

SANCTIONS GUIDANCE







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Introduction

The role of the Pharmaceutical Society of Ireland (PSI), the pharmacy regulator, is to protect the health, safety and wellbeing of patients and the public by regulating pharmacists and pharmacies in Ireland.

As part of its role under the Pharmacy Act 2007 (as amended), the PSI receives and acts on complaints and information about the competence and conduct of pharmacists and retail pharmacy businesses (Registrant)¹. It conducts inquiries, makes decisions and imposes sanctions, as appropriate.

This guidance identifies and explains the different sanctions which can be imposed following a fitness to practise inquiry. It outlines the purpose of sanction and the factors to be considered when imposing sanction on a Registrant.

This guidance has been approved by the Council of the Pharmaceutical Society of Ireland ("Council").

This guidance is for use by those involved in recommending and imposing sanction on a Registrant. It is part of a suite of related PSI Guidance, which includes <u>Disciplinary Procedures Publication and</u> <u>Disclosure Policy</u> and <u>Conditions that may be imposed following Disciplinary Inquiry</u>.

This guidance is a living document which will be updated and revised as the need arises.

The PSI is committed to ensuring that all decision-making is consistent and impartial and complies with the aims of the public sector equality duty.

This guidance comes into effect on 4 March 2021 and will be reviewed again within three years.

Undated March 2021

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¹ Under the Pharmacy Act 2007 (as amended), complaints are received about pharmacists and retail pharmacy businesses. Sanctions are imposed on either pharmacists and/or pharmacy owners (in the case of a complaint against a retail pharmacy business).

Background

- 1. This guidance explains why sanction is imposed on a Registrant. It identifies the factors which should be considered when imposing sanction and the approach which should be taken in deciding which sanction to impose².
- 2. When a complaint is made about a Registrant it is firstly reviewed by a screening committee called the Preliminary Proceedings Committee (PPC) who must decide whether further action or no further action is required. If further action is required the case may be referred to mediation or a committee of inquiry for hearing, namely the Professional Conduct Committee or Health Committee (Committee of Inquiry). A Committee of Inquiry conducts a hearing and hears evidence about the complaint. The Committee of Inquiry decides whether the allegations made against the Registrant are proven and whether findings are made³. If the Committee of Inquiry makes findings against a Registrant, a sanction must be imposed on that Registrant⁴.
- 3. After a hearing has concluded, a Committee of Inquiry is required to complete a report which sets out its findings. The Committee of Inquiry may, in its report, also recommend the sanction it believes should be imposed on the Registrant. However, only the Council has the power under the law to decide upon and impose the sanction. The Council cannot revisit or change in any way the findings made by the Committee of Inquiry.
- 4. The imposition of sanction on a Registrant is an important matter which can have farreaching consequences for a Registrant. This guidance provides a framework to assist a Committee of Inquiry in recommending the sanction it believes should be imposed on a Registrant. It also provides a framework to assist the Council in imposing sanction to ensure it takes a consistent approach in deciding what sanction to impose.
- 5. This guidance is also designed to make sure that all the parties are aware from the outset of the approach the Council will take to imposing sanction, together with the factors it will take into consideration. This guidance is not exhaustive nor is it intended to restrict the Council from exercising its own judgement. The Council will come to its own decision on sanction, while having regard to this guidance.

² Any list of factors in this guidance should be considered as a non-exhaustive list. The Council should use its discretion when imposing sanctions and can consider other factors it considers necessary and proportionate.

³ The standard of proof applied in this context is the criminal standard.

⁴ Section48 of the Pharmacy Act 2007 (as amended).

Range of sanctions

6. The Council may impose one or more of the sanctions set out below: 5

a. Admonishment or censure

These are the lowest sanctions which can be applied. Neither admonishment nor censure restrict the right of a Registrant to practise⁶.

b. Attachment of conditions to registration

Conditions place restrictions on a Registrant's practice or ability to operate for a specified period of time. If conditions are attached, the Registrant may continue to work or operate, however, the Registrant must do so in a way which is consistent with the conditions which are imposed.

c. Suspension of registration

A suspension prevents a Registrant from practising or operating for a specified period of time.

d. Cancellation of registration

The Registrant's entry in the register is removed and they will no longer be able to practise or operate.

e. Prohibition of restoration to the register for a specified period

A Registrant who has been cancelled from the register may be prohibited from applying to restore their name to the register for a specified period of time.

