

**General Pharmaceutical Council**

**Fitness to Practise Committee**

**Review Hearing**

Remote videolink hearing

**Thursday 9 January 2025**

<b>Registrant name:</b>	Rebin Abdullah
<b>Registration number:</b>	2213446
<b>Part of the register:</b>	Pharmacist
<b>Type of Case:</b>	Misconduct and conviction
<b>Committee Members:</b>	Neville Sorab (Chair) Amira Guirguis (Registrant member) Alison McVitty (Lay member)
<b>Clinical Adviser:</b>	Dr Jennifer Bearn
<b>Committee Secretary:</b>	Adam Hern
<b>Registrant:</b>	Present and not represented
<b>General Pharmaceutical Council:</b>	Represented by Kenniesha Stephens, Case Presenter
<b>Order being reviewed:</b>	Suspension (9 months)
<b>Fitness to practise:</b>	Impaired
<b>Outcome:</b>	Suspension (6 months)
<b>Interim Measures:</b>	Interim Suspension

This decision including any finding of impairment and sanction is an appealable decision under *The General Pharmaceutical Council (Fitness to Practise and Disqualification etc. Rules) Order of Council 2010*. Therefore, this decision will not take effect until 7 February 2025 or, if an appeal is lodged, once that appeal has been 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.

## **Particulars of Allegation found proved at the Principal Hearing**

*You, a registered Pharmacist,*

*1. Having been found impaired by reason of misconduct (REDACTED):*

*1.1. (REDACTED)*

*2. On 11 September 2020, were convicted at Cleveland Magistrates Court for the following offence:*

*2.2. (REDACTED)*

*3. Failed to declare the conviction in 2 above to the General Pharmaceutical Council within 7 days as required by Rule 4 (2) (a) of The General Pharmaceutical Council (Fitness to Practise and Disqualification etc. Rules) Order of Council 2010.*

*By reason of the matters set out above, your fitness to practise is impaired by reason of your:*

*a. conviction*

*b. misconduct.*

## **Documentation**

Exhibit 1 – GPhC hearing bundle

Exhibit 2 – GPhC skeleton argument dated 27 December 2024

Exhibit 3- Registrant Statement, undated

Exhibit 4- CPD Records, 2024-25

## **Introduction**

1. This is the written determination of the Fitness to Practise Committee at the General Pharmaceutical Council (“the Council”).
2. The hearing is governed by *The Pharmacy Order 2010* (“the Order”) and *The General Pharmaceutical Council (Fitness to Practise and Disqualification etc. Rules) Order of Council 2010* (“the Rules”).
3. The statutory overarching objectives for these regulatory proceedings are:
  - a. To protect, promote and maintain the health, safety and well-being of the public;
  - b. To promote and maintain public confidence in the professions regulated by the Council; and
  - c. To promote and maintain proper professional standards and conduct for members of those professions.
4. The Committee also has regard to the guidance contained in the Council’s *Good decision making: Fitness to practise hearings and outcomes guidance* as revised March 2024.
5. At a Review Hearing the Committee must decide whether the Registrant’s fitness to practise remains currently impaired and, if so, what should be the appropriate outcome. If the Committee find that the Registrant’s fitness to practise is no longer impaired the current order will lapse on expiry.

## **Service of Notice of Hearing**

6. The Committee has seen a letter dated 22 November 2024 from the Council headed “*Notice of Review Hearing*” addressed to the Registrant. The Committee was satisfied that there had been good service of the Notice in accordance with Rules 3 and 16.

## **Application to admit further evidence**

7. On the day of the hearing, 9 January 2025, the Registrant made an application, pursuant to Rule 18(5), for the Committee to admit:
  - a. A statement from the Registrant, which was submitted to the Committee Secretary on 8 January 2025; and
  - b. The Registrant’s CPD records, which was submitted to the Council on 2 January 2025.
8. The Registrant submitted that he was not aware of the Rules, including Rule 18. He thought it would be sufficient to submit the documents when he did.

