

General Pharmaceutical Council

Fitness to Practise Committee

Principal Hearing

Remote videolink hearing

18 August 2026 – 19 August 2026

Registrant name:	Tanya Petrie
Registration number:	5004126
Part of the register:	Pharmacy Technician
Type of Case:	Misconduct
Committee Members:	Joanna Bower (Chair) Sukvinder Bhamra (Registrant member) Paul Barton (Lay member)
Legal Advisor	Vishal Misra
Committee Secretary:	Ivana Raimundova
Registrant:	Tanya Petrie, not present and not represented
General Pharmaceutical Council:	Represented by Yesim Hall, Case Presenter
Facts proved:	1 and 2
Fitness to practise:	Impaired
Outcome:	Removal
Interim measures:	Interim Suspension Order

This decision including any finding of facts, impairment and outcome 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 **17 September 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 Allegation

You, a Pharmacy Technician, formally employed by Oxleas NHS Foundation Trust at HMP Bristol, 19 Cambridge Road, Bristol, BS7 8PS:

1. On 17 January 2025 were convicted at Bristol Crown Court of bringing/throwing/conveying a List 'B' prohibited article into/out of a prison, contrary to the Prison Act 1952.
2. On 12 February 2026 were convicted of conspiracy to bring/throw/convey a List 'A' prohibited item into/out of a prison.

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

Documentation

Document No.	Description
1	GPhC main bundle of 56 pages
2	Council's skeleton argument and statement of case
3	Proof of service bundle of 4 pages
4	Proceeding in absence bundle of 13 pages
5	Proof of delivery of 2 pages and email register

Witnesses

1. No live witnesses were called.

Determination

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* as revised March 2024.

5. A Principal Hearing has up to three stages:

Stage 1. Findings of Fact – the Committee determines any disputed facts.

Stage 2. Findings of ground(s) of impairment and impairment – the Committee determines whether, on the facts as proved, a statutory ground for impairment is established and, if so, whether the Registrant’s fitness to practise is currently impaired.

Stage 3. Outcome – the Committee considers what, if any, outcome should be applied if the Registrant’s fitness to practise is found to be impaired.

Service of Notice of Hearing

6. The Committee has seen a Notice of Hearing addressed to Ms Petrie dated 9 July 2026 sent by email. Alongside this, the Committee has seen signed proof of special delivery to the relevant prison where Ms Petrie is serving her sentence. This document was signed for as delivered on 10 July 2026.
7. The Committee was satisfied that there had been good service of the Notice of Hearing (‘Notice’) in accordance with Rules 3 and 16 of the Rules.

Proceeding in Absence

8. Ms Hall submitted that the Council had effected good service by emailing the Notice of Hearing in line with Rule 3. However, Ms Hall further submitted that the Council had also taken the time to locate Ms Petrie using the Find a Prisoner Service. This had led to Ms Petrie responding to the listing questionnaire when this was sent in

May 2026. There was evidence that the full bundle and Notice of Hearing had been received at the relevant prison.

9. Ms Hall further submitted that Ms Petrie had indicated that in the listing questionnaire, Ms Petrie had made clear that she did not wish to engage with these proceedings and therefore had voluntarily absented herself. Ms Hall reminded the Committee that there was a public interest in hearing matters swiftly and that an adjournment would not serve to secure Ms Petrie's attendance.
10. The Committee went on to consider if the matter should proceed in the absence of Ms Petrie pursuant to Rule 25 of the Rules. The Committee reminded itself of the principles governing proceeding in absence which derive from R v Jones [2002] UKHL 5. The Committee bore in mind that the discretion to proceed is constrained. It is important to balance the impact upon the Registrant and also the public interest. The Committee considered the case of General Medical Council v Adeogba [2016] EWCA Civ 162 and the differences between regulatory proceedings and criminal proceedings.
11. The Committee noted the following:
 - a. Ms Petrie had voluntarily absented herself. She had made it very clear that she did not wish to engage with these proceedings.
 - b. The protection of the public and the public interest required the expeditious handling of matters.
 - c. There were no live witnesses and so no prejudice accrued to either the Council or Ms Petrie.
 - d. It was not considered that any adjournment would secure Ms Petrie's attendance or engagement.
12. The Committee therefore considered it would be appropriate to proceed in Ms Petrie's absence.

