

General Pharmaceutical Council

Fitness to Practise Committee

Principal Review Hearing

Remote videolink hearing

14 April 2026

Registrant name:	Sunil Kumar Lakhani
Registration number:	2038518
Part of the register:	Pharmacist
Type of Case:	Misconduct
Committee Members:	Janet Fisher (Chair)
	Cristian Ioanas (Registrant member)
	Michaela Jones (Lay member)
Legal Adviser:	Morag Rea
Committee Secretary:	Sameen Ahmed
Registrant:	Present and not represented
General Pharmaceutical Council:	Represented by Yesim Hall, Case Presenter
Order being reviewed:	Suspension 4 months
Fitness to practise:	Impaired
Outcome:	Conditions (6 months)
Interim measures:	Interim suspension Order

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 **14 May 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.

1. *You must:*

- *find a workplace supervisor (who must be a registered pharmacist) and ask the GPhC to approve your workplace supervisor before starting work as a Pharmacist*
- *put yourself, and stay, under their supervision which may be remote supervision*
- *give the GPhC your permission to exchange information with your workplace supervisor about your efforts to improve your pharmacy practice.*

2. *You must work with your workplace supervisor to draw up a personal development plan, specifically designed to deal with the shortcomings in the following areas of your practice:*

- *returning to practice*
- *dealing with difficult conversations and situations*
- *ethics and integrity*
- *risk assessment and management*
- *stress management*

You must send a copy of your personal development plan to the GPhC within 3 weeks of obtaining employment as a Pharmacist.

3. *You must arrange for your workplace supervisor to send a report directly to the GPhC every month on your professional progress and development in relation to:*

- *returning to practice*
- *dealing with difficult conversations and situations*
- *ethics and integrity*
- *risk assessment and management*

- *stress management*

4. *You must not work as a Superintendent Pharmacist.*

5. *You must:*

- *tell the GPhC before you take on any position for which you must be registered with the GPhC*
- *give the GPhC details of the role and the hours you will work each week, including locum or relief work*
- *give the GPhC the contact details of your employer, superintendent pharmacist and/or pharmacy owner.*

6. *You must tell the following people in writing about the restrictions imposed on your pharmacy practice, if you are doing any paid or unpaid work for which you must be registered with the GPhC. You should do this when applying for employment as a Pharmacist:*

- *all employers or contractors*
- *agents acting on behalf of employers and locum agencies*
- *superintendent pharmacists*
- *responsible pharmacists*
- *line managers*
- *workplace supervisors*
- *accountable officers for controlled drugs*

You must send the GPhC a copy of this notification.

7. *You must tell the GPhC if you apply for work as a pharmacist outside Great Britain.*

Particulars of Allegations found proved at the Principal Hearing

You, a registered Pharmacist

1. On 22 February 2022, placed a used swab taken for a Covid-19 test back into its packaging;
2. On unknown dates between 11 February 2022 and 22 February 2022:
 - 2.2 did not keep a record of Covid-19 tests completed at the pharmacy;
 - 2.3 did not keep records of courier services used for Covid-19 tests;
 - 2.4 Issued Fit to Fly certificates to patients certifying Circular 1 Health testing service had found their rapid antigen test negative for Covid-19;
 - 2.5 accepted only cash payments for Covid-19 tests;
 - 2.6 recorded the cash received for Covid-19 tests as no sale.
3. Your conduct at 2.1 to 2.6 above was dishonest in that you:
 - 3.3 knew that Covid-19 tests conducted at the Pharmacy were not/would not be tested by Circular 1 Health
 - 3.4 knew that the Fit to Fly certificates provided to patients were not legitimate.
4. In relation to Covid-19 PCR tests, on 22 February 2022 you:
 - 4.1 used a swab kit from Fit2Fly 24/7 Limited at the Pharmacy.
 - 4.2 informed a GPhC inspector that the Pharmacy used “24/7” services to process tests.
6. On 24 February 2022 you notified a GPhC Inspector by way of email that you:

6.1 did not realise that you needed United Kingdom Accreditation Service (UKAS) accreditation for taking swabs

6.2 had now applied for this accreditation

7. Your conduct at paragraph 6.2 was dishonest in that you knew you had not applied for the relevant accreditation with UKAS.

9. Between February 2021 and February 2022, did not ensure that testing services provided by the Pharmacy were accredited with UKAS and/ or make an application to UKAS.

