

General Pharmaceutical Council

Fitness to Practise Committee

Principal Review Hearing

Remote videolink hearing

17 March 2026

Registrant name:	Simon Addison Smith
Registration number:	2024372
Part of the register:	Pharmacist
Type of Case:	Misconduct
Committee Members:	Penelope Titterington (Chair) Joanne Loague (Registrant member) David Hutton (Lay member)
Committee Secretary:	Adam Hern
Registrant:	Not present and not represented
General Pharmaceutical Council:	Represented by Mike Ko, Case Presenter
Order being reviewed:	Suspension (12 months)
Fitness to practise:	Impaired
Outcome:	Removal
Interim measures:	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 **15 April 2026** 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 Allegations found proved at the Principal Hearing

You, a registered pharmacist, and as Superintendent Pharmacist of Cannabliss, 15 Cannon Street, Preston, Lancashire, PR1 3NR (“the pharmacy”), between 1 February 2021 and 10 May 2022 failed to ensure that “the keeping, preparing and dispensing of medicinal products other than medicinal products on a general sale list was under your management” in that:

1. You allowed the pharmacy to operate without having in place adequate governance and safeguards in that
 - 1.1. the pharmacy did not have a risk assessment in place for the services it provided; PROVED
 - 1.2. the pharmacy did not maintain records to provide assurance that the Cannabis Based Medicinal Products (CBPM) it supplied had been appropriately prescribed; PROVED
 - 1.3. the pharmacy supplied high-risk medicines to people who may be vulnerable in circumstances where no safeguarding procedures or training had been put in place; PROVED
 - 1.4. a company Director, who is not a registered pharmacy professional and/or was untrained, was found to be working alone in the pharmacy on 10 May 2022; PROVED
 - 1.5. a number of dispensing labels were found, which had not been attached to a medicine, but had already been signed by a dispenser and pharmacist; PROVED
2. Failed to ensure that the pharmacy was compliant with The Medicines Act 1968, The Health Act 2006 and The Medicines (Pharmacies) (Responsible Pharmacist) Regulations 2008, in that:

2.1. the pharmacy regularly operated without a Responsible Pharmacist being present and/or signed into the Responsible Pharmacist log (pharmacy record); PROVED

2.2. the Responsible Pharmacist log contained only 9 entries; PROVED

2.3. some of the entries in the Responsible Pharmacist log spanned weeks, with no absences recorded; PROVED

2.4. on 1 March 2022 and 15 February 2022, the record entry in the Responsible Pharmacist log did not include a time that responsibility ceased; PROVED

2.5. the Private Prescription register showed 40 of 167 records when no Responsible Pharmacist was recorded as being in charge of the pharmacy; PROVED

3. Failed to ensure that Controlled Drugs (CD's) were managed safely and/or in accordance with The Misuse of Drugs Act 1971 and The Misuse of Drugs Regulations 2001, in that:

3.1. 96 of the 212 'supplied' entries in the CD register had 'late entry' noted; PROVED

3.2. 18 of the 59 'received' entries in the CD register had 'late entry' noted; PROVED

3.3. 39 out of 212 records in the CD register recorded a date of supply on dates when there was no Responsible Pharmacist in charge of the pharmacy and/or signed into the Responsible Pharmacist log; PROVED

3.4. All of the entries in the CD register for between 8 March 2022 to 10 May 2022 had been made by the unregistered and/or untrained company Director; PROVED

3.5. three records in the CD register did not have a corresponding record in the private prescription register; patient A, patient B and patient C; PROVED

....

3.8. Five patients were identified as having received prescriptions from two different prescribing services, but there are no records to indicate that these had been challenged; Patient A, Patient D, Patient E, Patient F and Patient G; PROVED

3.9. CBPMs and Schedule 2 CD were not stored in a CD cabinet; PROVED

Documentation

Exhibit 1- Council's hearing bundle

Exhibit 2- Index to the Council's bundle

Exhibit 3 - Council's skeleton argument dated 13 March 2026

Exhibit 4- Proof of Service Bundle

Exhibit 5- Application to Proceed in Absence Bundle

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.

