Case studies

Case study one

These case studies cover a number of issues that can occur in a range of education and training settings and relate to aspiring pharmacy professionals. They are designed to help individuals and organisations interpret and understand the principles of the guidance in practice.

Theme: Serious misconduct

What happened?

John is a second-year pharmacy student. He is a high performing student and has excelled in his two years. He is also an active member of a number of student clubs and bodies.

On a night-out late in the academic year, John was at a student bar with some fellow second year students. They were celebrating a birthday and had been drinking. As the evening progresses one of the students suggests moving on to a club and the evening extends into a late night and heavy drinking.

An altercation in the club resulted in John striking another man causing actual bodily harm. The police were called, and John was arrested for assault. He was later convicted and received a fine.

John notified his school of pharmacy of the incident when it occurred and the subsequent conviction.

What action did the school take?

Once the school was notified about the conviction it decided that the concern potentially called into question John’s fitness to practise and that an investigation should take place to gather further evidence.

The investigation included:

- interviewing John, during which he expressed remorse for his actions and highlighted that he had attended an alcohol awareness course
- interviewing his tutor, during which the tutor highlighted that the incident was out of character
- reviewing the details of the conviction.

The investigator then assessed the evidence against criteria that may indicate that a student’s fitness to practise was impaired. The evidence suggested that one or more of the criteria were met. This meant the matter was referred to a fitness to practise panel (a small group of individuals with the training and expertise to make an impartial decision about whether John’s fitness to practise was impaired).

What action did the panel take?

In advance of the hearing John was provided with the relevant guidance and documentation.

A three-person panel was convened, and John attended with a representative from his student union. The panel heard the facts of the case and took evidence from John and read testimonials submitted on his behalf.

The panel took all the facts into consideration including:

- Details of John’s conviction.
- His year of study - he was not nearing graduation so there was time for John to
show remediation and demonstrate how he has learnt from the incident.

- His good academic record and positive character testimonies.
- His engagement with the police investigation and the student fitness to practise process.
- The potential impact of the conviction in terms of professional practice, risk to the public, risks to the reputation of the profession and the University.
- His remorse and the remediation efforts he had shown already by apologising to the victim and attending the course.

Taking everything into account, the panel decided on the facts and then on impairment. Based on John’s conviction, the panel felt that the facts of the case were proven. When considering impairment, the panel looked at current impairment, not whether the he was impaired at the time the incident occurred. However, the panel was concerned that John’s conviction would impact on public confidence in the profession.

They gave John credit for his engagement, insight and remediation. However, as it was a serious conviction, he was given a warning.

**Support John received**

John had a representative from his student union attend the panel hearing. Attending a hearing can be a difficult experience and the support John received in understanding the process and having someone help him articulate his points clearly was very helpful. He felt the proceedings were fair and that if he was facing the three-person panel without support he may not have been as confident.

John also received support from the school and from his tutor.

**Key learning**

**Support from education providers**

Education providers should support students/trainees during fitness to practise investigations and hearings. External organisations, such as the Pharmacists’ Defence Association or Pharmacist Support, can also provide support and guidance.

**Taking action quickly**

With robust processes in place the school was able to assess the concern and quickly decide it was something that should be investigated. This provided clarity to all parties and avoided any unnecessary delays.

John was candid about what happened and notified the school as soon as he could. He engaged with the process throughout and demonstrated insight into his conduct and the impact it had. This reflected well on John with the panel.

**The importance of remediation**

John’s willingness to reflect on his behaviour and accept responsibility for his actions shows he understands the impact and he is willing to learn from his mistakes. This was important when the panel came to decide on the outcome.

**What are the implications of fitness to practise findings for a student’s future career?**

The implications of student fitness to practise for a student or trainee’s career depend on the circumstances of the individual case.

In the overwhelming majority of cases, this will not be a barrier to qualifying as a pharmacy professional, as long as the individual cooperates with fitness to practise processes and demonstrates they have rectified the behaviour that caused the concern (the process known as remediation).

Schools must only graduate students who they deem fit to practise. Therefore, if there are no further issues that call into question John’s
fitness to practise, he should be able to continue to apply for registration. It is rare for someone to be refused registration, and this usually only happens when their behaviour is deemed fundamentally incompatible with registration. For example, a serious sexual assault or when they have demonstrated no insight or not learnt from an incident.

