

## **Statutory Committee: Annual Report 2006**

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## 1. Executive Summary

The Statutory Committee is the Committee of the Royal Pharmaceutical Society of Great Britain ("the Society"), which deals with allegations of misconduct and convictions received by the Society's members. Uniquely amongst healthcare regulators, the governing legislation requires the Chairman of the Statutory Committee to be legally qualified.

Allegations of misconduct are referred to the Chairman of the Statutory Committee by the Infringements Committee. An anonymised Secretary's report is put before the Chairman who then decides whether or not the allegations should proceed to an Inquiry.

The Society does not have a Health Committee and currently has no jurisdiction to deal with pharmacists whose fitness to practise is impaired by reason of ill health.

In 2006, the Statutory Committee sat on 46 days and hearings were in session for a total of approximately 199.75 hours (an average of 16.6 hours per monthly sitting). This figure does not include the length of time during which the Committee are deliberating.

During this period, the Committee considered a total of 38 new Inquiries, 10 Inquiries resumed from 2005, and 3 applications for restoration to the Register.

7 Inquiries concerned corporate bodies with premises registered in the Society's Register of Premises. Of the 44 individuals appearing before the Statutory Committee, 4 were registered in the non practising part of the Register of Pharmaceutical Chemists maintained by the Society. 34 Individuals were male and 10 were female.

Of the Inquiries heard in 2006, 41 related to allegations of misconduct, 4 to convictions, and 3 were Inquiries into both convictions and separate or related allegations of misconduct.

Of the Inquiries into allegations of misconduct, 16 related primarily to dispensing/labelling errors; 5 to the erroneous/dishonest endorsement of prescriptions sent to the PPA resulting in overpayment; 2 to theft of pharmacy stock; 4 to the failure of superintendents to discharge their duties; and 6 were supply related (e.g. supply of out of date medicines; supply of POMs without a valid prescription). Other allegations of misconduct included: the failure to co-operate with a Society Inspector; the failure to act in the best interests of patients; the failure to provide the best possible healthcare; the failure to segregate patient returns and date-expired stock; the use of commercially sensitive information regarding another pharmacy; the repeated supply of laxatives/diuretics to a vulnerable patient; and the use of inappropriate language and behaviour towards members of staff.

Of the Inquiries into convictions, one related to the assembly of medicinal products except in accordance with a licence, contrary to s8 of Medicines Act 1968; one to theft of pharmacy stock; one to possession and supply of controlled drugs; one to obtaining money by deception; and 3 to driving whilst unfit through alcohol (health related).

The Committee did not hear any Inquiries relating to sexual misconduct.

In 2006, the Society issued a total of 8 directions for the removal of a pharmacist's name from the Register; 12 reprimands; and 6 admonishments. The Committee further directed "no further action" in 12 Inquiries, and directed that one Inquiry should be stayed. Following the Inquiry into a person removed from the Register pursuant to the provisions of section 12 of the Pharmacy Act of 1954, the Committee directed that his name should not be restored to the Register.

Of the 3 applications for restoration to the Register, the Committee granted one and refused 2.

In 2006 2 registrant appeals against decisions of the Statutory Committee were lodged with the High Court; the appeals are yet to be heard. No decisions of the Statutory Committee were referred to the High Court by the Council for Healthcare Regulatory Excellence.

Of the Inquiries heard in 2006, 7 incorporated concerns relating to the pharmacists' health.

In making its decision on sanction, the Statutory Committee has regard to its published "Indicative Sanctions Guidance" (available on the Society's website); and the available case law (including Section 29 Referrals to the High Court by the Council for HealthCare Regulatory Excellence). The Statutory Committee has an established programme of training and caselaw updates which includes tailored feedback and learning points provided by the Council for Healthcare Regulatory Excellence.

In 2006 the Chairman of the Statutory Committee issued a practice direction on delay (attached as appendix 1). Previous guidance issued by the Statutory Committee includes guidance on the consideration of applications for restoration to the Register, the Indicative Sanctions guidance; and a practice direction relating to the lodging of bundles.

Following an incident during a Statutory Committee hearing in October 2006 in which a member of staff was assaulted by a respondent, new security measures have been put in place. These include a security guard in attendance at every hearing and all visitors being required to leave their bags outside of the hearing chamber.