Registrant's response to Particulars of allegation

13. Ms Petrie had not provided any formal response to the allegations. She had stated in her listing questionnaire that she was content to be removed from the Register and that she did not wish to engage with the proceedings. However, she did not provide formal admissions or a denial of the allegations.

Background

14. At all relevant times, Ms Petrie was a Pharmacy Technician, employed by Oxleas NHS Foundation Trust. She was working in this role at HMP Bristol.
15. On 17 October 2023 Ms Petrie was seen by police retrieving a small flat item from a wheelie bin at 06:30. At 08:01 on the same date she was arrested on suspicion of conveying prohibited articles into prison. She was strip searched in custody and admitted to having a prohibited item secreted in her bra. She stated that she did not know what was in the package that was tightly wrapped in cling film. It transpired that the package contained cocaine, synthetic cannabinoid (spice) and nicotine (tobacco). These make up the 'List A' prohibited articles referred to in Allegation 2.
16. During her interview under caution, Ms Petrie explained that she had been contacted by a prisoner over Facebook and had engaged with the communication. She stated that she had initially been given £800, which she had collected from a bin.
17. She went on to admit that she had taken in SIM cards to the prison in exchange for £2000. This represented the 'List B' articles that are referred to in Allegation 1.

18. On 17 January 2025, Ms Petrie pleaded guilty to conveying 'List B' prohibited articles into prison at Bristol Crown Court. She was tried for conveying 'List A' prohibited articles and this resulted in a hung jury.
19. On 12 February 2026, Ms Petrie was convicted after a retrial of conveying 'List A' prohibited articles into prison at Bristol Crown Court.
20. The sentencing judge noted that Ms Petrie had attempted to convey nearly 2 ounces of >80% pure cocaine, which would have had a value in prison of between £12,500-£21,000. She was also found with 77g of paste containing synthetic cannabinoids (colloquially called 'Spice'). In terms of SIM cards, Ms Petrie was sentenced for smuggling in 7 SIM cards and giving them to a prisoner in a prescription bag.
21. The sentencing judge noted that Ms Petrie's motivations for committing these offences were twofold. Firstly, entering into a flirtatious online relationship with a man that she discovered was a prisoner with whom she nevertheless persisted in flirting with. Secondly, Ms Petrie was in debt and she chose to take the risk of being caught for the financial benefit. It was noted that she received between £900-£1000 in cash for her actions.
22. Ms Petrie was sentenced for both matters on 16 February 2026. For her first conviction, she received a custodial sentence of 3 months. For her second conviction, she received a custodial sentence of 6 years, to run consecutively. She therefore received a total custodial sentence for 6 years and 3 months' imprisonment.

Decision on Facts

23. When considering each particular of allegation, the Committee bore in mind that the burden of proof rests on the Council and that particulars are found proved based on the balance of probabilities. This means that particulars will be proved if the Committee is satisfied that what is alleged is more likely than not to have happened.
24. The Committee noted that there were two signed and dated certificates of conviction. Ms Petrie has not made any representations challenging the authenticity of these. The Committee considered that these were conclusive evidence of the convictions and the findings of fact upon which they were based pursuant to Rule 24(4).
25. The Committee therefore determined that Allegations 1 and 2 were proved in their entirety.
26. The Committee therefore did go on to consider whether the Registrant's fitness to practise is impaired.