A Registrant who has had any of the sanctions listed at (a) - (e) above imposed on him/her by the Council may apply to the High Court within 30 days of receipt by the Registrant of the notification of the sanction, to have the sanction(s) cancelled.

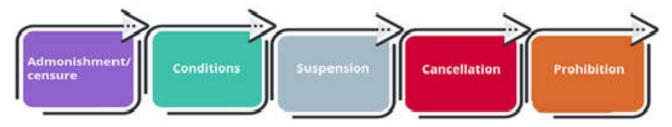
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⁵ Section 48 of the Pharmacy Act 2007 (as amended).

⁶ Admonishment is the lowest sanction and is generally published for a shorter period of time than censure, where public notice is given.

7. Further information on the available sanctions is contained on pages 14-19 of this guidance.



Why are sanctions imposed?

- 8. Sanctions are imposed in order to:
 - a. protect the public from a risk of harm and to promote the health and safety of the public,
 - **b.** promote and maintain public confidence in the pharmacy profession and the delivery of pharmacy services and its regulation,
 - **c.** promote and maintain proper professional standards and conduct for the members of the profession and those who operate pharmacies.
- 9. Patients need to be able to trust a Registrant. Therefore, Registrants must make sure that their conduct justifies patients' trust in them and the public's trust in the profession.
- **10.** The primary purpose of sanction is to protect the public and to maintain confidence in the profession, although sanction may also have a punitive element⁷. The fact that a sanction may have a punitive effect will not make such a sanction inappropriate where its purpose is to protect the public interest.

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⁷ The Law Society of Ireland v Tobin, [2017] IECA 215; "the sanctions available to the trial judge ... serve the dual purpose. There is a punitive element as well as the necessary protection of the public and its confidence in the solicitors' profession, and the upholding of the integrity and good name of the profession."

Proportionality and leniency

Proportionality and leniency

- 11. If a Committee of Inquiry makes findings against a Registrant following a hearing, the Council must impose a sanction on that Registrant⁸. This is necessary to fulfil the overarching aim of protecting the public and is required under the Pharmacy Act 2007 Act (as amended).
- **12.** The Council must have regard to the principle of proportionality in deciding which sanction to impose. It must weigh the interests of the public against those of the Registrant. The Council must choose a sanction, or sanctions, which do not go further than is necessary to meet this objective.
- **13.** The Council must also afford the Registrant, against whom findings have been made, with as much leniency as possible in the circumstances, whilst also ensuring that the public interest is protected.

⁸ Section 48(1)(b) of the Pharmacy Act 2007 (as amended).

Mitigating and aggravating factors

- 14. The Council will consider any mitigating and aggravating factors that may have an impact on sanction. The Council will decide whether a factor is a mitigating or aggravating factor, having regard to any submissions made on behalf of the Registrar or the Registrant. The weight which the Council gives to a mitigating or aggravating factor is a matter for the Council, having regard to the nature of the findings and its role in protecting the public. The factors set out below are not exhaustive, nor will they be relevant in every case.
- 15. Some factors may be considered as mitigating or aggravating depending on the circumstances of the findings, for example the chronic/relapsing nature of an addiction. On one view, this could be seen as a mitigating factor, as the individual may have acted on the basis of impulses outside their control. Alternatively, it could be seen as an aggravating factor, as it may increase the likelihood of relapse.

Mitigating factors

- **16.** The Council needs to consider and balance any mitigating factors presented by the Registrant against the aim of imposing the appropriate sanction.
- 17. Mitigating factors carry less weight in fitness to practise proceedings than in criminal proceedings because the primary purpose of sanction is to protect the public and the standing of the profession, rather than to be punitive.