4. The Committee also has regard to the guidance contained in the Council's *Good decision making: Fitness to practise hearings and outcomes guidance, 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 17 February 2026 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. The Committee saw the email sending this notice and a copy of the Register showing the email address and the Registrant's choice to receive emails from the GPhC.
7. The Committee was satisfied that there had been good service of the Notice in accordance with Rules 3 and 16.

Application to proceed in the absence of the Registrant

8. The Registrant was not in attendance at this hearing, nor was someone attending on their behalf. The Committee heard submissions from Mr Ko, on behalf of the Council under Rule 25 to proceed in the absence of the registrant.
9. The Committee accepted the advice of the Legally Qualified Chair.
10. The Committee decided to proceed in the absence of the Registrant for the following reasons:
 - The Committee has found good service of the Notice.

- The Committee noted that the Registrant had not specifically indicated whether or not he would attend the hearing. He had responded to an email from Mr Ko making reference to the hearing date saying *“Mike as per all previous emails I do not intend to practice pharmacy again and suggest that you proceed on that basis and remove me as suggested.”* The Committee understood from this email that the Registrant was aware of the review hearing and the nature of the Council’s submissions. The Committee have therefore considered that in not attending today, the Registrant has chosen to voluntarily absent themselves from this hearing.
- The Committee has seen correspondence and the Committee determination that indicates that the Registrant voluntarily absented himself from the Principal Hearing in 2025.
- The Council contacted the Registrant regarding this current hearing via email 9 times. Hearing details were also sent by post, which was recorded as being delivered and signed for by someone called Smith on 14 March 2026. The Registrant responded to these notifications only once. The Registrant’s one emailed response did not include any reason for an adjournment or request one. In fact the Committee considers that it could be read as an indication that the Registrant wished the Committee to proceed with the hearing. The Committee finds there was no information to suggest an adjournment would result in the Registrant’s attendance in future.
- There is a public interest in the expeditious disposal of cases.
- Not proceeding today would result in the current order lapsing on 01 April 2026 without a Committee considering whether the Registrant remains impaired and whether any further action is required to protect the public or address the public interest.

Background

11. The Background to the case is as set out by Mr Ko based on the summary provided by the previous Committee.
12. The Registrant was the Superintendent pharmacist for Cannabliss Ltd ('the Pharmacy'), a pharmacy specialised in supplying cannabis-based medicinal products ('CBMPs') against private prescriptions from doctors on a specialist register. CBMPs are Schedule 2 controlled drugs and, save for 3 products, are all unlicensed medicines.
13. On 10 May 2022, the Council's Inspector carried out an unannounced visit of the Pharmacy. During his inspection, the Inspector identified several concerns in relation to the operations at the Pharmacy, its management of controlled drugs, and its record keeping.
14. During the inspection, no responsible pharmacist ('RP') was present, and an untrained company director was working alone at the Pharmacy. A review of the Pharmacy's RP log showed only 9 entries between 1 February to 10 May 2022. The Registrant was recorded to be the responsible pharmacist for 3 of those entries.
15. As a result of the findings at the inspection, conditions were imposed on the Pharmacy prohibiting it from obtaining or supplying any controlled drugs.

Hearing history

16. The Principal Hearing took place on 25-28 February and 3 March 25. The Registrant did not attend but generally accepted the allegations. The Committee found the above allegations proved and imposed a 12 month suspension which is due to expire on 01 April 2026.
17. The Committee at the previous hearing determined that the Registrant's misconduct meant that the wider public interest (protection of the public, maintaining public

confidence and upholding professional standards) required a finding of impairment. That Committee determined that there had been no remediation and there was a lack of reflection. The Committee found that although the Registrant had accepted responsibility and apologised he did not have any insight into the full impact of his conduct. The Committee considered that the Registrant showed through his emails a dismissive response to regulation and the Fitness to Practise process. The Committee was particularly concerned by the Registrant's lack of explanation as to how and why such fundamental errors of judgment occurred, and failure to ensure that proper processes and procedures were set, maintained and followed.