What if...?
The outcome could have been different had some elements been missing or John’s attitude towards the proceedings had been different. What are your thoughts if John:

- hadn’t reported the issue to the school?
- hadn’t engaged in the process or demonstrated remediation and remorse?
- hadn’t taken a legal representative to the hearing?
- had been demonstrating professionalism outside of immediate clinical studies.
Case study two

These case studies cover a number of issues that can occur in a range of education and training settings and relate to aspiring pharmacy professionals. They are designed to help individuals and organisations interpret and understand the principles of the guidance in practice.

Theme: Drug misuse

What happened?

Charlotte is a pre-registration pharmacist trainee working in a small community pharmacy. Following the break-up of her relationship with her boyfriend and her parents’ recent divorce she began taking recreational drugs to cope. Her friends, who she shares a house with, have noticed this is affecting her health and how she behaves. Charlotte’s pre-registration tutor had noticed that over the past couple of months her attendance wasn’t as good as it usually was, and she had been sent home on one occasion in the pharmacy due to her appearance and notable poor physical state. She explained this was due to tiredness after a virus. Charlotte has also been caught at a club in possession of a class A drug and received a caution from the police. She declared her situation to her tutor and was receptive to receiving the necessary support. However, she is very worried about what has happened and doesn’t know what to do next.

What action did the tutor take?

Charlotte’s tutor made an effort to make Charlotte realise the seriousness of her actions and the possible implications on her future practice. Following this, her tutor took swift action to provide support for her once she acknowledged she had a problem. In particular, her tutor:

- Held regular meetings with Charlotte to document, accurately and clearly the issues that had affected her progress.
- Took all reasonable steps to respond to a request for support from Charlotte and record all requests for support; what was said in meetings; and further actions to resolve matters.
- Took care not to make assumptions or be judgemental about Charlotte’s difficulties regarding her lifestyle.
- Encouraged her to be open and honest with the employer.

What other action was taken?

Charlotte notified the employer about her issues and caution. Upon discussion with the employer and taking account of the internal standard operating procedures in place on employee health, it was decided by the employer that Charlotte would be able to continue with her pre-registration year, under certain conditions. This was based on the fact that:

- Charlotte expressed remorse for her actions and acknowledged she had a problem.
- Whilst she demonstrated poor judgement, she had been honest and upfront about her health.
- The testimony from her tutor stated that, until the incident which led to her caution, she was of good character.
- Charlotte had demonstrated a professional attitude throughout her pre-registration year.
- The context in which the issues arose.
• Charlotte has proactively sought counselling to address her drug use and has been to her GP.
• She had fully engaged with her employer’s disciplinary process.

**Support Charlotte received**

The support that was put in place enabled Charlotte to address the problems and change her lifestyle. She is doing well under the supervision of her GP and is on course to complete her training year.

Charlotte’s tutor advised her that she should note the caution and her health issues on her application form to register with the GPhC, which she did. The GPhC also requested confirmation from Charlotte’s GP and other health professionals involved in her care about her rehabilitation. Character references from tutors, employers, family and friends were also helpful.

**Key learning**

**Disclosing health and conduct issues**

If a student or trainee receives a conviction or caution, or has a health issue, it is important that they disclose this to their education provider and the GPhC when they apply to register.

Providers should also raise any issues that might affect a student or trainee’s suitability for future registration to the GPhC.

In normal circumstances, the GPhC does not investigate concerns about student or trainee fitness to practise. However, if after having assessed a concern a tutor considers that the concern is serious and relates to a trainee’s fitness to practise that could affect their suitability for future registration, the tutor should raise it with the GPhC or another relevant person or body. Serious concerns include those which may be criminal or may have significant safety implications for patients, members of the public or members of the pharmacy team.

**The role of the tutor in supporting students and trainees**

Tutors play a key role in helping students and trainees to develop the skills, knowledge, understanding and behaviours they need to meet the standards expected of a pharmacy professional. Raising concerns about a trainee’s performance at an early stage with a trainee can help to identify areas of practice that can be improved. If possible, concerns should be addressed at an early stage between the trainee, their tutor and perhaps their employer or superintendent pharmacist. However, it is important that tutors are aware of the different escalation procedures in place and support channels that are available.