Documentation

Exhibit 1- Council's hearing bundle including the Registrant's bundle containing his reflections and CPD

Exhibit 2- Council's skeleton argument dated 31 March 2026

Exhibit 3- Registrant's reference

Exhibit 4- Registrant's reference

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 Hearings and outcomes guidance 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 4 March 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. No issue was taken with service by either of the parties.
- 7. The Committee was satisfied that there had been good service of the Notice in accordance with Rules 3 and 16.

Hearing history

- Principal Hearing (2-13 September 2024 and 5-7 November 2024) – Suspension (12 months with review).
- Review hearing 4 December 2025 at which the period of suspension was extended by 4 months.
- The current suspension is due to expire on 4 May 2026

8. The Committee at the last hearing determined that the Registrant's misconduct meant they were impaired on public protection and public interest grounds. In finding the Registrant impaired, that Committee referred to the Registrant's conduct has not been properly remedied and the Committee has not been convinced that there is no risk of repetition.

9. The Committee at the last hearing determined the following with regard to sanction:

“ a warning or conditions are insufficient to deal with any risk to patient safety or to protect the public, or would undermine public confidence. the Committee was keen to ensure that the period of suspension be sufficient to allow the Registrant to complete the process of demonstrating remediation and to give him time to undertake any CPD and source testimonials that he felt may assist the next reviewing committee....suspension of 4 months would be appropriate and proportionate.”

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

- Recent testimonials relevant to integrity and communication from either paid or voluntary work. Any referees need to be aware and make reference to the findings of this Committee and the principal hearing committee.
- Evidence of CPD courses or training courses undertaken, particularly around ethics and integrity, and any reflections on how he would apply any learning to his practice.
- Any evidence of any voluntary work undertaken, including voluntary work within pharmaceutical work.
- Any testimonials from the above.
- A more detailed reflection piece from the Registrant outlining his understanding of his current impairment, and the wider impact of his conduct together with steps he has taken to remedy it.
- Any independent evidence of the steps taken to remedy his impairment.

Determination

Decision on Impairment

11. The Committee considered whether Registrant's fitness to practise remains impaired. The Committee has taken into account all of the documentation before it and submissions on behalf of the Council, and on behalf on the Registrant. The Committee also heard oral evidence from the Registrant.
12. *The Committee recognised and applied the following guidance in Abrahams 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."
13. The Committee accepted the advice of the Legal Adviser. The advice was:
 - The definition of impairment as laid out at paragraph 2.12- 2.15 of the Good Decision Making Hearings and outcomes Guidance 2024.
 - That it was for a registrant to prove that they were no longer impaired.
 - This was a forward-looking approach, not one that looks into the past.
14. The Committee considered that:
 - a. The circumstances leading to the findings above are remediable. Attitudinal issues may be harder to remediate. The more serious the issue, the more difficult it may be to remediate in particular by upholding the wider public interest.
 - b. The Registrant has shown insight into the circumstances that led to the findings above – acknowledged what happened, understands why it happened, and has developing insight into the impact of what happened.

- c. The Registrant has begun to remediate and has taken steps to prevent a repetition, through reflective practice using the Gibbs Reflective Cycle, Talking Therapies and two CPPE courses. The Committee appreciated the opportunity to explore this in oral evidence. However, the Registrant has not undertaken any ethical or integrity training nor has he provided sufficient evidence of ongoing continuing professional development to demonstrate that he is fit to return to professional practice.
 - d. There is a continuing risk of repetition because the steps taken have not yet had the desired effect as the Registrant cannot demonstrate that the training undertaken or any reflection or insight has been put into practice to address the character flaws that he has identified during therapy.
 - e. There is a continuing risk of repetition, as the Registrant has not provided adequate testimonials. Whilst appreciating the difficulty in obtaining testimonials while not being in paid employment and due to the shame experienced by the Registrant caused by the above findings, the Committee considered that there are other sources of that third party information, that could be more current and/or relevant.
 - f. That risk of repetition gives rise to a risk to public protection. The actions in providing assurance to customers that their samples had been tested for Covid - 19 by a laboratory and that they were consequently fit to fly, when no such testing had taken place, created a risk to the public, although there was no evidence of harm caused.
 - g. The wider public interest requires a finding of impairment because there is a risk of future harm and to maintain public confidence and promote professional standards by making clear to other professionals what is expected and deterring other professionals from failing to meet standards.
15. The Committee therefore finds the Registrant's current fitness to practise to be impaired on public protection and public interest grounds.