18. The Committee at the last hearing determined the following to be relevant to the outcome imposed:

"[The Registrant] disregarded the strict rules relating to the governance and safeguarding of CBMPs by allowing the Pharmacy to operate without a RP on duty on a number of occasions, by failing to put into place proper systems and processes for the operation of the Pharmacy and by delegating the overall running of the Pharmacy to an unqualified director.

Although no risks materialised and there was no evidence of harm to patients, there was a real risk of harm, including to people who may be vulnerable, which [the Registrant] did not appear to recognise or acknowledge. [The Registrant] did not engage with the regulatory process at all. His responses were flippant. His lack of engagement with his regulator demonstrated a flagrant disregard for the proper governance he knew was required in respect of the management and handling of CBMPs and the regulatory process.

The Committee concluded that [the Registrant] demonstrated a deep-seated attitudinal problem which he had not sought to remediate and in respect of which he showed little insight. The Committee therefore concluded that there was a real risk of repetition, and that [the Registrant] continues to present a risk to the safety of patients and the wider public.

The Committee also considered that given the importance of proper governance systems and management in respect of CBMPs, there is a strong public interest in declaring and maintaining appropriate standards for pharmacy professionals in order to maintain public confidence in the profession.

....

The importance of ensuring that proper systems and processes are in place, are properly maintained and followed when supplying medication, but particularly CBMPs cannot be understated. Such drugs need to be properly and carefully managed, handled and stored. Supply of CBMPs requires careful oversight, particularly in relation to prescription history, in order to protect the safety and wellbeing of patients.

The Committee considered this to be a serious case. The public would be shocked that CBMPs were being handled in this way and that [the Registrant] was aloof from the actual management of that risk. He was in a senior position but allowed [another registrant] to act as an RP knowing that the Pharmacy was being run on a day-to-day basis by a Director who was not a pharmacy professional. The Committee therefore concluded, given the lack of governance demonstrated by [the Registrant].... and his attitude concerning this, that public protection, the maintenance of proper professional standards and public confidence in the profession necessitated an Order of Suspension...

....

The Committee considered whether [the Registrant] should be removed from the Register. It concluded that although his misconduct was serious, it was not so serious as to require his removal. The misconduct related to matters of governance rather than clinical competence but did not reach the upper end of the scale as being so serious that it is fundamentally incompatible with being a registered professional."

19. The Committee at the last hearing suggested that today's Committee may be assisted by:

- *Evidence of training in relation to governance systems relating to the misconduct;*
- *Evidence of focused reflection on the following:*
 - *why [the Registrant] became involved with the Pharmacy*
 - *why he failed to exercise due diligence in relation to the existence of proper governance and safeguarding systems*
 - *why he did not ensure that the governance and safeguarding systems were operated and maintained when he acted as Superintendent of the Pharmacy.*
- *Evidence that [the Registrant] recognises and understands the importance of the regulatory process and the impact of his misconduct on patients and the wider public.*

Submissions of the Council

20. *"The Council submits that [the Registrant's] fitness to practise remains impaired and that his registration should be removed from the register. The evidence suggests that he has not and will not seek to remedy the issues found at the Principal Hearing, such that his fitness to practise will continue to be impaired indefinitely. This is entirely incompatible with continued registration such that only removing him from the register would adequately address the risk he poses to the public and the wider public interest.*

Impairment

The Council makes reference to the nature of the misconduct as found by the Committee at the Principal Hearing...This included serious failures to observe fundamental pharmacy principles including basic record keeping and governance to ensure controlled drugs were safely supplied with the oversight of a qualified individual. In the continued absence of any real insight or remediation , there is nothing to suggest that [the Registrant] poses any less of a risk to patient safety today than he did 12 months ago.