**What are the implications of fitness to practise findings for a pre-registration trainees’ future career?**

The implications of fitness to practise issues for an aspiring professional’s career depend on circumstances of the individual case. In the majority of cases, this will not be a barrier to qualifying as a pharmacy professional, as long as the person engages with processes, demonstrates insight and doesn’t pose a risk to patients and the public.

**What if...?**

• Charlotte had approached her doctor or someone for support earlier?
• Charlotte hadn’t demonstrated insight into her issues?
• Charlotte hadn’t sought support and acted on advice from her tutor?
Case study three

These case studies cover a number of issues that can occur in a range of education and training settings and relate to aspiring pharmacy professionals. They are designed to help individuals and organisations interpret and understand the principles of the guidance in practice.

Theme: Academic malpractice and plagiarism

What happened?

Jay is a pharmacist who is also enrolled on an independent prescribing programme at his local university. As his studies progressed, he began struggling with the demands of working in his hospital’s busy wards and juggling this with the need to attend additional clinics with his designated prescribing practitioner as part of his independent prescribing training.

Mid-way through his course, he was required to submit a piece of work. Jay managed to submit the work in time but he included some key information from a website without attributing it properly. This was identified by his university. He attended an academic misconduct panel meeting at the university and subsequently, was referred to the university’s student support services in relation to poor academic practice and for stress. As a result, he had to resubmit a piece of coursework and was encouraged to undertake a two-month break from the course.

During his break from the programme, Jay became friends with Heena who was also on the same course.

In resuming his studies, Jay was due to submit a paper in order to progress in the programme but felt that he was unable to do so in the required timeframe. Jay made the decision to ask Heena if he could use a paper she had completed the year previous on which to base his own work. Heena agreed to this. Upon submitting the paper online, the university’s plagiarism software identified a high level of similarity between Jay’s paper and the paper submitted by Heena.

The university subsequently carried out an investigation. Through a series of interviews and written statements, both Jay and Heena denied that they colluded to help Jay submit his paper. However, after Heena had voluntarily showed WhatsApp messages between the pair, it was clear that Jay had plagiarised, and that Heena had colluded in this.

What action did the university take?

The university carried out a robust investigation through its standard disciplinary procedures which resulted in the case being referred for a hearing. At the hearing it was noted that both Jay and Heena had breached both the university regulations on plagiarism and the standards for pharmacy professionals relating to the ‘duty of candour’. The University felt that this amounted to misconduct and decided on the following outcomes:

What action did the university take against Heena?

- Heena made a full and frank admission of her behaviour at the University’s hearing. She explained that she made an error of judgement in an attempt to help a friend, and the panel felt that she had showed insight into her actions.
- She accepted that she had breached the University regulations on collusion but was unaware of the extent to which Jay had plagiarised her work.
- The University decided to take no action against Heena as they were content it was
an isolated incident and it had no impact on patient safety.

• They did ask her to inform the GPhC and her employer, which she did.

What action did the university take against Jay?

• Jay was found guilty of academic malpractice and was awarded with a mark of zero on his paper.
• Jay was asked to inform the GPhC and his employer, which he did.
• He explained the stress that he had been under at the time of the incident had impacted his judgement.
• He explained the steps he had taken to prevent such an incident from happening again.

What action did the employer take?

Both Jay and Heena notified their employer immediately of what happened and had been open and honest about these proceedings. Heena received support from the senior managers in her employment. She undertook the relevant training and development and had reflected on what she did wrong which led to the university’s initial investigation.

Jay continues to be supported by his employer and he has line management responsibility for other members of staff. He has been open about these proceedings and has played an active role in using his own experiences to inform his colleagues of the importance of maintaining professional standards at all times.

What action did the GPhC take?

Following an investigation, Jay’s case progressed to the GPhC’s Fitness to Practise Committee. Meanwhile, Heena’s case was resolved prior to the committee stage GPhC. This resulted in the following outcomes:

• Jay was given a warning.
• No action was taken against Heena.

Key learning

Providing support can prevent issues arising

The provision of support and preventing issues occurring is important. The support that Heena received from her employer allowed her to take the necessary steps to ensure an incident would not happen again.

