February 2024

Registrant name:	Rebecca Faye Platt
Registration number:	2073233
Part of the register:	Pharmacist
Committee members:	David Bleiman (Chair) Vaishally Patel (Registrant member) Anne Johnstone (Lay member)
Legal adviser:	Andrew Clemes
Secretary:	Zainab Mohamad
Registrant:	Not present and not represented
General Pharmaceutical Council:	Represented by Yesim Hall, Case Presenter
Sanction being reviewed:	Suspension for 6 months, with a review
Outcome:	Suspension extended for 6 months, with further review
Interim measures:	Interim suspension

This decision is an appealable decision under our rules and will not take effect until 5 March 2024 or, if an appeal is lodged, when that appeal is concluded. However, the interim suspension set out in the decision takes effect immediately and will lapse when the decision takes effect or once any appeal is concluded.

Introduction

1. This is the first Principal Hearing Review (“PHR”) concerning Ms Rebecca Faye Platt, a Pharmacist registered with the General Pharmaceutical Council (“the Council”) under registration number 2073233.
2. The PHR procedure is governed by *The Pharmacy Order 2010* (“the Order”) and the Council’s *Fitness to Practise and Disqualification etc Rules Order of Council 2010* (“the Rules”).
3. Ms Platt did not attend the hearing and was not represented. The Council was represented by Yesim Hall, Professional Regulatory Lawyer. We were assisted throughout by a legal adviser, whose advice we accepted at all stages.
4. The Principal Hearing (PH) was heard on 31 July to 2 August 2023. Ms Platt was not in attendance. The facts alleged were found proved, impairment of fitness to practice was found (both on public protection grounds and in the wider public interest) and Ms Platt was made subject to a sanction of suspension for a period of 6 months, with a review. Today’s PHR is that review.
5. In summary, our powers at this PHR, as set out at Article 54(3) of the Order, are that if we find that Ms Platt’s fitness to practise remains impaired we may remove her entry from the Council’s Register, extend her suspension for a period not exceeding 12 months, or make her entry conditional, during a period not exceeding three years, upon compliance with requirements we may think fit to impose. If we do not find impairment, the existing suspension will lapse at its expiry date. We would be able to give advice or issue a warning.

Summary of the documents before us

6. We were provided with a PHR bundle comprising 241 pages, a Council combined statement of case and skeleton argument (13 pages), a Proof of Service bundle (2 pages) and a Proceeding in Absence bundle (25 pages).

Preliminary matters

7. In the absence of Ms Platt, we considered whether there had been good service of notice and whether it would be fair to proceed in her absence. We heard submissions from Ms Hall and accepted legal advice.
8. Notice of today's hearing was sent to Ms Platt on 20 December 2023 by email to her email address which we checked and confirmed was in accordance with that on the Council's Register. The notice gave the requisite period of notice and details of the hearing. We are satisfied that there was good service of the notice in accordance with the Rules.
9. We gave careful consideration as to whether to proceed with this PHR in Ms Platt's absence.
10. Ms Platt was not in attendance at the Principal Hearing and has unfortunately not been engaged with the Council since. Following the PH she was emailed on several occasions by the Council's Monitoring Team but failed to respond. She failed to respond to the emailed notice of hearing. On 5 January 2024 she was sent a reminder which included strong advice to engage with the monitoring team. That reminder was posted by Special Delivery as well as emailed and it was delivered and signed for by "PLATT" on 10 January 2024. On 19 January 2024 Ms Platt was sent by Special Delivery the Council's draft bundle and Combined Statement of Case and Skeleton Argument. (Ms Hall informed us that the contents of the draft bundle were the same as the final bundle before us.) That was delivered and signed for by "PLATT" on 26 January 2024. On 25 January 2024 Ms Hall emailed Ms Platt with the heading "GPhC – please contact", noted that Ms Platt was yet to respond despite several letters and emails and gave a telephone number, as well as the email address, for a response.
11. We are informed that there has still been no response from Ms Platt in relation to this hearing.
12. We are satisfied that, as delivery of the Special Delivery letters was signed for, Ms Platt knows or should be aware of this hearing. The Council has made every reasonable effort to obtain her engagement in these proceedings.
13. We do not know why Ms Platt is not in attendance. She has not submitted any reasons, nor has she applied for a postponement.