Examples of mitigating factors include:

18. Insight and remediation

Insight may be demonstrated by evidence that the Registrant accepts and understands the problem giving rise to the complaint and has insight into their failings. It may also be demonstrated by the Registrant's attempts to address or remediate those failings. Insight may be demonstrated by the Registrant admitting matters relating to the case (to include early, open and full admissions), apologising to the patient, making efforts to prevent behaviour or issues recurring or correcting deficiencies in performance. Expressing insight involves demonstrating reflection and remediation.

Factors which may show that a Registrant has insight include:

a. accepting they should have behaved differently,

- b. taking timely steps to remediate and/or apologising at an early stage before the hearing. However, the Council will be mindful that a Registrant may, for other reasons, not have been in a position to offer an apology,
- c. demonstrating the timely development of insight during the investigation and hearing.

The Council will assess whether the Registrant has demonstrated genuine insight. However, the primary concern of the Council will be public protection. The Council may take into account that cultural differences or personal circumstances (e.g. ill health) may affect how a Registrant shows or expresses insight.

19. Adherence to principles of good practice

This could be demonstrated by evidence that the Registrant is adhering to principles of good practice, such as by keeping up to date and only working within their area of competence.

20. Previous history

This could include evidence that the Registrant has not previously been the subject of an inquiry which resulted in findings or an undertaking.

21. Circumstances leading up to any complaints

The Council may consider whether the complaint relates to a single, isolated incident in an otherwise unblemished career, the Registrant's level of experience or whether they are new to the Irish pharmacy system. However, in cases involving serious misconduct or serious poor professional performance, the Registrant's level of experience will have limited influence on the Council's decision. Consistent poor practice or misconduct is not acceptable simply because of inexperience.

22. Personal and professional matters

This factor might include matters such as stress, including work-related stress for example, or lack of adequate supervision. Lapse of time may be a relevant factor to be taken into account. However, public protection will take precedence over likely hardship to the individual being sanctioned.

23. References or testimonials

The Council may take account of references or testimonials. In considering the weight to be given to them, the factors Council will have regard to include:

- a. whether the testimonial is relevant to the specific findings against the Registrant,
- b. how long the author has known the Registrant and the relationship between them (i.e. senior colleague) and whether a professional referee is qualified to comment,
- c. whether there is any evidence that the author has a conflict of interest in providing the reference/testimonial.

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- 24. The Council will decide what weight, if any, to give to factors the Registrant claims to be mitigatory ones9. Where the Council does not consider the factors relied upon are relevant or truly mitigatory, it will give reasons for its view.
- 25. The factors set out in this section are not exhaustive and they will not be relevant in every case.

Aggravating factors

26. The Council will consider and balance any aggravating factors presented to it against the aim of imposing an appropriate sanction.

Examples of aggravating factors include:

27. Lack of Insight

It is important for the Council to consider insight, or lack of, when determining sanction. Factors which show that a Registrant may lack insight include:

- a. refusing to accept their mistakes,
- b. promising to remediate, but failing to take appropriate steps to do so,
- c. failing to demonstrate the timely development of insight.

The Council should be aware, however, that cultural differences and the Registrant's circumstances (for example, ill health) may affect how and when a Registrant expresses insight.

28. Previous findings

Where the PSI, or another regulator, in this jurisdiction or another, has previously made findings in respect of a Registrant, the Council may consider this to be an aggravating factor. Council should note that information in relation to previous findings may not have been available to the Committee of Inquiry.

29. Previous convictions

Registrants are expected to act with integrity and uphold the law. Where a Registrant has been convicted of an offence, in Ireland or another jurisdiction, the Council may consider this to be an aggravating factor. The Council should have regard to the nature and seriousness of the previous offence and other relevant matters, as appropriate.

⁹ In the case of *Dowling v An Bord Altranais agus Cnaimhseachais na hEireann [2017] IEHC 62*; Ni Raifeartaigh J spoke about the generalised manner in which the mitigating factors were dealt with by the Board, and said that "the generalised manner in which the mitigating factors were dealt with in its letter may have been indicative of inadequate weight having been placed on these factors."