If a pharmacy professional is aware of a struggling colleague, they should take the appropriate steps to provide support and advice but should always keep in mind the standards for pharmacy professionals and to act with integrity. It is important that any issues are identified as early as possible.

Education and training providers play a key role in encouraging students and trainees to develop and demonstrate integrity, insight and honesty when things go wrong.

Demonstrating insight, integrity and honesty as a student or trainee

Jay took steps in a difficult situation that put his career at risk. By concealing what he did, he made matters worse for himself. Pharmacy professionals should always be open and honesty and act with integrity. If difficult situations arise, they should seek support through the school, their employer or other resources.

Those who are pharmacy professionals or are training towards becoming a pharmacy professional should ensure that they are honest at all times.

What if…?

• Jay had approached his tutor to discuss the date the paper needed to be submitted?
• Heena had notified the course tutors about Jay’s struggles and his request to use her paper?
Case study four

These case studies cover a number of issues that can occur in a range of education and training settings and relate to aspiring pharmacy professionals. They are designed to help individuals and organisations interpret and understand the principles of the guidance in practice.

Theme: Inappropriate use of social media

What happened?
Paulo is a fourth-year pharmacy student who is on course to enter his pre-registration year. Whilst on a clinical placement at a hospital pharmacy he took a ‘selfie’ behind the dispensing counter to show off his new haircut. He posted the picture on Instagram. Unbeknownst to Paulo he had inadvertently included the location of the hospital and a prescription was also partially visible in the background of the photo.

Paulo only intended his friends, who are also students on the same course, to see the photo. However, one of them ‘liked’ the photo and decided to share it more widely. A fellow student who had seen the photo felt that posting a photo of this nature was unprofessional and a breach of confidentiality. They decided to refer the incident to the school and asked Paulo to remove the photo, which he did.

What action did the school take?
Given the nature of the concern and the evidence received when it was referred, the school referred the matter to its health and conduct committee where a decision was taken to open a fitness to practise investigation into the incident involving Paulo. They also identified the students who had shared or ‘liked’ the photo. The school appointed an investigator who spoke with each of the students to establish the facts of the case. Paulo was made aware of the support available to him through the student support services and his personal tutor.

Once the investigation was complete the investigator decided to refer the case to the school’s fitness to practise committee. It was clear to the committee that the actions of Paulo, and subsequently his fellow students had the potential to bring the profession into disrepute and their behaviour called into question their professional judgement. There were also some serious patient confidentiality issues for the committee to consider as well.

What other action was taken?
Despite accepting his responsibility in the incident, Paulo felt that it had been blown out of proportion. As a result, the panel felt that he had not shown any insight into his behaviour and had only removed the photo due to peer pressure. The panel considered oral and written evidence from his tutor who confirmed his lack of insight in previous conversations and recorded meetings he had with Paulo. Taken all this into account, including the seriousness of revealing a patient’s personal details, the panel decided to impose conditions. They asked Paulo to:

- undertake a series of reflective pieces of work on professionalism,
- complete an assignment on the importance of confidentiality, and
- to attend regular meetings with his tutor to assess his progress in understanding what he did was wrong.

The other students involved in the incident also attended a panel hearing. They deeply regretted their actions and showed genuine remorse.
Therefore, the panel decided that their fitness to practise was not impaired.

**Key learning**

**Demonstrating professionalism online**

Pharmacy professionals, students and trainees have the same responsibilities and obligations when interacting online as they do when they interact face-to-face. The GPhC expects pharmacy professionals to use good judgement and behave professionally when using social media.

Social media is a powerful way for pharmacy professionals to collaborate with their peers, colleagues and the general public. But it can blur the boundaries between personal and professional use.

Schools, education and training providers should ensure that students and trainees are aware of their duty to uphold the reputation of the profession at all times and that they may jeopardise their ability to join the GPhC register if they misuse social media.

**The importance of demonstrating insight**

Because Paulo did not appreciate that his use of social media might breach confidentiality, the panel considered conditions were necessary.

**Maintaining people’s confidentiality**

When pharmacy professionals, students and trainees do not handle confidential information appropriately it can damage public trust and confidence in the pharmacy professions and other healthcare professions.