Therefore, the Council submits that [the Registrant] continues to pose a significant risk of harm such that his fitness to practise remains impaired. Such a finding would also be in the public interest, particularly to maintain public confidence and promote professional standards.

Sanction

The Council further submits that the only appropriate sanction in these circumstances is the removal of [the Registrant] from the Council's register. The Committee will have regard to the overarching objective as set out in Art.6 of the Order, including to promote and maintain proper professional standards and public confidence.

Considering the absence of any remediation in the duration of this case and [the Registrant's] repeated expressions of his desire to retire from pharmacy practise, there is no evidence to suggest that there is any realistic prospect of remediation. To maintain the registration of a registrant in whose practise serious issues have been identified and will never be remedied would not further the overarching objective.

Given that there is no realistic prospect of remediation, neither conditions nor a further period of suspension would be proportionate. Conditions would not be safe given the seriousness of [the Registrant's] failings, the risks of which remain present. Nor would a further suspension achieve any purpose when those risks are unlikely to ever be addressed.

As such, any lesser sanction that would maintain [the Registrant's] registration would not further the overarching objective, and that removing his registration from the register would be the only appropriate outcome in these circumstances."

Submissions of the Registrant

21. The Committee did not receive any formal written submissions from the Registrant and he was not present at the hearing. However the Committee did take into account previous correspondence from the Registrant and a recent email dated 20 February 2026 to Mr Ko where he said *"Mike as per all previous emails I do not intend to practice pharmacy again and suggest that you proceed on that basis and remove me*

as suggested." The Registrant has confirmed that he is not in breach of the current suspension.

Determination

Decision on Impairment

22. The Committee considered whether the Registrant's fitness to practise remains impaired. The Committee has taken into account all of the documentation and submissions before it.
23. The Committee accepted the advice of the Legally Qualified Chair which included reference to *Abraham 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."
24. The Committee considered the findings on impairment of the previous Committee. That Committee considered that there had been no remediation and a lack of reflection and insight. This Committee has no evidence of any further remediation, reflection or insight. The previous Committee considered that the Registrant showed, through his emails, a dismissive response to regulation and the Fitness to Practice process. The Registrant has continued to show limited engagement with this process. The previous Committee was particularly concerned by the Registrant's lack of explanation and this Committee has had no further explanation for the Registrant's previous failures and errors of judgement.
25. In 2023 the Registrant expressed a wish to remain on the register. However, since then he has consistently indicated that he no longer wishes to practice as a pharmacist and suggests he be removed from the Register. He has not submitted any

documents to the GPhC regarding his registration. However, this Committee notes that the Registrant was informed of the process for voluntarily removing himself from the Register in March of 2025 but he has not since made such an application. This Committee considers that, given the lack of insight reflection or remediation, the previously identified risk to patient safety should the Registrant return to unrestricted practice, remains.

26. The Committee finds that the Registrant has not addressed past concerns and so a finding of current impairment continues to be necessary on the basis of the protection of the public. Although the misconduct has now been marked by the 12 month suspension the Committee considers that the limited engagement, reflection and remediation in the face of serious matters means that a finding of current impairment is necessary in order to maintain public confidence and uphold professional standards.

Decision on Outcome

27. Having found impairment, the Committee has gone on to consider the matter of outcome. The Committee took into account all the documents and submissions before it.
28. The Committee accepted the advice of the Legally Qualified Chair and referred to the Council's *'Good decision making: Fitness to practise hearings outcomes guidance Revised March 2024'*. The Committee's powers are set out in Article 54(3) of the Order. The Committee should consider the available outcomes in ascending order from least restrictive, namely take no action, to most restrictive, namely removal from the Register, in order to identify the appropriate and proportionate outcome that meets the circumstances of the case.
29. The purpose of the outcome is not to be punitive, though an outcome may in fact have a punitive effect. The purpose of the outcome is to meet the overarching objectives of regulation, namely the protection of the public, the maintenance of public confidence and to promote professional standards. The Committee is

therefore entitled to give greater weight to the public interest over the Registrant's interests.