30. Failure to comply with previous sanctions or undertakings

Where a Registrant has failed to comply with a previous sanction or failed to adhere to undertaking(s) given to the Registrar, Committees of Inquiry, the Council or a Court, the Council may consider this to be an aggravating factor.

31. Abuse of position of trust

Such an abuse may arise where, for example, a Registrant takes advantage of a vulnerable person(s).

32. Position within pharmacy

Where the misconduct, poor performance or other breaches have been committed by a person in charge of the pharmacy premises (e.g. owner, superintendent, supervising pharmacist), they will be viewed more seriously than if a Registrant was not in such a position.

33. Aggravating factors indicating more serious action is required

Some aggravating factors are likely to lead the Council to consider imposing a more serious sanction. These include as follows:

- a. dishonesty,
- b. drug or alcohol misuse,
- c. sexual misconduct.

(a) Dishonesty

- 34. Dishonesty on the part of a Registrant is particularly serious as it undermines trust in the profession, even where no patient harm has occurred. Registrants have a duty of candour to their regulator and to the wider public. There are some acts which, while not presenting a direct risk to the public, are so serious that they undermine, or have the potential to undermine, confidence in the profession as a whole. Dishonesty is of particular concern where it is premeditated, persistent and/or attempts are made to cover up errors or misconduct.. Cases involving dishonesty can be complicated. Therefore, the Council will consider the context in which the dishonesty took place and it will assess its impact on the public's trust in the profession and any public safety implications.
- **35.** Examples of dishonesty in the professional context include:
 - a. defrauding an employer, the Health Service Executive or patients,
 - b. providing false or misleading information on a CV or providing false references,
 - c. falsifying patient records,
 - **d.** dishonesty in research or scientific matters, which is serious because of potential far reaching consequences.
- **36.** Dishonesty may lead to the Council being less confident that conditions will be adhered to by the Registrant, which may indicate that a more restrictive sanction is required.

37. The Council will have regard to the importance of conveying to the public and the profession the fundamental importance of honesty and trust in the practice of pharmacy.

(b) Drug or alcohol misuse

- **38.** A Registrant should act with honesty and integrity and uphold the law, including in respect of the use of drugs and alcohol. Any significant or persistent failure in this regard which is the subject of findings of a Committee of Inquiry is viewed as a very serious matter.
- **39.** Where a Registrant is suffering from drug or alcohol addiction, they must take appropriate steps to make sure this does not affect patient safety. The aggravating factors that are likely to lead to more serious action (this list is not exhaustive) are:
 - a. being under the influence of alcohol and/or drugs in the workplace or while on duty,
 - misuse of alcohol and/or drugs that has impacted and/or is impacting on the Registrant's clinical performance and caused serious harm to patients or put public safety at serious risk,
 - c. misuse of alcohol and/or drugs that has led to a criminal conviction, particularly where a custodial sentence was imposed.

(c) Sexual misconduct

- **40.** Due to the patient facing role of Registrants they are placed in a position of trust, in particular in relation to children and vulnerable adults. It is imperative for reasons of patient safety and upholding the reputation of the profession, that any abuse of this position of trust is treated with the utmost seriousness.
- **41.** Sexual misconduct may encompass conduct ranging from assault (including unnecessary or non-consensual physical examination of patients) to forming inappropriate relationships with children or vulnerable adults or downloading child pornography.
- **42.** Evidence of sexual misconduct is likely to result in the sanction of cancellation of registration unless there are significant mitigating circumstances which make cancellation inappropriate.
- **43.** Sexual misconduct will be viewed very seriously where the conduct results from or involves the following circumstances:
 - a. A conviction for a sexual offence.
 - **b.** Abuse of a position of trust.
 - c. Sexual offences involving children or vulnerable adults (including child pornography).
- **44.** In cases of sexual misconduct, if the Council decides to impose a sanction other than cancellation, clear reasons should be given.