It is essential that pharmacy professionals and those training or studying to become a pharmacy professional take steps to protect the confidential information they come into contact with. In particular, they should make sure not to disclose information on any websites, internet chat forums or social media that could, or potentially could, identify a person or patient.

**What are the implications of fitness to practise findings for a student’s future career?**

The implications of fitness to practise issues for an aspiring professional’s career depend on circumstances of the individual case. In the majority of cases, this will not be a barrier to qualifying as a pharmacy professional, as long as the person engages with processes, demonstrates insight and doesn’t pose a risk to patients and the public, as is the case with the students in the above example.

**What if...?**

- Paulo had been remorseful to his tutor earlier in the process?
- Paulo had demonstrated insight into his actions with the panel?
Case study five

These case studies cover a number of issues that can occur in a range of education and training settings and relate to aspiring pharmacy professionals. They are designed to help individuals and organisations interpret and understand the principles of the guidance in practice.

Theme: Managing health issues

What happened?
Sharan is a pre-registration pharmacist trainee. She has an excellent academic record but is not enjoying her placement at a branch of a large multiple pharmacy group. Sharan is starting to worry about the increasing workload in the busy pharmacy. She didn't speak to anyone about how she felt as she was worried they might think she couldn't cope.

As the placement year progressed Sharan became more stressed and had trouble sleeping which affected her concentration. Some days she couldn't attend work due to migraines and relationship problems with her boyfriend began to develop. As a result, Sharan began to miss work on a number of occasions and had made a number of errors in the pharmacy. She felt depressed but did not seek any medical support.

One of Sharan’s friends, and a fellow trainee, noticed she didn’t seem to be her normal, confident self and appeared withdrawn and upset. He encouraged Sharan to go and see her GP and speak to her tutor, but Sharan didn’t want to. She was worried the GP would tell her employer and the problems she was experiencing would compromise her ability to become a pharmacy professional. Sharan continued to struggle. Her attendance and performance continued to deteriorate.

Her tutor became concerned and met to discuss the matters with Sharan. She did not tell him about her feeling depressed, her struggles with the pre-reg year or her personal struggles. She was worried that the employer wouldn’t support her or sign off her training.

The tutor was very concerned and referred Sharan to occupational health.

What action did the employer take?
At the occupational health meeting Sharan became upset and admitted she was struggling with her mental health and workplace pressures.

The employer was sympathetic to Sharan’s situation. They addressed her level of absence and poor performance and referred her to a counsellor. Sharan also attended her GP, was diagnosed with depression, and received medication.

The tutor also provided a workplace mentor to work closely with Sharan so she could build confidence in the workplace. She also attended a resilience course.

Sharan responded well to the treatment prescribed by the GP and the adjustments put in place by her tutor. With this ongoing support in place, she managed to get back on track and continued with the placement year to a successful conclusion.

Key learning

Seeking support for health conditions
Carrying on without seeking help was not the best thing to do. Trainees should approach their employer for support if they are struggling to cope with things including academic, financial, social or health issues.

Having a health condition is not a fitness to practise concern. How the student or trainee
deals with their condition is what’s important. It is not in a student or trainee’s interest to conceal a serious health problem.

**Showing insight into the impact of a health condition**

If a student or trainee understands their condition and seeks appropriate support from a healthcare practitioner and follows their advice, it is unlikely that their health would become a fitness to practise concern.

Where a student or trainee is not showing insight into their condition, not seeking appropriate medical advice, or not complying with treatment, this is more likely to become a fitness to practise issue because the safety of the student/trainee or others around them, as well as confidence in the profession may be compromised.

Being open and honest with your employer and seeking appropriate support and medical advice is a good example of demonstrating insight into a health issue.

**Confidentiality** for students and trainees

Sharan was worried about information being shared about her without her consent, and the impacts this might have on her career. Students and trainees have the same rights to confidentiality as other patients. GPs would only transfer confidential information if it was to protect patients and the public. In this case there is no indication Sharan’s condition is serious enough to impact on patients. There would be no reason for the GP to tell her employer.