Decision on Impairment

27. Having found that the particulars of allegation amounted to criminal convictions, the Committee determined that the convictions were evidence of Ms Petrie's impairment pursuant to Article 51(1) of the Order. The Committee went on to consider whether the Registrant's fitness to practise is currently impaired. In doing so the Committee considered Rule 5(2), namely whether the particulars found proved show that actions / omissions of the Registrant:

- *present an actual or potential risk to patients or to the public;*
- *has brought, or might bring, the profession of pharmacy into disrepute;*
- *has breached one of the fundamental principles of the profession of pharmacy;*
- *means that the integrity of the registrant can no longer be relied upon.*

28. Ms Hall submitted that Ms Petrie was currently impaired. She submitted that it was important for the Committee to assess the gravity of the misconduct, the level of insight shown by Ms Petrie, how remediable the misconduct is, and the risk, if any, of repetition.
29. Ms Hall submitted that the criminal convictions represented an acknowledgment of the gravity of Ms Petrie's actions in a criminal justice context. However, these convictions did not speak to the public protection concerns raised in these proceedings.
30. Ms Hall submitted that Ms Petrie was working within a prison environment and tasked with ensuring the prisoners' wellbeing. By smuggling Class A and Class B drugs into prison, it was submitted that Ms Petrie's actions were directly detrimental to patients in her care.
31. It was further submitted that Ms Petrie's actions in smuggling SIM cards to prison helped to prop up illicit power structures amongst prisoners, which would cause further harm to prisoners, and these prisoners were under her care.

32. Ms Hall submitted that Ms Petrie had not shown any insight as to her behaviour and had taken no remediating steps. Ms Petrie's actions were submitted to demonstrate a willingness to risk the protection of the public for monetary gain.
33. It was further submitted that Ms Petrie had breached at least one of the fundamental principles of the pharmacy profession. Her actions were submitted to have brought the pharmacy profession into disrepute and were such as to render her integrity no longer to be relied upon.
34. The Committee accepted the legal advice provided by the legal assessor.
35. The Committee noted that the sentencing judge highlighted in his sentencing remarks, the case of *R v Jibona* [2010] EWCA Crim 1390, which highlighted that the majority of prisoners enter prisons with a history of substance abuse. Thus, smuggling highly addictive drugs into prison was detrimental to the wellbeing of prisoners who were in her care.
36. The Committee applied the test in Rule 5(2) and considered that the risks of drug use within the prison population also extends a risk to all prison staff. Drug use can lead to unpredictable and/or violent behaviour. Thus, the risk of harm extended to the wider public.
37. The Committee noted that drugs in prison do create illicit power structures, rendering vulnerable prisoners at risk of exploitation through bullying and/or the creation of drug debts.

38. The risk of harm to the wider public was also extended by Ms Petrie's actions in smuggling SIM cards. Allowing serving prisoners access to SIM cards could lead to prisoners intimidating witnesses of crime and/or running organised crime groups from prison. The Committee therefore considered Rule 5(2)(a) was engaged.
39. In all the circumstances, the Committee was satisfied that Ms Petrie's conduct was properly characterised as deplorable and has brought the profession of pharmacy into disrepute. Thus, Rule 5(2)(b) was engaged.
40. The Committee considered that Ms Petrie's actions had breached fundamental principles of the pharmacy profession, namely:
- a. *Standard 2: Pharmacy professionals must work in partnership with others.*
 - i. *Demonstrate effective team working; and*
 - ii. *Take action to safeguard people, particularly children and vulnerable adults.*
 - b. *Standard 5: Pharmacy professionals must use their professional judgement.*
 - i. *Make the care of the person their first concern and act in their best interests; and*
 - ii. *Consider and manage appropriately any personal or organisational goals, incentives or targets and make sure the care they provide reflects the needs of the person.*
 - c. *Standard 6: Pharmacy professionals must behave in a professional manner.*
 - i. *Are trustworthy and act with honesty and integrity; and*
 - ii. *Maintain appropriate personal and professional boundaries with the people they provide care to and with others.*