Included below are statistics relating to matters heard in 2006.

## 2. Statistical Breakdown

Table 1: Matters heard in 2006

### Determinations given with monthly breakdown

	JAN	FEB	MAR	APR	MAY	JUN	JUL	AUG	SEP	OCT	NOV	DEC	
<b>Removal</b>	1				1	2			1	1		2	<b>8</b>
<b>Reprimand</b>	1	2	3	2		1	1			2			<b>12</b>
<b>Admonition</b>		1	3			1				1			<b>6</b>
<b>No further action</b>	1			1		3	2		2	2		1	<b>12</b>
<b>Not restored to Register (Turner)</b>				1									<b>1</b>
<b>Stayed</b>						1							<b>1</b>
<b>No case to answer</b>													<b>0</b>
<b>Adjourned to resume inquiry</b>											2	1	<b>3</b>

	JAN	FEB	MAR	APR	MAY	JUN	JUL	AUG	SEP	OCT	NOV	DEC	
<b>Adjourned to deliver determination (and not yet delivered)</b>												4	<b>4</b>
<b>Adjourned on terms (with undertakings)</b>											1		<b>1</b>
<b>Restoration Application refused</b>		1		1									<b>2</b>
<b>Restoration Application Granted</b>					1								<b>1</b>
	<b>3</b>	<b>4</b>	<b>6</b>	<b>5</b>	<b>2</b>	<b>8</b>	<b>3</b>	<b>0</b>	<b>3</b>	<b>6</b>	<b>3</b>	<b>8</b>	<b>51</b>

	JAN	FEB	MAR	APR	MAY	JUN	JUL	AUG	SEP	OCT	NOV	DEC	
<b>NEW INQUIRIES OPENED</b>	4	4	1	5	3	5	2	3	1	3	3	4	<b>38</b>
<b>RESUMED FROM 2005</b>	3	2	4							1			<b>10</b>
<b>RESTORATION APPLICATIONS</b>		1		1	1								<b>3</b>
<b>DETERMINATIONS DELIVERED</b>	3	4	6	5	2	8	3	0	3	6		3	<b>43</b>

**Tables 2 to 5:**

**Matters heard in 2005 and 2006: a comparison.**

Table 2:

	no of days sat	Average no of hours per hearings in session	New Inquiries heard	Inquiries resumed from previous year	Restoration applications heard
2005	41	16.09	49	8	2
2006	46	16.6	38	10	3

Table 3: Determinations

	Removal	Reprimand	Admonishment	Adjourned to resume/under terms/to deliver determination	NFA	No case to answer	Stayed	Not restored to Register (under s8(1)(iii) of the Pharmacy Act 1954)	Restoration applications granted	Restoration application refused
2005	16	19	1	10	8	3	0	0	0	2
2006	8	12	6	8	12	0	1	1	1	2

Tables 4 and 5: A comparison of the nature of allegations of misconduct and convictions, where possible.

Table 4: Allegations of misconduct

Nature of allegations	2005	2006
dispensing/ labelling errors	7	16
erroneous endorsements of prescriptions sent to PPA	7	5
Theft of pharmacy stock	4	2
Supply related	9	6
failure of superintendent to discharge duties	1	4

Table 5: Convictions

Conviction	2005	2006
Theft/possession of CDs	3	2
False accounting	3	
Driving whilst unfit through alcohol/drugs	4	3

Table 6:

Monthly breakdown of the number of days on which the Committee sat in 2006 and the number of hours that hearings were in session during 2006:

	<b>no. of days sat</b>	<b>no. of hours hearings in session</b>
<b>January</b>	4	21.5
<b>February</b>	4	21
<b>March</b>	4	12.5
<b>April</b>	4	16.5
<b>May</b>	4	20
<b>June</b>	4	13.5
<b>July</b>	4	15.75
<b>August</b>	3	17
<b>September</b>	4	15.5
<b>October</b>	4	11
<b>November</b>	4	22
<b>December</b>	3	13.5
<b>Total</b>	<b>46</b>	<b>199.75</b>

Tables 7-10: Data on individuals appearing before the Statutory Committee in 2006

The data below relates to the 44 individuals into whom Inquiries were held/ applications for restoration heard in 2006. The data is based on the information currently held on the Concept database of registrants. Although audit and monitoring forms were sent to all respondents with the Notice of Inquiry in 2006, few were returned. The Society currently has no power to compel provision of such information. An example of the audit and monitoring form is attached at Appendix 2.

