

General Pharmaceutical Council

Fitness to Practise Committee

Principal Review Hearing

Remote videolink hearing

23 October 2025

Registrant name:	Nadeem Rafiq
Registration number:	2055528
Part of the register:	Pharmacist
Type of Case:	Misconduct
Committee Members:	Neil Calvert (Chair) Kellie King (Registrant member) Michaela Jones (Lay member)
Legal Adviser:	Gary Leong
Committee Secretary:	Gemma Staplehurst
Registrant:	Present and not represented
General Pharmaceutical Council:	Represented by Gareth Thomas, Case Presenter
Order being reviewed:	Suspension 12 months
Fitness to practise:	Not impaired, suspension to lapse upon expiry

Particulars of Allegations found proved at the Principal Hearing

You, a registered pharmacist, whilst working at Buchans Chemist, 7 Perry Common Road, Erdington, 823 7AB

1. *On 3 January 2023 you:*
 - a. *sent Colleague A a WhatsApp message, which stated “Don't sit next to me...u turning me on”. **ADMITTED***
 - b. *Squeezed Colleague A's left buttock. **PROVED***
2. *Your actions at 1 above were sexual in nature and/or sexually motivated in that you acted in pursuit of:*
 - a. *sexual gratification **PROVED***
 - b. *a future sexual relationship **PROVED***
3. *On Colleague A's first date back (on or around 14 February 2023) after the incidents mentioned at 1 above:*
 - a. *you shouted at Colleague A with words to the effect of “what the fuck are you talking about all this time”. **ADMITTED***
 - b. *you shouted at Colleague A words to the effect of “ring him back i'll give him your fucking number -you can go out with him”. **ADMITTED***
 - c. *You made comments whilst Colleague A was talking to Patient A to the effect that Patient A was Colleague A's boyfriend. **ADMITTED***
4. *On the second date back (on or around 15 February 2023) you subsequently worked with Colleague A after the incidents set out at 1 above, you:*
 - a. *Challenged Colleague A on why she had made “complaints” about you to “Ash”. **PROVED***
5. *Your conduct at 3 and/or 4 above was:*
 - a. *intended to harass and/or intimidate Colleague A. **PROVED***

- b. *in retaliation for Colleague A raising concerns about you to others including senior colleagues at the pharmacy. **PROVED***

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

Documentation

Exhibit 1- Council's hearing bundle

Exhibit 2- Council's skeleton argument

Exhibit 3- Registrant's bundle

Exhibit 4- Registrant's appendix containing a copy of closing statement and future commitments

Exhibit 5- Registrant's certificate of completion of professional boundaries training

Exhibit 6- Registrant's policy checklist and summary

Witnesses

Nadeem Rafiq, the Registrant

ZK, on behalf of the Registrant

Introduction

1. This is the written determination of the Fitness to Practise Committee at the General Pharmaceutical Council ('the Council').
2. This 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.
 - d. The Committee also has regard to the guidance contained in the Hearings and outcomes guidance 2024.
4. 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

5. The Committee has seen a letter dated 16 September 2025 from the Council headed 'Notice of Hearing' ('Notice') addressed to the Registrant and sent to them via their email address as noted on the Register.
6. The Committee was satisfied that there had been good service of the Notice in accordance with Rules 3 and 16.

Background

7. This is the first Principal Hearing Review relating to Mr Nadeem Rafiq ("the Registrant") a Pharmacist first registered on 7 November 2002 and whose registrant transferred to the General Pharmaceutical Council ("the Council") with registration number 2055528.
8. This hearing follows a decision made by the Fitness to Practise Committee ("the Committee") at a Principal Hearing that took place on dates in August and October 2024. The Committee found that the Registrant's fitness to practise was impaired by reason of misconduct. The case arose from concerns about sexually inappropriate behaviour in a pharmacy work setting. The Committee went on to impose a sanction of suspension for 12 months. The suspension took effect from 4 November 2024.

9. The Committee at the last hearing suggested that today's committee may be assisted by:
 - a. A submission of a reflective piece in which the Registrant reflects on his conduct, sets out how his sustained conduct affected the victim, engaged professional standards, and how his conduct has affected public confidence in himself as a pharmacist;
 - b. Proof that he has been on courses to improve his inappropriate behaviour;
 - c. CPD courses to demonstrate that he has kept up with pharmacy practice; and
 - d. His attendance at any review.