Decision on Sanction

16. Having found impairment, the Committee has gone on to consider the matter of sanction. The Committee's powers are set out in Article 54(3) of the Order. The Committee should consider the available sanctions 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 sanction that meets the circumstances of the case.
17. The purpose of the sanction is not to be punitive, though a sanction may in fact have a punitive effect. The purpose of the sanction 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.
18. The Committee had regard to the Council's *'Good decision making: Fitness to practise hearings and outcomes guidance 2024'* to inform its decision.
19. The Committee took into account the submissions made on behalf of the Council and by the Registrant.
20. The Committee accepted the advice of the Legal Adviser.
21. To take no action. This would not be an appropriate outcome given the Committee's findings.
22. Warning. This would not be an appropriate outcome given the Committee's findings.
23. Conditions of Practice. The Committee next considered the imposition of conditions of practice. A Conditions of Practice Order would allow the Registrant to practise albeit with restrictions. The Committee must determine whether a conditions of practice order would be appropriate given the concerns identified regarding the Registrant's practice, in particular whether conditions would protect the public from harm, be sufficient to mark the seriousness of the matter so as to maintain public confidence in the Registrant, the profession and the regulator, and sufficient to promote professional standards within the profession.

24. If conditions are to be imposed, the conditions must be relevant and proportionate to the concerns identified regarding the Registrant's practice. Conditions must be workable and susceptible to being monitored. The Committee must also be satisfied that the Registrant will comply with any conditions imposed.
25. The Committee decided that conditions which allowed the Registrant to return to work as a Pharmacist in a supported way after four years out of practice would provide the best protection of the public and would address the public interest. The Committee consider that conditions would be workable given the Registrant's stated intention not to return to Pharmacy ownership or as a Superintendent Pharmacist.
26. The Committee therefore determined that the following conditions should be imposed on the Registrant for a period of 6 months:
 1. You must:
 - find a workplace supervisor (who must be a registered pharmacist) and ask the GPhC to approve your workplace supervisor before starting work as a Pharmacist
 - put yourself, and stay, under their supervision which may be remote supervision
 - give the GPhC your permission to exchange information with your workplace supervisor about your efforts to improve your pharmacy practice.
 2. You must work with your workplace supervisor to draw up a personal development plan, specifically designed to deal with the shortcomings in the following areas of your practice:
 - returning to practice
 - dealing with difficult conversations and situations
 - ethics and integrity
 - risk assessment and management
 - stress management

You must send a copy of your personal development plan to the GPhC within 3 weeks of obtaining employment as a Pharmacist.

3. You must arrange for your workplace supervisor to send a report directly to the GPhC every month on your professional progress and development in relation to:
 - returning to practice
 - dealing with difficult conversations and situations
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 4. You must not work as a Superintendent Pharmacist.
 5. You must:
 - tell the GPhC before you take on any position for which you must be registered with the GPhC
 - give the GPhC details of the role and the hours you will work each week, including locum or relief work
 - give the GPhC the contact details of your employer, superintendent pharmacist and/or pharmacy owner.
 6. You must tell the following people in writing about the restrictions imposed on your pharmacy practice, if you are doing any paid or unpaid work for which you must be registered with the GPhC. You should do this when applying for employment as a Pharmacist:
 - all employers or contractors
 - agents acting on behalf of employers and locum agencies
 - superintendent pharmacists
 - responsible pharmacists
 - line managers
 - workplace supervisors
 - accountable officers for controlled drugs
- You must send the GPhC a copy of this notification.

7. You must tell the GPhC if you apply for work as a pharmacist outside Great Britain.

26. Suspension Order. The Committee next considered whether suspension would be a proportionate sanction. The Committee noted the Council's guidance which indicates that suspension may be appropriate where:

"The Committee considers that a warning or conditions are insufficient to deal with any risk to patient safety or to protect the public, or would undermine public confidence. It may be required when necessary to highlight to the profession and to the public that the conduct of the registrant is unacceptable and unbefitting a member of the pharmacy profession. Also, when public confidence in the profession demands no lesser sanction."

27. The Committee considered that a further period of suspension would be disproportionate with the level of risk identified and that the public interest would be better served by the Registrant being supported back into safe and effective practice. A further period of suspension would not be appropriate or proportionate.
28. The Committee therefore directs that the Registrar impose these conditions for a 6-month period when the suspension expires.

Decision on Interim Measure

29. As there are less than 28 days between today's hearing and the current order lapsing and the Committee has varied the order, the Committee has decided to impose an interim measure of suspension.
30. This concludes the determination.