d. *Standard 9: Pharmacy professionals must demonstrate leadership*

i. *Do not abuse their position or set out to influence others to abuse theirs.*

41. As noted above, the Committee considered that Ms Petrie's actions placed prisoners and prison staff at risk, alongside the wider public. Ms Petrie's actions showed disregard for the wellbeing of the prisoners under her care and undermined the entirety of the prison's system of governance. Ms Petrie's actions undermined the trust placed in her and lacked integrity. Ms Petrie failed to maintain professional boundaries by engaging in flirtatious communication with a prisoner via social media and Ms Petrie abused the position of trust she was in.
42. Therefore, the Committee considered that Rule 5(2)(c) was engaged.
43. The Committee considered that Ms Petrie was in a privileged position of trust. She was not subject to the same rigorous search protocols as other members of the public and she has abused this position of trust. It was considered that smuggling contraband into prison was an obvious breach of professional integrity. It was also noted that Ms Petrie lied about her actions to police until the moment that she was strip searched. Even at that point, Ms Petrie denied knowledge of what the package she was found with contained. This was something that a jury later went on to reject. Therefore, Rule 5(2)(d) was engaged.
44. The Committee then went on to consider the test in Cohen v General Medical Council [2008] EWHC 581 (Admin), namely:
 - a. Whether the conduct was easily remediable,
 - b. Whether the conduct had been remedied; and

c. Whether or not the conduct was liable to be repeated.

45. The Committee considered that Ms Petrie's conduct was not easily remediable as there were deep seated attitudinal concerns underpinning her conduct. The Committee accepted that Ms Petrie had shown no insight into her conduct and had not demonstrated any steps she had taken to remedy her actions. Ms Petrie had informed the Council that she did not wish to engage with these proceedings. The Committee considered that as Ms Petrie's actions were attitudinal in nature, there always remained a risk of repetition. This was compounded by the lack of any insight or any expression of remorse from Ms Petrie in these proceedings.
46. Consequently, the Committee found that Ms Petrie's fitness to practise was currently impaired on both public protection and public interest grounds.
47. The Committee therefore went on to consider outcome.

Decision on Outcome

48. Having found impairment, the Committee has gone on to consider the matter of outcome. The Committee's powers are set out in Article 54(2) of the Order. The Committee should consider the available outcomes in ascending order from least restrictive, take no action, to most restrictive, removal from the Register, in order to identify the appropriate and proportionate outcome that meets the circumstances of the case.
49. 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.

50. The Committee had regard to the Council's 2024 Guidance to inform its decision.
51. The Committee took into account the submissions made by Ms Hall.
52. Ms Hall submitted that the only appropriate outcome was that of removal. In her submission, Ms Petrie's actions amounted to serious criminal conduct, attracting a custodial sentence of 6 years and 3 months' imprisonment which Ms Petrie is serving at the time of writing. It was submitted that Ms Petrie's conduct was fundamentally incompatible with remaining a registered pharmacy professional.
53. Ms Hall invited the Committee to consider the risks inherent in Ms Petrie's conduct and the potentially widespread nature of that risk, which spread to the wider public.
54. Ms Hall submitted that Ms Petrie was a member of prison staff, she was subject to lesser security measures and she exploited this. Ms Petrie was also charged with the care of prisoners' wellbeing. Ms Petrie therefore violated the trust placed in her, abused her professional position and placed the prisoners under her care at significant risk of harm. Alongside this, Ms Petrie failed to maintain professional boundaries by engaging in social media contact with a prisoner.
55. Ms Hall submitted that to take no action or to issue a warning would be inappropriate in this matter and failed to reflect the severity of the conduct.

56. Ms Hall submitted that there were no workable conditions of practice available in this matter that could adequately reflect the risks in this matter and/or mitigate those risks.
57. Ms Hall further submitted that suspension would be inappropriate. She drew the Committee's attention to Newman J's dictum in CHRE v General Dental Council and Fleischmann [2005] EWHC 87 (Admin) that regulated professionals convicted of serious offences should not be permitted to practise until the satisfactory completion of their sentences. This was not to punish the professional, but rather because "*good standing in a profession must be earned if the reputation of the profession is to be maintained.*"
58. It was further submitted that Ms Petrie's assertion that she no longer wished to practise as a pharmacy technician was perhaps an acknowledgment of the seriousness of her conduct and its incompatibility with the pharmacy profession's principles and standards.
59. The Committee accepted the legal advice from the legal assessor.
60. The Committee first considered what, if any, aggravating and mitigating factors there may be.
61. The Committee identified the following aggravating factors, including:
- a. the duration of the conduct, in that Ms Petrie persisted in social media contact with a prisoner and smuggled items into prison repeatedly,
 - b. the abuse of trust inherent in smuggling items into prison which abused her professional position,
 - c. the conduct was deliberate and calculated,
 - d. the conduct was pursued for financial gain,