When directing whether or not allegations of misconduct or convictions should proceed to an Inquiry, the Chairman of the Statutory Committee considers information in an anonymised form.

Table 7:

	White - British	White/Asian	White - other	Indian	Black - African	Asian - other	Did not return census	Declined to answer	Total	Male	Female
Removal				3	1		4		8	8	
Reprimand	4	1		4			2		11	7	4
Admonition	3		1			1	1		6	5	1
No further action	2			2			3		7	4	3
Not restored to Register (under s8(iii) of the Pharmacy Act)							1		1	1	
Stayed	1								1	1	

	White - British	White/Asian	White - other	Indian	Black - African	Asian - other	Did not return census	Declined to answer	Total		Male	Female
Adjourned to resume/ under terms/ to deliver determination	3			1			3		7		5	1
Restoration Application refused							1	1	2		2	
Restoration Application Granted							1		1		1	
	<b>13</b>	<b>1</b>	<b>1</b>	<b>10</b>	<b>1</b>	<b>1</b>	<b>16</b>	<b>1</b>	<b>44</b>		<b>34</b>	<b>10</b>

Table 8:

DETERMINATION	COUNTY	COUNTRY	AGE	GENDER	ETHNICITY	Practising/Non practising
Removed	Surrey	UK	41	M	Black - African	PRACT
Removed	Merseyside	UK	35	M	~ Did not return census form	PRACT
Removed	Dorset	UK	51	M	~ Did not return census form	PRACT
Removed	Middlesex	UK		M	~ Did not return census form	PRACT
Removed	Leicestershire	UK	48	M	Indian	PRACT
Removed	Middlesex	UK	33	M	Indian	PRACT
Removed	Middlesex	UK	39	M	Indian	PRACT
Removed	Lincolnshire	UK	61	M	~ Did not return census form	PRACT
Not restored	North Yorkshire	UK	53	M	~ Did not return census form	N/A
Reprimand	West Midlands	UK	29	F	White and Asian	PRACT
Reprimand		Jordan	36	F	~ Did not return census form	NONPRACT
Reprimand	Cornwall	UK	53	F	~ Did not return census form	PRACT
Reprimand		UK	60	M	White - British	PRACT
Reprimand	South Yorkshire	UK	42	F	Indian	PRACT
Reprimand	Bedfordshire	UK	44	M	Indian	PRACT
Reprimand	Surrey	UK	52	M	White - British	PRACT
Reprimand	Kent	UK	53	M	Indian	PRACT
Reprimand	Lancashire	UK	27	M	Indian	PRACT
Reprimand	South Glamorgan	UK	70	M	White - British	PRACT
Reprimand	Cheshire	UK	47	M	White - British	PRACT
Admonished	North Humberside	UK	35	M	White - British	PRACT
Admonished	West Sussex	UK		M	~ Did not return census form	PRACT
Admonished	West Midlands	UK	39	M	White - British	PRACT
Admonished		Spain	36	F	White - Other	NONPRACT
Admonished	Leicestershire	UK	48	M	White - British	PRACT

DETERMINATION	COUNTY	COUNTRY	AGE	GENDER	ETHNICITY	Practising/Non practising
Admonished	Hampshire	UK	54	M	Asian Other	PRACT
NFA	Nottinghamshire	UK	29	M	Indian	PRACT
NFA	Surrey	UK	53	F	White - British	PRACT
NFA	Warwickshire	UK	50	M	~ Did not return census form	PRACT
NFA	West Midlands	UK	39	F	White - British	PRACT
NFA	Surrey	UK	34	F	Indian	PRACT
NFA	West Glamorgan	UK	46	M	~ Did not return census form	PRACT
NFA	Oxfordshire	UK	55	M	~ Did not return census form	PRACT
Adjourned	Essex	UK	49	M	~ Did not return census form	NONPRACT
Adjourned	Hampshire	UK	44	M	~ Did not return census form	PRACT
Adjourned	Channel Islands	UK	57	M	~ Did not return census form	PRACT
Adjourned	Hampshire	UK	27	F	White - British	NONPRACT
Adjourned		UK	42	F	White - British	PRACT
Adjourned		UK	45	M	White - British	PRACT
Adjourned	Cheshire	UK	48	M	Indian	PRACT
Stayed	Staffordshire	UK	51	M	White - British	PRACT
Restoration refused	Hampshire	UK	66	M	Not recorded	PRACT
Restoration refused	Worcestershire	UK	64	M	Declined to answer ethnicity question	PRACT
Restoration granted	Hertfordshire	UK	49	M	Not recorded	PRACT