9. The Council maintained a neutral position to the Registrant's application. Ms Stephens submitted that the Registrant was previously represented and that this is his second time at a Principal Review Hearing. However, the fact that the Registrant is not represented at this hearing may have caused the documents not being submitted in time.
10. The Committee noted rule 18(5) which set out: *"Any document which has not been served on the secretary by the end of [No later than 9 days before the Monday of the week in which the hearing is to take place] is, except in exceptional circumstances, not to be admitted into evidence at the hearing."* Should the Committee consider that the *"exceptional circumstances"* have been met, then the evidence needs to be relevant and fair (Rule 24(2)).
11. The Committee accepted the application on the basis that *"exceptional circumstances"* had been met on the basis that:
  - a. Given that he was not represented for this hearing, the Committee accepts that the Registrant was not fully aware of Rule 18(2) which required his bundle to be served no later than 9 days before the before the Monday of the week in which the hearing is to take place;
  - b. The Registrant acted in good faith by attempting to send his CPD records to the Council in good time; he missed the deadline by three days. The Council has been aware of the documents for a week and therefore there is no risk of prejudice suffered by the Council; and
  - c. There is no risk of prejudice suffered by the Council given the Registrant would have read his statement at the hearing if it was not admitted.
12. Furthermore, the Committee considers the provision of Registrant's CPD records and statement provide a clearer picture of the Registrant's current status and is therefore relevant. Given there is no prejudice to the Council by admitting these documents, the Committee considers the admission of these documents to be fair.

## **Background and Context**

### **Fitness to Practise History**

13. The Registrant has had relevant fitness to practise history, and had been previously suspended following a previous Principal Hearing that concluded on 5 February 2019. At that Principal Hearing, the Committee determined that the Registrant was impaired by reason of his misconduct by way of (REDACTED) period of suspension on his registration for five months.
14. On 17 July 2019, a Principal Hearing Review was held in relation to this and the Registrant's fitness to practise was found to be no longer impaired.

### **Allegation 1**

15. On 19 March 2020, the Registrant was stopped by police officers while driving. During the stop, the police officers identified that the Registrant (REDACTED) The Registrant was arrested and cautioned. During an interview, the Registrant confirmed (REDACTED)
16. (REDACTED)
17. (REDACTED)
18. (REDACTED)
19. (REDACTED)

### **Allegation 2**

20. The Council relied on the memorandum of conviction dated 11 September 2020 which confirmed that the Registrant was convicted of (REDACTED)

### **Allegation 3**

21. Registrants are required to complete a "*Something to Declare*" form to inform the Council of a conviction and/or caution they have received and to notify the Council within seven days of receiving said caution and/or conviction. Having checked the Council's electronic register and other relevant internal sources, the Council had not received anything from the Registrant declaring his conviction.

### **Hearing history**

- Principal Hearing (22-23 February 2022) – Suspension (12 months)
  - Principal Hearing Review (9 March 2023) – Suspension (12 months)
  - Principal Hearing Review (21 March 2024) – Suspension (9 months)
  - The current suspension is due to expire on 18 January 2025.
22. On 7 July 2020, the Council were informed by Northumbria Police ("the police") that the Registrant had been arrested on 19 March 2020 (REDACTED)

### **Principal Hearing**

23. The Principal Hearing was heard on 22 and 23 February 2022. The Registrant did not attend the hearing and the Principal Hearing Committee granted the Council's application to proceed in his absence. The Registrant faced three allegations regarding the impairment of his fitness to practise through misconduct and a conviction. The Principal Hearing Committee found all allegations to be proved and subsequently found that the Registrant's fitness to practise was impaired. The Principal Hearing

Committee directed that the Registrant should be suspended for a period of 12 months.

24. In relation to the question of current impairment, the Principal Hearing Committee considered the evidence particularly that provided orally by (REDACTED.) (REDACTED) evidence confirmed that there would be a *“risk to patient safety were the Registrant (REDACTED)”*
25. (REDACTED)
26. The Principal Hearing Committee considered the Registrant’s insight into the misconduct and the conviction. The Principal Hearing Committee referred to the Registrant’s evidence at the review hearing following his previous Principal Hearing in July 2019. (REDACTED)
27. (REDACTED)
28. (REDACTED)
29. (REDACTED)
30. The Principal Hearing Committee decided on a suspension rather than removal on the basis that the Registrant may be able to remediate his failings:

*“In an earlier submission (in the context of impairment) it was submitted that the findings against the Registrant were possibly remediable. The Committee agrees: it is, just, possible, and depending on a number of matters, that the Registrant could remediate the failings that have been identified. To do so may require a great deal of effort on the part of the Registrant and a considerable amount of evidence may be required to establish remediation. (REDACTED.)”*
31. In relation to the review hearing, the Principal Hearing Committee indicated that the reviewing committee may be assisted by:
  - a. A reflective piece dealing with the issues of concern identified by the Principal Hearing Committee, showing insight on why the Registrant made the wrong decisions that he did;
  - b. (REDACTED)
  - c. (REDACTED)
  - d. Information on how the Registrant has been maintaining his CPD;
  - e. An update on what if any work, voluntary or paid, the Registrant has been undertaking; and
  - f. Any testimonials that the Registrant wishes to provide.