**Preventing health issues becoming fitness to practise issues**

Employers should respond to health issues appropriately and sensitively. It is important for employers, amongst others, to try and prevent issues becoming fitness to practise matters. This can be achieved by thinking about underperformance or issues at work and considering whether there is an underlying health issue. Clear arrangements about referrals to occupational health and a culture that facilitates being open and honest about concerns will also help.

**Implications for registration**

Sharan notified the GPhC of her depression when she made an application to be a registered pharmacy professional. It was clear that the condition was being managed and Sharan had insight therefore it did not have an impact on her application.

**What if...?**

- Sharan had approached her employer for support when she began having problems regarding stress and work anxiety?
- Sharan’s friend had notified the tutor about her struggles?
- Sharan had attended the GP to seek support for her depression?
- The employer had addressed Sharan’s absence and poor performance sooner?
Case study six

These case studies cover a number of issues that can occur in a range of education and training settings and relate to aspiring pharmacy professionals. They are designed to help individuals and organisations interpret and understand the principles of the guidance in practice.

Theme: Dishonesty

What happened?

Kasia is a pre-registration pharmacy technician trainee working in a large pharmacy. She is about to start her second year of training. The pharmacy she works for has enrolled her with a distance learning provider to complete the knowledge component of her course.

Kasia has been making good progress on her course, but the new term has meant changes to her family life. Her two children have changed school and Kasia is struggling to balance work and her other commitments. Although Kasia has found the situation stressful, she has been managing to meet both her work commitments and non-work commitments. In her regular progress meetings, she told her tutor that everything is fine. Her pharmacy is very busy and Kasia is worried that if she asks for help it will create an unfavourable impression.

As the year went on, the workload in the pharmacy increased and the staff found themselves under more pressure. Kasia realised she had not completed the required number of activities for her portfolio. She started to worry that completing the number of tasks required would not be possible before she moved to her next placement, as she was already struggling with her clinical work and other commitments. Shortly before the end of her placement, she found she did not have evidence for two tasks she still needed to complete.

The last day of her placement was very busy and Kasia did not get a chance to gather the evidence required for the tasks she needed to complete. Her tutor was also busy and postponed their regular progress meeting. Kasia panicked and decided to complete two forms with false details to submit as evidence for her course, falsifying a signature of a supervisor.

Her education provider carried out a routine sample of evidence. They noted that some of the forms submitted by Kasia as evidence did not seem quite right - some details were inconsistent or absent. The reviewer for the education provider decided to contact Kasia’s tutor to see what had happened.

Kasia’s tutor checked the forms and clearly identified that they did not relate to real activities Kasia had carried out. Her tutor arranged a meeting with Kasia to ask her what had happened.

During the meeting, Kasia became very upset. She admitted that she had not carried out the tasks in question and forged the signature of a supervisor. She explained she was struggling with the workload and other commitments and was worried about falling behind.

What action did the employer and education provider take?

The tutor was sympathetic to Kasia’s situation but was concerned about the dishonesty involved. Kasia’s tutor decided to discuss the issue with the HR staff at the pharmacy. HR agreed the dishonesty might call Kasia’s fitness to practise into question and initiated the concerns process they set out in the agreement between the education provider and Kasia’s employer. The process stipulated that the employer’s HR function should gather evidence
about incidents at work unless there was no-one able to act impartially at the employer, in which case the provider would step in. Accordingly, a member of the HR team, who had not dealt with Kasia previously, gathered statements from Kasia, her tutor and the education provider.

The investigation concluded that there was evidence of dishonesty. The agreement set out that a panel should be convened between the provider and the employer to consider the allegation. In accordance, a panel was convened including a member of the HR team, a pharmacy professional from another branch of the pharmacy, and an assessor from the education provider. Kasia was invited to attend the panel and offered support from another member of the HR team, and the option of bringing a legal representative and someone else to support her.

The panel heard from Kasia and her tutor about the pressure she had been under, and how she had tried hard to meet the requirements and balance her commitments. The panel were concerned about her dishonesty however, and decided that her fitness to practise was impaired and conditions were necessary.

The panel asked Kasia to:

- hold a discussion with her tutor about why honesty and integrity were important for pharmacy professionals
- submit a written reflection to the panel and required her to work under close supervision until they could review her progress at a later date.

The panel also advised Kasia to notify the GPhC when she came to register.