Other matters relevant to mitigating and aggravating factors

Relevance of patient outcome / risk of harm

45. The fact that a patient ultimately came to no harm will be less relevant than the risk posed by the behaviour of the Registrant. Patient outcome may be taken into account, where appropriate, in determining sanction.

Relevance of criminal convictions

- **46.** The purpose of disciplinary proceedings is to consider whether there is a need to restrict registration in order to protect the public and to maintain high standards and public confidence in the profession.
- **47.** The fact that a Registrant (who has been subject to criminal proceedings in respect of the conduct, the subject of the inquiry) may already have paid a heavy price for their conduct, has little relevance in disciplinary proceedings. An acquittal on criminal charges will not prevent a subsequent inquiry into the events giving rise to the charges.
- 48. The purpose of the disciplinary inquiry is not to punish a Registrant. However, the fact that a sanction has a punitive effect does not make the sanction inappropriate. The Council is entitled to give greater weight to the public interest than to the consequences for the Registrant of the imposition of the sanction. A sanction or sentence previously imposed in another forum is not necessarily a definitive guide to the seriousness of the offence. The considerations that weigh in the Courts when deciding on sentencing/penalties are not necessarily applicable where the Council is deciding on sanction following a disciplinary inquiry.
- **49.** Convictions for offences involving the following factors will generally be viewed as serious:
 - a. Dishonesty, fraud or misrepresentation.
 - **b**. Misuse of drugs or alcohol.
 - c. Violence.
 - d. Non-consensual sexual acts.
 - e. Sexual acts in relation to children including child pornography.
 - f. Trafficking in or illegally manufacturing any controlled drug.

- **g.** Manufacture, distribution, sale or supply, placing on the market, or offering for sale or supply of a falsified medicinal product.
- h. Serious threats to public health, safety or welfare.
- i. A blatant disregard for the law or the system of registration.

The imposition of sanction by the Council

- 50. The Council will consider the sanction which is to be imposed at a meeting of the Council which is held in private. The Registrant will be afforded the opportunity to make either written or oral submissions to the Council in relation to the sanction to be imposed. The Council will consider the submissions made by or on behalf of the Registrant.
- 51. The Council must impose a sanction once the complaint is found to be substantiated and findings have been made against a Registrant. The sanction(s) which the Council imposes must be based on the evidence and proven allegations and must take account of the mitigating and aggravating factors, as appropriate.
- 52. A range of sanctions are available to the Council under Section 48 of the Pharmacy Act 2007 (as amended) and the Council may impose one or more of these (please see paragraph 6 for the range of sanctions).
- 53. A Registrant may apply to the High Court within 30 days of the receipt by the Registrant of the notification of the sanction for an order for cancellation of a disciplinary sanction. The High Court may make any order it considers just, including an order confirming or modifying the Council decision, or it may give the Council any direction.
- 54. All sanctions imposed, aside from admonishment and censure, are required to be confirmed by the High Court.

Stepped approach to determining sanction

- 55. The Council will examine the findings made by the Committee of Inquiry and it will consider what sanction is appropriate to those findings.
- 56. In selecting the appropriate sanction the Council will start with the least restrictive sanction (admonishment).

If the Council decides that this sanction would not be sufficient to protect the public, the Council will then move on to the next lowest available sanction (censure), and will repeat this process until it decides that a particular sanction is appropriate

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Below is a list of sanctions which may be considered.

Admonishment/Censure

- 57. This may be the appropriate sanction where the Registrant's practice does not need to be restricted but there is a need to demonstrate to the Registrant and the profession and the public that the conduct or behaviour of the Registrant has fallen below acceptable standards. The sanctions of admonishment and censure are appropriate for conduct at the lower end of the spectrum of concern. Admonishment is appropriate for findings that give rise to the lowest level of concern. The Council will consider whether the sanction provides adequate protection to the public as neither admonishment nor censure restrict practice or the operation of a retail pharmacy business.
- 58. Admonishment or censure may be the appropriate sanction where the lapse concerned is isolated, there is a low risk of recurrence or the Registrant has shown insight and has taken remedial action.
- 59. Admonishment or censure are unlikely to be appropriate where the Registrant lacks insight. In this case conditions, suspension or cancellation should be considered.