14. In the circumstances we conclude that Ms Platt has voluntarily absented herself. There is nothing to suggest that an adjournment now would result in her attendance at a later date. There is a strong public interest in holding a review in a timely manner. We are mindful that the current suspension order is to expire by the end of February 2024.
15. For all of the above reasons, we consider that it is fair to proceed with this PHR in the absence of Ms Platt. We are mindful that, should the PHR result in some form of ongoing sanction, it is always open to a registrant to request an early review if her circumstances change and she has new evidence to present.

Findings and decision of the Principal Hearing

16. The allegations found proved in this case concerned Ms Platt's dispensing of controlled drugs ("CDs") while the regular Responsible Pharmacist ("RP") at Well Meddyula Twyn, Buch, Burry Port ("the pharmacy") in the time frame April 2020 to October 2020. She was found to have dispensed CDs to three patients, often without a prescription. She was found to have failed to ensure the safe dispensing of CDs in that she dispensed and self-checked CDs and instructed and/or allowed dispensers to give CDs to patients without the knowledge or supervision of the RP on duty at the time. She was found to have failed to report these incidents on the company reporting system (DATIX) in a timely fashion, despite being requested to do so.
17. The Committee found that Ms Platt had breached the Standards of the profession and that her failings were serious in that these included the supply of CDs (which are capable of causing harm if not safely monitored) to vulnerable patients without a valid prescription in place. The Committee described this as a serious failure of clinical judgement and noted that she was "acting illegally, cutting corners on patient safety procedures and dispensing CDs without assuring herself that there was a current prescription in place and doing so over many weeks".
18. The Committee found Ms Platt's fitness to practise to be impaired as her conduct had posed a serious risk to the safety of the three patients and, although she had demonstrated some insight (in the internal proceedings before Well pharmacy), there remained a risk of repetition in a high-pressure environment. She had brought the profession into disrepute

and could do so again. Other pharmacists would, the Committee considered, be appalled by her conduct.

19. At the sanction stage, the Committee took into account Ms Platt's previous good character. They considered that a sanction of 6 months suspension would protect the public and be sufficient to send a clear message to both the public and the profession that, even when working under pressure, it is not acceptable to disregard the law or cut corners on basic procedures designed to protect the public and patients from harm.
20. The Committee directed that there should be a review before the expiry of the suspension. The Committee indicated that a reviewing committee might be assisted by evidence of CPD and how Ms Platt has maintained her skills as a pharmacist, of training to address the issues that arise in this case, references from any paid or voluntary work she has undertaken, any testimonials she may wish to submit and a written reflective piece.
21. Interim measures were imposed both in the interests of public protection and otherwise in the public interest.

Council submissions

22. Ms Hall submitted that the Council's Case Administrator, Mubarka Syed had, in a monitoring record dated 11 January 2024, detailed unsuccessful attempts to engage with Ms Platt following the determination of the PH. No response had been received to communications relating to this hearing (as noted in our determination regarding proceeding in the absence of Ms Platt). However, Ms Hall submitted that the Council had not received any intelligence to suggest that Ms Platt had contravened the Suspension Order.
23. Ms Hall drew attention to a number of case authorities. In particular, she submitted that there was a persuasive burden on Ms Platt to show that she had addressed the impairment found at the PH. But, she submitted, Ms Platt had failed to provide any evidence to suggest that she had taken any steps to remediate.
24. As regards insight, Ms Hall noted that although at the PH the Committee had accepted that Ms Platt had shown "some insight" in the pharmacy's investigation, she had failed to engage

in the Council's fitness to practise proceedings and demonstrate any further insight. She submitted that Ms Platt had not provided any evidence to suggest that she had reflected on her misconduct. She had not provided any of the evidence which the Committee, at the PH, had said might be helpful at this review hearing.