Support Kasia received

The panel also recommended that Kasia’s shifts were adjusted and reduced, so that she could balance her family commitments more easily. They also referred Kasia to the professional support service provided by the local healthcare education and training commissioning body. This service provided her with additional time and support from a tutor to complete educational tasks and helped her with her time management skills.

Kasia engaged positively with reflective submission, recognising that she had responded to the situation in an unprofessional way, and explaining how she would respond to stressful situations in future. The tutor assigned by the professional support service also explained that Kasia had engaged well with the process and her time management had improved.

With the adjustments to her working pattern, she was able to stay on top of her work. The additional support with her educational tasks meant she could complete all the requirements of her course. Kasia’s regular tutor considered she had engaged well with the process and her time management had improved.

Key learning

Recognising when support is needed

Kasia didn’t recognise that she was in a difficult situation or that she needed support to stop a more serious concern developing. Kasia used her reflective writing to show she had learned to recognise the limits of her capacity and speak up if they were met in future.

This is important for all students and trainees: pharmacy professionals need to take steps to manage their own health and personal circumstances, seeking help when they need it. Pharmacy technician trainees can approach their employer or their education provider for support if they are struggling to cope with work including academic, financial, social or health issues.

Demonstrating honesty and integrity

People receive safe and effective care when pharmacy professionals are trustworthy and act with honesty and integrity. Kasia’s tutor was
concerned that Kasia might not act with the honesty and integrity needed to train safely, calling into question her ability to register as a pharmacy professional. Kasia had to demonstrate she was likely to act in an honest and trustworthy way in future.

Providing support to students and trainees

Employers should also have routes into support and be prepared to provide adjustments for their trainee staff. If they have concerns about the fitness to practise of learners who are not yet registrants, they need to make sure there are routes and mechanisms to address these concerns. These should be used proactively: sources of support and advice should be made clear to learners, and regular progress meetings between tutors and their students/trainees can be used to identify support needs, track progress and identify issues before they become concerns.

Responsibility for identifying and acting on concerns

Pharmacy technician courses often mean more than one organisation is involved in the education and training of an individual pharmacy technician. In these cases, all organisations have an obligation to raise concerns if they encounter them and share potential concerns with another organisation better placed to investigate and/or address them. This should be part of the agreements between different organisations involved in the employment, education and training of a trainee pharmacy professional.

Implications for registration

Kasia notified the GPhC about the process she had been through and provided copies of the panel’s decision when she made an application to be a registered pharmacy professional.

It was clear that Kasia had demonstrated insight and that her employer considered her fit to be a pharmacy professional, and she was permitted to register.

What if…?

- Kasia had recognised she needed help at an earlier stage?
- Kasia’s work had provided more information about the support and adjustments available?
- Kasia had met with her tutor to explain why she had missed the deadline?
- Kasia’s dishonesty had not been picked up by the education provider?
Case study seven

These case studies cover a number of issues that can occur in a range of education and training settings and relate to aspiring pharmacy professionals. They are designed to help individuals and organisations interpret and understand the principles of the guidance in practice.

Theme: Reasonable adjustments

What happened?

Seema is a pre-registration pharmacy technician trainee who is 6 months into her training at a hospital pharmacy. At school, Seema was diagnosed with a mild form of autism after her teacher noticed that she struggled in some social situations and in understanding the meaning of some communication. As a result, Seema received some additional support to help manage her difficulties at the time. Since leaving school, Seema has primarily worked in jobs where there is a high degree of autonomy and limited client/patient interaction. She did not disclose her autism when she applied for the training programme as she was worried that she would be stigmatised and that her colleagues would treat her differently. Seema also felt that she had a better handle on her autism as she grew older.

Seema has fared well in her initial months at the hospital. Despite this, Seema enjoys some aspects of her work more than others. She has excelled in the knowledge component of her training and has been praised by her supervisor for competently managing medicines in the dispensary. However, she is concerned that her autism will manifest itself once she is required to spend more time interacting with patients.

Although she is progressing well in her new role, small mistakes are starting to creep in which are being noticed by other members of staff. Her lack of patience in completing some tasks and her difficulty in showing empathy or compassion towards patients has led to some concerns.