Submissions on behalf of the Council

10. Mr Thomas, on behalf of the Council acknowledges that the Registrant has submitted a substantial bundle of material ahead of this review hearing, including reflective statements, testimonials, and evidence of ongoing professional development. The Registrant confirms in his written material that over the past 12 months, he has worked as a pharmacy assistant in a community setting under the mentorship of a Superintendent Pharmacist (SI). He now accepts that his past behaviour was unacceptable and inappropriate, and recognises the hurt caused. The bundle includes sexual harassment awareness training, positive references from pharmacy colleagues, and a letter from his supervisor confirming he has taken full responsibility.
11. Mr Thomas submits that the Registrant attributes his conduct to a period of personal stress, **PRIVATE** following the COVID-19 pandemic. He has also described the emotional toll of the Fitness to Practise process. The Registrant assures the Committee that such behaviour will not be repeated and has provided evidence of recent activities, including letters addressing stress, the impact of suspension, and his professional progress.

12. At the time of the original hearing, the Registrant showed limited insight, particularly in his comments about Colleague A and his response to the findings. In contrast, the current material suggests he has remained engaged in pharmacy, reflected on the impact of his actions, and worked to maintain his skills.
13. Mr Thomas further submits that the 12 month suspension was at the upper end of available sanctions. The Council submits that public interest may have been served and removal was not necessary. The Registrant's written submissions are encouraging, and the Committee may consider whether his oral evidence today reflects that progress. It is for the Committee to determine whether he has remediated his misconduct, whether his fitness to practise remains impaired, and what sanction, if any, is now appropriate.

Registrant's evidence

14. The Registrant gave evidence under affirmation. He described the 12 month suspension as a severe sanction, which prompted deep reflection on his past behaviour. He acknowledged that his actions were out of character and expressed anger and disappointment in himself. During this challenging period, **PRIVATE**, he focused on remediation and personal rehabilitation, supported by a professional mentor (ZK).
15. Since his suspension, the Registrant has taken up a role as a pharmacy assistant in a community setting, using the opportunity to realign his values with the GPhC 's standards. He submitted a bundle of evidence demonstrating positive change, including training records, CPD activities, case studies, and a safeguard practice checklist. He stated that these efforts reflect sustained and ongoing work, not limited to this review process.

16. The Registrant stated that he accepts full responsibility for his previous misconduct and expressed genuine remorse. He described a renewed commitment to professionalism, resilience, and ethical practice, and emphasised his desire to regain public trust. The Registrant stated that he no longer recognises the person he was at the time of the original events and believes he has developed significant insight and self awareness.
17. The Registrant acknowledged the impact of his behaviour on his family, particularly his children, and described how the experience has reshaped his values and priorities. He spoke of his intention to maintain a healthy work-life balance, monitor stress triggers, and uphold high standards of behaviour and professionalism.
18. The Registrant expressed a strong desire to return to practice, expand his clinical skills, and pursue independent prescribing. He stated that being given the opportunity to work again (even in a non-pharmacist role) allowed him to rebuild not only professionally but personally, as a member of the community and his family. He assured the Committee that he is no longer a risk to the public and is committed to upholding the standards expected of a pharmacist.
19. The Registrant was asked why he had chosen to work with a mentor, given that it was not a condition of his suspension. He explained that he had worked with ZK intermittently since 2023, having previously supported service development at his pharmacy. He described ZK as a man of honour and integrity, highly respected in the community, and someone whose personal and professional qualities he deeply admires. The Registrant noted that they shared common values and experiences and that ZK had offered moral support and encouragement during a difficult time.
20. The Registrant stated that he had previously mentored ZK during his pre-registration year and that their professional relationship had evolved into a supportive mentorship. ZK recognised the Registrant's behaviour as out of character and agreed

to support him through his remediation journey. The Registrant described the transition from Superintendent Pharmacist to pharmacy assistant as humbling, and said he embraced the experience with positivity and commitment, motivated by a desire to demonstrate to the GPhC and the Committee that he had remediated.

