

GENERAL PHARMACEUTICAL COUNCIL

FITNESS TO PRACTISE COMMITTEE
(Sitting as the DISCIPLINARY COMMITTEE
UNDER THE PHARMACISTS AND PHARMACY
TECHNICIANS ORDER 2007)

FITNESS TO PRACTISE COMMITTEE

129 Lambeth Road, London SE1 7BT

Thursday, 5 January 2012

Chairman: Mr Christopher Gibson QC

Committee Members: Dr Kerr Wilson
Mr Peter Jones

Committee Secretary: Ms Georgia Conrad-Leigh

CASE OF:

UNADKAT, Amit Vinod
(Registration Number: 2054198)

MR JEREMY LORAN, appeared on behalf of the General Pharmaceutical Council.

MR AMIT UNDAKAT was present but was not represented.

Transcript of the shorthand notes of T A Reed & Co Ltd
Tel No: 01992 465900

DETERMINATION OF THE COMMITTEE

THE CHAIRMAN: Mr Unadkat is now 35 years old and he has been a pharmacist since 2002. At a hearing that lasted for three days, from 24 to 26 November 2010, a Disciplinary Committee considered an allegation against him to the effect that on two occasions in August 2008 he had inappropriately offered to perform breast examinations on female patients who were on weight loss programmes, falsely claiming that he was qualified to carry out breast examinations, and that he was doing research for Guy's and St Thomas' Hospital. That was the substance of the allegation, and it was also alleged by amended particulars of allegation that his actions were sexually motivated, as well as contrary to several provisions of the Code of Ethics, including principle 3.9 of the 32nd edition, to the effect that he failed to maintain proper boundaries in his relationship with patients.

At the end of the factual stage of the hearing the Committee found that, despite his denials, Mr Unadkat had made the offers to the two patients to carry out breast examinations, and that he had thereby impliedly represented that he was qualified to do so. It was also found by the Committee that he had mentioned Guy's and St Thomas' Hospital, but it was not found that he had stated that he was carrying out research for, or under the direction of, that hospital. Most importantly, it was not held that there was any sexual motivation for

these inappropriate actions by Mr Unadkat.

Mr Unadkat had initially studied to be a doctor but, at some stage, and I think it was in the first year, had failed some examinations and had then switched to becoming a pharmacist. It is also the case that he was most concerned by the fact that both his wife and his mother had been treated for, or investigated for, cancer at Guy's and St Thomas', and he had himself work worked there for a short period in the course of the third year of his study to be a pharmacist. The effect of the decision on facts was that Mr Unadkat had not acted out of a desire for sexual gratification, but he had acted inappropriately out of an exaggerated concern for these patients because of his overdeveloped interest in breast cancer issues as a result of his family experiences, and his residual wish that he had been able to qualify as a doctor.

It was specifically held that there was a breach of principle 3.9 of the Code of Ethics, to the effect that he had failed to maintain proper boundaries in his relationship with his patients. It was on this basis that the sanction was imposed involving conditions on his registration for a period of 18 months. These conditions have been helpfully set out in full in section 3 of Mr Loran's statement of case and skeleton argument, and I will read out what they are.

First, the notification conditions:

1. To notify all employers (including the superintendent pharmacist or responsible pharmacist) or contractors; all prospective employers (including the superintendent pharmacist or responsible pharmacist) or contractors, agents acting on behalf of employers and locum agencies, whether for paid or voluntary employment for

which registration with the Society is required (in the UK or elsewhere) of the conditions of this Order. In the case of prospective employers, this notification must be given at the time of application.

2. To allow the Society's Fitness to Practise Directorate to exchange information with your employer, any locum agency, Primary Care Organisation or any other person or organisation for which you provide pharmaceutical service.

3. To notify the Council's Fitness to Practise Directorate before accepting any position for which registration is required, and which requires you to act as a responsible pharmacist/superintendent pharmacist in the course of your duties, and to provide the Council with the contact details of your employer, PCO and superintendent pharmacist.

Then there is a mentoring condition:

To nominate a senior and experienced practising pharmacist to act as a mentor, such mentor to be approved by the Council, to seek advice from and maintain regular contact with such mentor, and to allow the Council to exchange information about your efforts to improve your pharmacy practice with such mentor, to authorise the mentor to provide reports on your progress to the Council every six months with particular focus on maintaining boundaries, awareness of ethical responsibilities, communication skills with patients. For the avoidance of doubt the mentor need not be employed by your current or any future employer.

Then the next condition, which was expressed by the Committee as a measure to give a structure to the mentorship: To keep a personal record in book form of all consultations with all patients, and describe in note form all interventions where you give substantive advice in the consulting room. Your log should cover:

1. The problem arising.
2. The points discussed.
3. The advice and recommendations you have given.
4. Your assessment of the outcome.

This log should form the basis of your regular discussion with your mentor, and it was made clear that the requirement was in relation to a notebook of all patients that were seen in the consultation room but not all patients attending the pharmacy.

This is the anticipated review that is taking place a year after the coming into force of the order for those conditions. We have had the case outlined to us this morning by Mr Loran, and we have heard from Mr Unadkat himself, and he has provided material on his behalf.

In particular there are, in the bundle that we have seen, two reports from his mentor Dorothy Connolly (who has now become Dorothy Lucas), and those reports are of June

2011 and December 2011. I will not set out the content of these reports in any detail, but they have been most helpful to us, and they show that Mr Unadkat has learned his lesson and appears to have had no difficulty in conducting himself appropriately and effectively, and maintaining all proper safeguards and boundaries with his patients. He has even received compliments on his excellent service to patients, and that has been recorded by his mentor.

The mentor has also confirmed that Mr Unadkat has kept a log of all his consultations in accordance with the final condition that I have just read out. That logbook has been brought to this hearing by Mr Unadkat in a large ring binder, and we have had the opportunity to consider it. We are happy that it shows that Mr Unadkat has been effective and thoughtful in the service that he has provided to patients, and in the way that he has recorded those services. Accordingly, it is with pleasure on our part that we find that Mr Unadkat has complied with all of the conditions that were imposed upon him, and we note that he has found the exercise of keeping this log of consultation with patients a useful exercise, and it is one which in some form or other he intends to continue even after it is no longer required of him by condition.

It appears to us that Mr Unadkat has complied with the conditions and that the conditions have been successful in achieving what it was intended should happen. Accordingly, we make no further order today other than to direct that the conditions remain in force for the six months remaining of the conditional order, with the slight amendment that the next report from the mentor should be received by the Council by no later than May 18, 2012. That is a Friday, and it is intended that, once received, it would give the Council the

opportunity to apply for a review hearing if there were any matters of concern that it would wish to bring to the attention of the Committee. In the absence of an application for a further review hearing by the Council, none will take place, and the order will simply expire 18 months after it came into force.

MR LORAN: On 4 July 2012 I think the order is due to expire.

THE CHAIRMAN: Well, then, in the absence of such review, the order will simply come to an end on July 4, 2012. Is that clear to you, Mr Unadkat?

MR UNADKAT: Yes sir.

THE CHAIRMAN: You have to keep complying with all of these conditions until then, and the only slight difference is that you should ask your mentor to make sure that the final report is provided by Friday, May 18, which is a little bit less than six months. So that is the only tweaking to the existing order; otherwise it remains in force and, if no problems arise, it will come to an end, and that will be the last you will hear of these matters. But if there is anything that is troubling the Council they will apply for a review hearing and there will then be another hearing but, if there is nothing that troubles them, that would be the end of it.

MR UNADKAT: Thank you.

THE CHAIRMAN: Thank you both very much.