25. Ms Hall submitted that the risk of repetition remained high and that a further period of suspension of 6 months would be appropriate and proportionate. She invited us also to impose an interim measure of suspension to cover the appeal period during which there would otherwise be a short period after the expiry of the current term of suspension, in which Ms Platt would be free to practise without restriction.

Legal advice

26. We accepted the advice of the legal adviser. He advised us to have regard to the Council's Good decision making: *Fitness to practise hearings and sanctions guidance*, March 2017 ("the Guidance").

27. We were advised to have regard to the comments of Blake J in the authority of *Abrahaem v General Medical Council* [2008] EWHC 183 (Admin):

In practical terms there is a persuasive burden on the practitioner at a review to demonstrate that he or she has fully acknowledged why past professional performance was deficient, that insight, application, education, supervision or other achievement sufficiently addressed past impairment.

28. The legal adviser also advised us that, in accordance with the authority of *Yeong v General Medical Council* [2009], EWHC 1923 (Admin), we should take into account any insight and any remedial steps which Ms Platt has taken since the conduct which led to her conviction.

29. We accepted the legal adviser's advice regarding the criteria for imposition of interim measures.

Decision on current impairment and sanction

30. This is a case in which, unfortunately and for whatever reason, Ms Platt has failed to have any engagement with the Council either at the time of her Principal Hearing or since that date. The Council has made considerable efforts to reach out to her.
31. The Committee, at the Principal Hearing, assisted Ms Platt by setting out a number of forms of information or evidence which they believed would be likely to be of assistance at a review. Unfortunately, Ms Platt has provided none of this material, nor any explanation as to why she is not in a position to engage with the process.
32. We accept that there is a persuasive burden on the registrant, at a review, to show that she has remediated. In the absence of anything from Ms Platt, she has failed to discharge that burden. We find that she has not shown any development of insight nor any other actions by way of remediation, such as engagement in CPD or reflection on her misconduct.
33. In these circumstances, the risk of repetition remains, and this gives rise to an ongoing risk of harm to patients and the public, together with an ongoing risk of damage to the reputation of the profession, should Ms Platt be allowed to resume practice without restriction. Her fitness to practise remains currently impaired on both public protection and the wider public interest grounds.
34. The practical matters listed by the Committee which would have helped us today, including undertaking CPD, training to address the issues arising in this case and written reflection, are an indication that Ms Platt's misconduct is and remains potentially remediable. We would therefore encourage her to take the first and most important step of re-engaging with the Council, so that she can then keep in touch with the Council's monitoring team as she begins to address the challenge of remediation and can begin to be in a position to show progress.
35. We have reviewed the range of sanctions available to us. The imposition of conditions would be wholly impracticable in the case of a registrant who is simply not in communication with the Council. Contact with the monitoring team would be essential. We do agree with the Council that it would be appropriate and proportionate to extend the current suspension for a further six months to give Ms Platt a further opportunity to engage with the process and to show steps towards remediation.

36. We have given careful thought to whether, at this time, it would be proportionate to replace the suspension with removal of Ms Platt's entry from the register. We conclude that it would be premature to say that a further opportunity to show remediation would be futile. She has only, thus far, had one period of suspension of six months and an extension would give her more time to re-engage. But Ms Platt should appreciate that, at the next review, the Committee will again have a range of powers which does include removal from the register.
37. We repeat that, in principle, the current impairment in this case is remediable and Ms Platt has the opportunity to take steps towards remediation and we encourage her to do so. The list of materials which she might helpfully submit to the next review hearing is unchanged from that provided by the Committee at the Principal Hearing. We would only add that the most immediate priority would be for Ms Platt to get back in touch with the Council and to respond to all communications from the monitoring team.
- 38. The suspension order is extended for six months, to take effect from the time when the current suspension would otherwise expire.**

Interim Measures

39. The current suspension order is due to expire on 28 February. As there is a 28-day appeal period before our extension takes effect, there will be a gap of a few days during which no order would be in place.
40. We have found that Ms Platt remains a risk to the public and to the reputation of the profession should she be free to practise unrestricted. For these reasons and primarily to protect the public, an interim measure of suspension is necessary to cover the appeal period before the substantive extension of suspension comes into effect.
41. We impose an interim measure of suspension.