21. In response to questions about the mentorship log, the Registrant confirmed that the structured approach was his own initiative. He began documenting his learning and reflections, identifying key areas for improvement including professionalism, person-centred care, leadership, and professional boundaries. He highlighted one particular course — an e-learning module on sexual harassment in the workplace for managers (completed on 22 September 2025) as especially impactful, providing a new perspective and prompting further background reading.
22. When asked about his future plans if permitted to return to unrestricted practice, the Registrant expressed a strong desire to work as an independent prescriber in a clinical setting and to contribute to academia and leadership within the pharmaceutical profession. He also expressed interest in applying his clinical experience to areas such as psychiatric pharmacy and mental health. In the short term, he intends to apply for independent prescriber training and work in community pharmacy while completing the course.
23. The Committee asked the Registrant to reflect on what led to the incident with Colleague A. He cited **PRIVATE** poor judgment, heightened by his naturally friendly manner which, at the time, led to blurred boundaries and inappropriate behaviour.
24. In terms of preventing future incidents, the Registrant stated that he is now able to identify warning signs and implement safeguards. He emphasised the importance of maintaining professionalism, adhering to training, and stopping inappropriate conversations early. He described a range of personal strategies including keeping a reflective diary, practising mindfulness, **PRIVATE**, and maintaining a healthy lifestyle.

He also spoke of the importance of separating personal issues from the workplace and being open with colleagues and mentors about any struggles.

25. When asked whether existing policies or legislation would be necessary to prevent a repeat of his previous behaviour, the Registrant stated that the GPhC's professional standards are comprehensive and sufficient. He viewed additional policies as supplementary guidance for staff but accepted that his own failure was not due to a lack of standards but a failure to uphold them.
26. Finally, the Registrant was asked about the testimonials he submitted. He confirmed that they were written in early September 2025 by colleagues who were aware of his Fitness to Practise proceedings. Some were handwritten and others typed, with contact details included. The Registrant stated that he transcribed the handwritten testimonials and had them verified by the authors, assuring the Committee that the words were their own.

ZK's evidence

27. ZK, a registered Pharmacist, was called by the Registrant to give evidence and confirmed that he has known Mr Rafiq for approximately 19 years, having first worked together briefly at the same pharmacy. Their professional relationship continued over the years, including occasions where the Registrant was booked as a locum pharmacist. ZK stated that when the Registrant contacted him and disclosed the findings of the Fitness to Practise proceedings, he took time to reflect before agreeing to act as his mentor.
28. ZK expressed initial shock at the allegations, given the Registrant's long standing career, but noted that the Registrant was open and reflective. They commenced a structured mentorship programme 12 months ago, with the Registrant working under ZK's supervision for an average of three days per week. ZK explained that while he was confident in the Registrant's clinical competence, the focus of the mentorship

was on professional behaviour, particularly in relation to colleagues and members of the public. He confirmed that GPhC standards were central to their discussions and that they regularly reviewed areas for improvement.

29. ZK reported that the Registrant has shown consistent progress, dedication, and professionalism throughout the mentorship. He has completed relevant courses and maintained a good working relationship with colleagues. ZK stated that he has no concerns about the Registrant's conduct and believes he is capable of returning to practice.
30. ZK confirmed that he had read the previous Committee's determination and was aware of the specific allegations. He also prepared a letter of support for the Registrant and consulted with colleagues who had worked alongside him. All reported no concerns regarding the Registrant's professionalism or behaviour, including any sexually inappropriate conduct. ZK described the Registrant as respectful, a team player, and well informed about boundaries and ethics in the workplace.

Closing submissions

31. On behalf of the Council, Mr Thomas confirmed that questions had been raised regarding the character testimonials submitted by the Registrant. He clarified that Mr Hussain, one of the referees, had confirmed to a colleague in the Council's Fitness to Practice team that he had provided the testimonial for this hearing and was aware of its intended use.
32. Mr Thomas submits that the key question is whether the Registrant's fitness to practise remains impaired following the misconduct found a year ago. The previous Committee identified a risk of repetition, and this hearing was expected to address that concern.