### **Principal Hearing Review – 9 March 2023**

32. A Principal Hearing Review was heard on 9 March 2023. The Registrant did not attend the hearing. Prior to the hearing, on 9 January 2023, the Registrant wrote to the Council (REDACTED.)
33. The Registrant only corresponded once with the Council concerning his compliance with the suspension. (REDACTED.)
34. In considering whether the Registrant’s fitness to practise continued to be impaired, the Review Committee noted that he had not provided any evidence that could persuade them of the contrary (REDACTED)
35. The Review Committee determined that a further period of suspension was sufficient to protect the public and patients, maintain confidence in the profession, and maintain professional standards. It did not consider that the case was serious enough to warrant removal, although the Review Committee stated that continued non-engagement could render it such. The Review Committee reiterated that the Principal Hearing Committee gave useful indications *“as to what the Registrant could, and should, do to assist”* any future reviewing committee. As a result, a further suspension of 12 months was imposed on the Registrant’s registration to provide him with adequate time to provide evidence of remediation, insight and (REDACTED.)

### **Principal Hearing Review – 21 March 2024**

36. A further review Principal Hearing Review was heard on 21 March 2024, at which the Registrant was present and represented.
37. (REDACTED.)
38. On the morning of the hearing, the Registrant provided a witness statement in which he explained that his lack of engagement was due to separate criminal proceedings for which had since been acquitted, as well as health issues. He further asserted that he had been compliant with his suspension and had (REDACTED.)
39. The Review Committee found that the Registrant’s Fitness to Practise remained impaired. (REDACTED.)
40. In considering sanction, the Review Committee noted that the Registrant had, albeit late, engaged with the proceedings. In light of this, the Review Committee determined that a further suspension order was appropriate and would provide the Registrant with a chance to (REDACTED.) As such, the Review Committee imposed a further suspension of nine months. However, they also noted the likelihood of removal should the Registrant not meaningfully engage during this period.

## Current position

41. On 27 March 2024, the Council invited the Registrant for testing. During the arrangements, the Council also indicated to the Registrant that he would be invited for (REDACTED.)
42. (REDACTED)
  - a. (REDACTED.)
  - b. (REDACTED.)
43. On 5 November 2024, the Council invited the Registrant to provide evidence of his remediation following the previous Committee's recommendations and asked him to confirm his compliance with his suspension. On the next day, the Registrant sent an email confirming his compliance.
44. The Council has not received any information indicating that the Registrant has not been compliant with his suspension in the past nine months.
45. No up-to-date (REDACTED) report, as per the previous Review Committee's recommendations, has been obtained. (REDACTED)
46. (REDACTED)
47. Prior to this review, the Council requested the Registrant to provide the documents he intends to rely on as per Rule 18(2). The Registrant provided the following written statement:

*"I, Rebin Abdullah, am writing this statement with a heavy heart to express my deepest regrets for my actions and the poor judgment that have brought me to this point. I fully understand that my behaviour, particularly my failure to engage with the General Pharmaceutical Council (GPhC) processes, was unacceptable and did not meet the standards expected of me as a pharmacist.*

*Reflecting on my actions, I realize the profound impact they have had on my professional reputation and the trust that was placed in me. I take complete responsibility for my mistakes and am truly sorry for the consequences they have caused.*

*Despite facing significant challenges, my dedication to public health never wavered. I worked tirelessly at COVID-19 testing sites in schools and churches, striving to keep our community safe during an unprecedented crisis. Later, as a dispenser in a healthcare centre, I had the privilege of administering approximately 15,000 vaccines under the supervision of a pharmacist. Serving the community during such difficult times, even while dealing with allegations against me, has only strengthened my commitment to patient care and the well-being of those around me.*

*A month before my initial court trial, (REDACTED.) The trial concluded with a hung jury and was postponed until later that year, at which point I was vindicated. This experience has been incredibly humbling, and I recognize that this may be my last chance to restore my standing. Continuing my career as a pharmacist is not just a job for me—it's my passion. I am deeply committed to making a positive difference in the lives of my patients and contributing to the health of our community.*

*Beyond my professional roles, I have sought to give back in meaningful ways. I am currently developing a school platform that supports 2,000 students across three schools in Kurdistan. This platform helps track attendance for students and staff, publishes grades, and manages student fees, aiming to create a more organized and efficient educational environment. Additionally, I am working on a pharmacy platform to streamline the ordering processes for pharmacies from their suppliers. This project became a personal mission while I was abroad (REDACTED.)*