Attachment of conditions to registration

- 60. Where conditions are imposed the Registrant may continue to work or operate but must do so in a way that is consistent with the conditions. Conditions appear on the public register maintained by the PSI.
- 61. Conditions may be attached to a Registrant's registration where the failure or deficiency can be remedied, or where there is some risk to the public from the Registrant's practice, but that risk can be appropriately dealt with by the attachment of conditions.
- **62.** Conditions are likely to be appropriate where the concerns about the Registrant's practice are such that a period of retraining and/or supervision is the most appropriate way of addressing them. They may also be used where there are concerns in relation to health, performance or where there is evidence of shortcomings in a particular area of practice.
- 63. Even with a monitoring regime, to a large extent the Registrant will have to be trusted to comply with the conditions and so the Council will need to be confident that the Registrant will adhere to those conditions.
- **64.** Conditions are unlikely to be suitable where the findings relate to issues such as serious overall failings, persistent failings, lack of insight, denial or matters involving dishonesty or abuse of patients.

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- 65. Conditions need to be clear, realistic, workable and time defined. For example, if a Registrant cannot provide unsupervised care or care outside a particular setting or dispense certain medications by reason of the conditions imposed, it may result in the Registrant being unable to practice. In these circumstances it may be necessary for the Council to suspend or cancel registration, rather than preventing the pharmacist from practising by imposing very arduous conditions.
- **66.** Conditions may be appropriate where there are:
 - a. issues involving the Registrant's health,
 - b. issues around the Registrant's performance,
 - c. identifiable areas of practice in need of assessment and/or retraining,
 - **d.** conditions that are directly relevant to the allegations which were proven at inquiry and are appropriate to remediate the Registrant's deficiencies or impairment.
- **67.** Conditions are likely to be workable where:
 - a. the Registrant has insight,
 - **b.** the conditions have a reasonable prospect of being adhered to by the Registrant and there have been no previous failures to adhere to conditions,
 - c. they are clear and understandable to all parties involved and are capable of being verified and monitored.
- **68.** Where there are findings relating to adverse physical or mental health, the conditions should include a requirement for the Registrant to be subject to medical supervision as well as supervision at their place of work. Generally, it is not appropriate to impose medical supervision as a condition if the Registrant's fitness to practise has not been found to be impaired by reason of adverse physical or mental health.
- **69.** Where there is a cost attached to conditions, such as the cost of testing, it should be made clear to the Registrant that they will be responsible for meeting this cost.

Suspension of registration

- 70. Suspension prevents a Registrant from practising or operating for a period specified by the Council. It has a deterrent effect and can be used to send out a signal to the Registrant, the profession and public about what is regarded as inappropriate behaviour. Suspension will be an appropriate response to misconduct or poor performance that is so serious that action must be taken in order to protect members of the public and to maintain public confidence in the profession. It will be appropriate where a lesser sanction would not adequately protect the public interest and would fail to act as a sufficient deterrent for the Registrant or wider profession.
- **71.** A period of suspension will be appropriate for conduct that is serious but falls short of being fundamentally incompatible with continued registration.