- e. the level of harm that resulted; and
 - f. the risk of more widespread harm occurring.
62. The Committee identified the following mitigating features including:
- a. Ms Petrie's admission to conveying the SIM cards into prison at her interview under caution.
 - b. Ms Petrie was of previous good character with no prior regulatory concerns.
63. The Committee also considered the following factors to be relevant. The risks taken by the Registrant in this matter were manifold. That risk spread to all prison staff that Ms Petrie worked with, to all the prisoners' under her care, including the most vulnerable of the prison population and to the wider public at large.
64. The Committee also noted that the value of the drugs (of Class A and Class B) that Ms Petrie attempted to smuggle in were valued at between £12,500 and £21,000, which would prop up illicit power structures within the prison population and fundamentally undermine the prison's governance structures.
65. The Committee noted that Ms Petrie had identified that she no longer wished to practise as a pharmacy professional. Having been provided with no evidence of insight, the Committee noted that there was no evidence of any desire, on the part of Ms Petrie, to undertake any remedial steps.
66. To take no action. Given the findings of the Committee, this could not be an appropriate or proportionate outcome.

67. Warning. Given the findings of the Committee, this could not be an appropriate or proportionate outcome.
68. Conditions of Registration. The Committee next considered the imposition of Conditions of Registration. A Conditions of Registration Order would allow the Registrant to practise albeit with restrictions. The Committee must determine whether a Conditions of Registration 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.
69. 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.
70. The Committee did not consider that conditions were either appropriate or workable in this matter. The concerns in this matter did not pertain to Ms Petrie's clinical practice. Ms Petrie, being a serving prisoner, would not be able to work in any event.
71. Suspension Order. The Committee next considered whether suspension would be a proportionate outcome. The Committee noted the Council's guidance which indicates that suspension may be appropriate where:

"The Committee considers that a warning or conditions are not sufficient to deal with any risk to patient safety or to protect the public or would undermine public confidence.

When it is necessary to highlight to the profession and the public that the conduct of the professional is unacceptable and unbefitting a member of the pharmacy profession. Also when public confidence in the profession demands no lesser outcome.”

72. The Committee noted that Ms Petrie has not provided any evidence of insight or remedial steps in this matter. In light of the Committee’s findings of attitudinal concerns and the risk of repetition, the Committee is not satisfied that Ms Petrie would be fit to resume practice either unrestricted or with conditions.
73. The Committee also noted that Ms Petrie was subject to a sentence of 6 years and 3 months’ imprisonment and the Committee did not have the power to make a suspension order that would cover the entirety of her custodial sentence pursuant to the principles of Fleischmann.
74. The Committee therefore found that a suspension would not mark the seriousness of Ms Petrie’s conduct and would not reflect the overarching principles of protecting the public, the public confidence and maintaining proper professional standards.
75. Removal. Given the above conclusions, the Committee was of the view that removal was the only appropriate outcome in this matter.
76. The Committee considered that Ms Petrie’s conduct was of the most serious nature and that her professional behaviour was fundamentally incompatible with being a registered pharmacy professional.

77. The Committee also accepted that any lesser sanction in this matter would seriously undermine the public confidence in the profession and the Regulator. If informed of Ms Petrie's conviction, members of the public would be appalled if any lesser outcome than removal were applied in this matter.

Interim Order

78. In light of the findings above, the existing interim suspension order that Ms Petrie is subject to is revoked.

Decision on Interim Measure

79. As the Committee has imposed a removal order, it is noted that this substantive decision will not take effect until 28 days after the notice of this decision has been sent and/or until any appeal has been finally disposed of.
80. The Committee therefore imposed an interim suspension order pursuant to Article 60 of the Order. This was to protect the public and it being otherwise in the public interest.
81. This concludes the determination.