*Moving forward, I am fully committed to addressing any concerns raised by the GPhC. I am ready to comply with all requirements, including regular assessments, to demonstrate my fitness to practice. My passion for pharmacy and dedication to patient care and community health drive me to uphold the high standards expected of me. I am determined to prove that I can be a safe and competent pharmacist, contributing positively to the profession.*

*I humbly ask the committee to consider my sincere remorse, the efforts I have made to reflect and grow from my mistakes, my ongoing contributions to public health, and my willingness to fully engage with this process. These elements are vital for me to regain the trust and responsibility that comes with being a member of the pharmacy community. This opportunity means everything to me, and I am devoted to rebuilding the trust and honour that define our profession."*

## **Submissions**

48. On behalf of the Council, Ms Stephens submitted:
  - a. There has not been an updated (REDACTED) report for the Registrant. The Council could not find an expert in time to undertake the (REDACTED) report and the Council were advised not to pay for a (REDACTED) obtained by the Registrant. There was a failure on both sides as to why there is no (REDACTED) report before the Committee.
  - b. A suspension of 6-9 months is appropriate in the circumstances and given that he is still impaired given:

- i. (REDACTED.)
    - ii. The CPD records which the Registrant has submitted do not address or reflect the standards that the Registrant has breached. The training does not cover the concerns of the Principal Hearing or Review Committees.
    - iii. The Registrant has demonstrated some remorse and insight, but (REDACTED.)
    - iv. The Registrant's reflective piece does not cover (REDACTED.)
    - v. The Registrant has not provided evidence or information to assist the Committee on (REDACTED.)
  - c. Conditions, at this stage, would be premature given the lack of information as to where the Registrant is going to practice, any mentor that would support him and (REDACTED.)
- 49. The Registrant submitted that:
  - a. He could not have got through all of the allegations made against him without the help of his family.
  - b. The Registrant (REDACTED.) This is also why he did not attend the Principal Review Hearing in March 2024.
  - c. He has a dedication to public health, even if he is not on the Council's register. He has spent three years working on COVID testing sites, developed data entry programmes to assist patients with vaccinations, and developed a school platform.
  - d. Although 6-9 months suspension is a long time, if he is suspended, the Registrant will prove his competence to get back on the Council's register.
  - e. (REDACTED.)
  - f. (REDACTED.)
  - g. Although he is a bit rusty, he would get back into the flow of pharmacy after a week or two of working.
  - h. He did not undertake any of the recommendations of the Principal Hearing Committee or Review Committees because this was not made explicit to him by his legal team.
  - i. He is not a prescriber.
- 50. Dr Bearn provided the Committee with the following opinion:
  - a. (REDACTED.)
  - b. (REDACTED.)
  - c. (REDACTED.)

- d. (REDACTED.)
- e. (REDACTED.)
- f. (REDACTED.)
- g. (REDACTED.)
- h. (REDACTED.)
- i. (REDACTED.)

## Decision

51. The Committee considered whether the Registrant's fitness to practise remains impaired. The Committee has taken into account all of the documentation before it, the submissions on behalf of the Council and the submissions of the Registrant.
52. *The Committee recognised and applied the following guidance in Abrahaem v GMC [2008] EWHC 183:*
- "...the review has to consider whether all the concerns raised in the original finding of impairment through misconduct have been sufficiently addressed to the Panel's satisfaction. 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 and through insight, application, education, supervision or other achievement sufficiently addressed the past impairments."*
53. The Committee noted and commends the Registrant's engagement and passion for public health safety, including spending three years working on COVID testing sites, developing data entry programmes to assist patients with vaccinations, and developing a school platform. However, the Committee found the Registrant's current fitness to practise to still be impaired on the basis that:
- a. Although he has provided a reflective statement, the Registrant's reflective statement does not address:
    - i. The breaches of the Council's Standards for Pharmacy Professionals ("Standards");
    - ii. why he made the mistakes that he did and how he has grown as result;
    - iii. the impact of his actions on colleagues and patients;
    - iv. (REDACTED)
    - v. (REDACTED.)
    - vi. concerns in relation to being out of practice for a considerable period of time.