To take no action.

30. The Committee first considered taking no action. However, given the Committee's finding of current impairment including an ongoing risk to the public it determined that this outcome would not protect the public or satisfy the public interest.

Conditions of Practice.

31. The Committee next considered the imposition of conditions of practice. Conditions of practice would allow the Registrant to practise albeit with restrictions. As the previous Committee identified a deep-seated attitudinal issue and a flagrant disregard for governance, adherence to which is an essential element of all pharmaceutical practice. As this has not been remediated, this Committee considered that there would be no workable conditions that could protect the public from the risk arising from the misconduct. Given the Registrant's limited engagement in the regulatory process to date the Committee could not be satisfied that he would comply with any conditions imposed. Therefore, the Committee found that Conditions of Practice would not protect the public or satisfy the public interest.

Suspension Order.

32. The Committee next considered whether further suspension would be a proportionate outcome. The Committee noted that a suspension would protect the public while it was in force.
33. The Committee noted that although the Registrant has not applied for voluntary removal from the Register, from 2025 onwards he has consistently stated his intention not to return to pharmacy practice. This has been recently repeated in response to the notification about this hearing and he has repeatedly suggested he be removed from the register. The Committee noted that the previous determination included a clear indication of the steps that he could take to assist this Committee at this review hearing if he wished to have an opportunity of returning to safe practice.

The Registrant has had a year to take steps in this direction but has not indicated in any way that he has even started to do so. The Committee considers that the passage of time; the continued limited engagement in the regulatory, remedial or reflective processes despite clear directions and the lack of any development in insight clearly demonstrate that the Registrant has no intention of engaging. The Committee considers that in the light of this clear indication, continuing to maintain the Registrant's registration and extending the regulatory process would undermine public confidence and professional standards.

Removal

34. The Committee acknowledged that the previous Committee concluded that *"although his misconduct was serious, it was not so serious as to require his removal. The misconduct related to matters of governance rather than clinical competence but did not reach the upper end of the scale as being so serious that it is fundamentally incompatible with being a registered professional."* However, this Committee concluded that after a year with no progress and further clear indications from the Registrant of his unwillingness to engage, there is now no realistic prospect of remediation of misconduct that demonstrated deep-seated attitudinal issues and a flagrant disregard for governance. The Registrant has consistently rejected the regulatory and reflective engagement that is an essential part of being a registered professional. The Committee considers that removal is now required as the overall behaviour of the Registrant is fundamentally incompatible with being a registered professional.
35. **The Committee therefore directs that the Registrar removes Mr Smith from the Register.**

Decision on Interim Measure

36. Mr Ko submitted that an interim measure was necessary for the protection of members of the public or is otherwise in the public interest given that the Committee had given a direction for removal.

37. The Committee considered Article 60 of The Pharmacy Order 2010 and noted that it may impose an interim measure where it has imposed an order for removal if it is satisfied that it is needed to protect the public, or is otherwise in the public interest or in the interests of the Registrant. The Committee noted that there are less than 28 days remaining on the suspension ordered by the previous Committee. This Committee's order for removal will not come into effect for 28 days to allow for the appeal period.
38. The Committee considered that it was necessary for the protection of the public for an interim measure to be in place between the previous suspension ending and the order for removal coming into effect after 28 days. This is because the Committee has found that there is an ongoing risk to the public if the Registrant were to return to unrestricted practice. The Committee also considers it to be in the public interest for an interim measure to be imposed given the nature of the misconduct and the continued limited engagement. The Committee did not find an interim measure to be in the interests of the Registrant.
39. The Committee considered whether interim conditions were appropriate but finds that as a deep-seated attitudinal issue and a flagrant disregard for governance had been identified, which had not been remediated, there would be no workable conditions that could protect the public or uphold the public interest.
40. The Committee therefore imposed an interim suspension to take effect at the end of the order for suspension until the order for removal comes into effect.
41. This concludes the determination.