- **72.** Suspension may be appropriate in relation to conduct which, while not presenting a risk to patients, undermines confidence in the profession.
- **73.** Suspension may have long term consequences for a Registrant, including dismissal from employment or an inability to secure employment in the future, and this should be taken into account in determining the proportionality of the sanction.
- **74.** Suspension must be for a specified period of time and reasons should be given for the specified period. Suspension may be accompanied by an admonishment or censure, or conditions to come into effect at the conclusion of the period of suspension.
- **75.** The following are examples of the circumstances where suspension may be appropriate:
 - **a.** A serious falling short of the conduct or standards expected of a Registrant, which is fundamentally incompatible with continued registration.
 - **b.** The breach is serious enough that any sanction lower than a suspension would not be sufficient to protect the public or maintain confidence in the profession.
 - c. No conditions can be adequately framed to protect the public. In health cases, where the Registrant's ability to practise is impaired and there is a risk to patient safety if the Registrant were allowed to continue to practise even under conditions, or where the Registrant has failed to comply with restrictions or requirements.
 - **d.** A single serious incident in respect of which a lesser sanction would not be sufficient.
 - **e.** Where the Registrant has shown insight and is not considered to be likely to repeat the behaviour but that the breach was serious.
 - **f.** Where it is necessary to send a message to the profession and the public that the conduct complained of is unacceptable.

Cancellation of registration

- 76. Where this sanction is imposed, the Registrant's name will be removed from the register and they will no longer be able to work as a pharmacist or operate a pharmacy. Cancellation of registration is a sanction of last resort for serious, deliberate or reckless acts, such as those involving abuse of trust (for example, sexual abuse), dishonesty or persistent failures. It should be used where there is no other way to protect the public, for example, due to a lack of insight, or an inability or unwillingness to resolve matters.
- 77. Cancellation may be appropriate even where the Registrant does not present a risk to the public but the nature and gravity of the allegations are such that any lesser sanction would lack the deterrent effect or undermine confidence in the profession or in the regulatory process.

- **78.** Cancellation will be appropriate if a Registrant's behaviour is fundamentally incompatible with being a registered professional.
- **79.** Cancellation may be appropriate where:
 - a. It is the only sanction that will sufficiently protect the public interest, including reducing the risk of harm and maintaining public confidence in the profession and in its regulation.
 - b. The Registrant has harmed others (including physical, emotional or financial harm) or behaved in a way that could foreseeably cause harm, either deliberately or recklessly, through repeated incompetence, due to a medical condition or drug or alcohol abuse, particularly where there is a continuing risk to patients.
 - **c.** The findings involve any serious abuse of position or trust, or violation of rights of patients.
 - **d.** The findings involve any serious misconduct of a sexual nature, in particular sexual abuse or involvement in child pornography.
 - **e.** The findings involve any violent conduct whether towards members of the public or patients where the conduct is such that the public interest can only be satisfied by removal of registration.
 - f. The findings involve fraud, theft or dishonesty, especially if persistent or covered up.
 - **g.** The Registrant displays a persistent lack of insight or failure to respond to interventions.
 - h. The findings involve convictions or cautions involving any of the conduct or behaviour set out above, including but not limited to any drug related offences or misconduct in relation to controlled drugs.
 - i. The findings are serious findings of professional misconduct and any lack of competence or ill health that cannot be addressed by attaching conditions.
 - **j.** The findings involve reckless practice including dangerous dispensing or wilfully unskilled practice.
 - **k.** The findings involve wilful failure to keep essential records.
 - I. The findings involve persistent misuse of alcohol or drugs.
- **80.** Clear reasons for cancellation should be given by the Council.
- **81.** Cancellation does not prohibit a Registrant from seeking to be restored to the register in the future, subject to any prohibition outlined below.

Prohibition for specified period on applying for restoration to the register

82. Where there is any concern about when restoration to the register should be permitted to take place, if at all, prohibition on applying for restoration should be considered in conjunction with cancellation of registration.

- **83.** The Council may impose a prohibition for a specified period on applying for restoration. This period will be determined based on the nature and circumstances of the allegations proven.
- **84.** Prohibition from ever being restored to the register will be considered in the most serious of cases.

Conclusion

- **85.** The above factors and circumstances are not exhaustive and the Council will take into account the particular circumstances of each case.
- **86.** All of the above sanctions may be published on the PSI Register and Website. Please see the PSI's guidance on *Disciplinary Procedures Publication and Disclosure Policy* for more information.

Reasons

87. The Council must give clear reasons for its decision regarding sanction in each case so the Registrant, the profession of pharmacy and the public can understand and have confidence in the Council's decision.