### **3. Appendices**

**ROYAL PHARMACEUTICAL SOCIETY OF GREAT BRITAIN  
STATUTORY COMMITTEE**

**PRACTICE DIRECTION 01/06-the holding of inquiries in circumstances in which delay is alleged**

On 28 September 2006, the Chairman of the Statutory Committee (Lord Fraser of Carmyllie QC) issued the following Practice Direction:

“

- 1. Where allegations have been notified to the Society by the Pharmaceutical Fraud Team at the Counter Fraud Service (“the CFS”) or any authority responsible for the licensing of medicines or the regulation of healthcare professionals (“the authority”), and the Society is notified on a date which is more than four years after the latest date on which the allegations first came to the attention of the CFS or authority, the Statutory Committee will not hold an inquiry into the case.**
- 2. Where the Society is made aware of convictions received by a registrant, and the date on which the Society is made so aware, is more than four years from the date on which such convictions were received by that registrant, the Statutory Committee will not *usually* hold an inquiry into the case.**
- 3. Where the Society is made aware of allegations of misconduct, and the date on which the Society is made so aware is more than four years from the date on which the allegations first came to light, the Statutory Committee will not *usually* hold an inquiry into the case.**
- 4. Notwithstanding paragraphs 2 and 3 above, there may be exceptional circumstances in which the public interest, or the interests of the profession, require that an inquiry should be held. In cases of this kind, the Chairman will consider any written representations from the parties as to whether or not to order that an inquiry should be held, before making his decision.**
- 5. Where it is claimed that the Society, in respect of its handling of a case *after* being made aware of an allegation of misconduct, has itself caused delay, the Statutory Committee will decide whether to hold or to continue with an inquiry on a case by case basis, in accordance with the prevailing case law and after considering any representations from the parties.**

**Notes:**

1. This direction will apply with immediate effect.

**David Gomez**  
**Secretary to the Statutory Committee**

## AUDIT AND MONITORING FORM

The Royal Pharmaceutical Society of Great Britain is keen to ensure that its fitness to practise procedures are open and transparent. As part of this policy, we seek to monitor and audit all aspects of the proceedings. You are not obliged to complete this form, but doing so will greatly assist us in this exercise. This information is used for statistical purposes only and is anonymised.

### PERSONAL DETAILS

I am Male  Female

Date of Birth \_\_\_\_\_

Age \_\_\_\_\_

Do you consider yourself to have a disability?

Yes  No

### ETHNIC MONITORING

Please make sure you read all the categories and then place a cross in the box that applies to you.

#### White

British

Irish

Any other white background please state

\_\_\_\_\_

#### Mixed

White and Black Caribbean

White and Black African

White and Asian

Any other mixed background please state

\_\_\_\_\_

#### Asian or Asian British

Indian

Pakistani

Bangladeshi

Any other Asian background please state

\_\_\_\_\_

#### Black or Black British

Caribbean

African

Any other Black background please state

\_\_\_\_\_

### Chinese or other ethnic group

Chinese

Any other ethnic group please state

\_\_\_\_\_

### PRACTICE DETAILS

Are you: practising  non-practising

If practising, please state the Country in which you are practising:

Country \_\_\_\_\_

(Please specify England, Wales or Scotland)

If practising, in what field of pharmacy are you practising (i.e. hospital, community, industry etc.)

\_\_\_\_\_

Are you:

Employee  Employer  Owner

Self employed  Locum

Superintendent Pharmacist

In a single pharmacy/ multiple pharmacies (please delete as appropriate)