- b. (REDACTED)
  - c. The absence of an updated (REDACTED) report before the Committee – as a result of shortcomings of both the Council and Registrant – does not help the Registrant to discharge his burden that he is no longer impaired.
  - d. The Registrant has admitted to his practise being “rusty”. Further, given that:
    - i. the Registrant has not practised as a pharmacist since at least 23 February 2022, nearly three years ago;
    - ii. the CPD records which the Registrant has submitted do not address or reflect the Standards that the Registrant has breached; and
    - iii. any training undertaken does not cover the concerns of the Principal Hearing or Review Committees, the Committee considers that the Registrant has not kept his practice up to date, to an extent that would place the public at risk of harm.
54. In addition, informed members of the public would be concerned if the Registrant were to be permitted to return to practice unrestricted when his fitness to practise was still found to be impaired. His return to practice would undermine public confidence in the profession and would not uphold professional standards.
55. The Committee went on to consider an appropriate and proportionate sanction in the circumstances.
56. The Committee considers that the Registrant’s proven misconduct and conviction, coupled with partial insight, remorse and remediation, makes taking no action or imposing a warning insufficient to protect the public. Further, these sanctions would not adequately meet the wider public interest of maintaining public confidence in the profession and declaring and upholding proper standards of conduct and behaviour. Therefore, the Committee finds that taking no action or issuing a warning to be inappropriate.
57. The Committee considered that the imposition of conditions would not be appropriate and proportionate to mitigate any risks posed to patients for the following reasons:
- a. The Registrant has not provided any insight into (REDACTED.)
  - b. The Registrant admitted that his practise is “rusty”. Given he has not practised in nearly three years and the CPD that he has submitted does not address or reflect the standards that the Registrant has breached, conditions cannot mitigate the risk posed by the Registrant returning to practice, given his lack of practise.
  - c. The Registrant has not provided any insight into (REDACTED.)
  - d. The Registrant has had intermittent engagement with the Council since the Principal Hearing and has not undertaken many of the recommended actions set

out by the Principal Hearing Committee to assist his return to practice. This indicates that the Registrant is less likely to comply with conditions of practice.

- e. Given the misconduct and conviction took place outside of the workplace, the Committee considers that there are no conditions of practice which are suitable in this matter.
58. The Committee considered that a continued suspension – for a period of six months – to be an appropriate and proportionate sanction in the circumstances, given:
- a. The Registrant has not had a complete opportunity to discharge his burden that he is no longer impaired given that the Council would not (REDACTED.)
  - b. The Registrant has (REDACTED.)
  - c. A six-month suspension would allow the Registrant to:
    - i. (REDACTED.)
    - ii. (REDACTED.)
    - iii. (REDACTED)
    - iv. Undertake appropriate training to allow him to return to pharmacy practise.
59. The Committee considered that a removal order would be disproportionate given the reasons set out in paragraph 58.
60. Consequently, the Committee orders the suspension of the Registrant from the Council's register for a period of six months.
61. Any future reviewing committee may be assisted by:
- a. A reflective piece dealing, addressing the issues of:
    - i. why he made the mistakes that he did and how he has grown as result;
    - ii. the impact of his actions on colleagues and patients;
    - iii. (REDACTED)
    - iv. (REDACTED)
    - v. concerns in relation to being out of practice for a considerable period of time and how he would plan to address this.
  - b. (REDACTED)
  - c. (REDACTED)
  - d. Evidence from the Registrant that he has been maintaining his CPD and training, which is relevant to his return to practise;

- e. An update on what if any work, voluntary or paid, the Registrant has been undertaking; and
- f. Any testimonials that the Registrant wishes to provide, including personal as well as professional testimonials.

### **Interim Measures**

- 62. Ms Stephens made an application for an interim measure of suspension to be imposed on the Registrant's registration, to take effect from today's date, pursuant to Article 60 of the Pharmacy Order 2010, pending the coming into force of the Committee's substantive order. She submitted that an interim measure would be consistent with the substantive order imposed by the Committee, for the protection of the public and in the wider public interest. The Registrant did not comment on the application.
- 63. In considering Ms Stephens' application, the Committee took account of its decision to suspend the Registrant for six months will not take effect until 28 days after the Registrant is formally notified of the outcome, or until any appeal is concluded.
- 64. The Committee has found that the Registrant is still impaired and there remains a risk that the Registrant might repeat his conduct, if permitted to return to work unrestricted. It accepts the submissions of Ms Stevens that his unrestricted registration would risk public protection and is not in the wider public interest.
- 65. The Committee is satisfied that it is therefore appropriate for an interim measure to be in place prior to the taking effect of the substantive order.
- 66. The Committee has therefore imposed an interim measure of suspension on the Registrant's registration from today's date, pending the coming into force of the substantive order.
- 67. This concludes the determination.