33. Mr Thomas acknowledged the Registrant has undertaken substantial remediation, including mentorship and training, and presented more thoughtfully than at the last hearing. His attitude towards Colleague A has improved, and the letter of apology reflects this. The decision to work under a mentor and the structured approach taken, despite being under suspension, is commendable. Mr Thomas further submitted that ZK's evidence was positive, and no concerns have been raised by the Registrant's colleagues over the past year.
34. However, Mr Thomas submitted that the Registrant has not fully explained how the misconduct occurred. While he cited overfamiliarity and workplace culture, there remains a lack of psychological insight. A pharmacist should not require a policy to understand that sexual harassment is unacceptable, and there may be some minimisation of personal responsibility.
35. Ultimately, the Committee must weigh the progress made against the potential risk. If impairment is found, sanctions must be considered in ascending order. A further suspension may be disproportionate, and conditions, though unusual in such cases, could be considered if necessary to manage risk. This is a matter for the Committee's judgment.
36. In closing submissions, the Registrant expressed his gratitude for the opportunity to present his position to the Committee. He submitted that over the past 12 months, he has developed genuine insight into professional boundaries and conduct, supported by structured mentorship and positive feedback from colleagues. He described the changes as ongoing and meaningful, **PRIVATE**, build resilience, and adopt a more mindful and mature approach to both personal and professional challenges.

37. The Registrant emphasised that being a pharmacist is not solely about clinical expertise, but about earning and maintaining public trust. He acknowledged the importance of upholding GPhC standards and acting as a role model within the profession. He stated that reflection and accountability have been central to his growth, and that he is committed to applying professional judgment with honesty and care.
38. The Registrant highlighted his readiness to return to safe practice, citing his structured learning, consistent conduct, and awareness of the standards expected of him. He described the privilege of being a pharmacist and his desire to rebuild his reputation and relationships. He submitted that he is now in control of his actions and behaviour, and that professionalism will remain his focus going forward. He concluded by stating that although he has lost much, he has everything to gain, and is determined to demonstrate his commitment to the profession.

Decision on Impairment

39. The Committee considered whether Registrant's fitness to practise remains impaired. The Committee carefully considered all the evidence presented, including the Registrant's written reflections, oral testimony, character testimonials, and the oral evidence of his mentor, ZK. It also reviewed the previous committee's findings and the expectations set for this review hearing.

40. *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."

41. The Committee accepted the advice of the Legal Adviser.
42. The Committee acknowledged that the Registrant has undertaken substantial remediation during the 12 month suspension period. He has worked under close supervision in a pharmacy setting, maintained professional conduct, and received positive feedback from colleagues. The structured mentorship programme with ZK, initiated voluntarily, was noted as a significant step in his rehabilitation. The Committee gave significant weight to the evidence of ZK, himself an experienced registered Pharmacist, both in terms of the Registrant's progress and the absence of any concerns regarding his behaviour.
43. The Committee found that the Registrant has developed clear professional insight, particularly around boundaries, conduct, and the standards expected of a pharmacist. His CPD courses and reflections demonstrate a commitment to learning and improvement. He has shown genuine remorse and a desire to rebuild trust in the profession.
44. The Committee did note some limitations in the Registrant's insight into the reasons for the original misconduct. Despite being given opportunities during the hearing, he did not fully articulate what motivated his actions at the time or whether he considered the potential harm to Colleague A in the moment. While he provided possible reasoning, including personal stress and emotional strain, the Committee found that his explanation lacked depth in terms of self awareness and psychological insight.
45. In all the circumstances of this case, however, the Committee was satisfied that the Registrant does not pose a current risk to patients, colleagues, or the public. He has demonstrated sustained remediation, professional development, and a willingness to engage with the process. The absence of further complaints, the positive testimonials, and the structured support in place, all point to a low risk of repetition.

46. The Committee also considered the public interest. It was satisfied that the 12 month suspension adequately addressed the need to uphold public confidence and professional standards in the profession.
47. Taking all factors into account, the Committee finds that the Registrant's fitness to practise is no longer impaired.
48. Having found that the Registrant's fitness to practise is no longer impaired the current suspension will lapse on expiry, namely on 4 November 2025.
49. This concludes the determination.