These issues have become more frequent and more serious as her training progresses culminating in one patient complaining about Seema’s attitude.

Although Seema’s behaviour did not raise any concerns from a patient safety perspective, her supervisor felt that it was appropriate to speak to her to check that everything was okay and to prevent things escalating. Recognising that there were some concerns about her performance, her supervisor was supportive towards Seema and asked if there was anything he could do to help.

Seema felt comfortable opening up to her supervisor and decided to disclose her autism and its impact on her training. She apologised for not disclosing her disability and showed genuine remorse after being told a complaint had been raised against her.

What action did the employer and education provider take?

The supervisor was sympathetic to Seema’s situation. He recognised that Seema was a valuable asset to the team demonstrated by the progress she had made in developing her portfolio.

Although it was concerning that Seema did not disclose her autism when applying for the programme, her supervisor took on board the reasons behind this decision.

Upon discussion with the HR department and her education provider, Seema’s supervisor decided to put in place some adjustments to ensure that Seema could complete her training.
Although no formal investigation was required as a result of the patient’s complaint, Seema voluntarily apologised to the patient.

**Support Seema received**

Under the Equality Act 2010, autism is defined as a disability, and employers have a responsibility under this Act to make any reasonable adjustments to remove disadvantage faced due to disability.

Seema’s employer held discussions with her to ensure that she was being appropriately supported. They were proactive in putting in place measures that were unique to Seema and recognised that people learn, think and train in different ways.

Seema was concerned that her colleagues would find out about her disability. Her employer assured her that details around her disability would be kept confidential.

Recognising that Seema’s autism manifests itself in certain circumstances, as opposed to others, her employer put in place a tailored programme to ensure that she could complete her training. This meant that she had:

- Access to a mentor who supported her to develop her skills in communicating with patients.
- Additional help in managing her workload. (Seema’s autism was more pronounced when she was stressed.)
- Regular catch-ups with her educational supervisor to address any issues.

In addition to this, her employer arranged general and specific autism awareness training for all staff, taking care to respect Seema’s wishes around confidentiality.

Seema engaged positively with the measures in place and was able to complete her training with the full support of her employer. When she spotted signs that her autism was impacting on her ability to carry out tasks she was quick to address this.

**Key learning**

**Reasonable adjustments**

Education and training providers are required to make reasonable adjustments to accommodate students and trainees who have a disability. They must consider further or different reasonable adjustments if required by the student or trainee if the original adjustment does not address the issue. This requirement applies equally to training providers who employ their trainees.

If, for whatever reason, despite adjustments being made and all reasonable avenues explored, concerns remain about a student or trainee’s fitness to practise, it may be appropriate to pursue the matter through a fitness to practise process. This is of particular importance in cases where the individual shows no insight into the impact of their disability on their practice. Education and training providers should seek input and/or advice from specialist occupational health services to do this.

**Declaring health issues**

Trainees and students should always be encouraged to disclose information relating to their health. However, it is important to recognise that people with diagnosed disabilities or health and neurodiverse conditions may not feel comfortable disclosing these personal details. This can be for a number of reasons. In Seema’s situation she was concerned that people would treat her differently on account of her autism. By having measures in place and an environment that encourages people to speak up about their health, employers can help manage any issues before they escalate.

**What if...?**

- Seema had recognised she needed help at an earlier stage?
- Seema’s supervisor was not proactive in noticing Seema was struggling?
• Seema’s behaviour had led to a formal disciplinary investigation?
• Seema’s colleagues were trained in spotting signs of autism?
Case study eight

These case studies cover a number of issues that can occur in a range of education and training settings and relate to aspiring pharmacy professionals. They are designed to help individuals and organisations interpret and understand the principles of the guidance in practice.

Theme: Resolving issues locally

What happened?
Sanyo is a pre-registration pharmacy technician trainee who is a year into her training at a small chain of community pharmacies that is expanding into a new location and offering new services. Sanyo is new to pharmacy and has worked for many years as a chemistry technician in a school, where she was able to manage the demands of her young family. Sanyo does not have any other family or help close by but has managed to balance work and employment without difficulty up to now.

Sanyo has been making good progress in her course and has been asked to assist in the new diabetes screening service, with the intention she will take on more responsibility for the service once she has finished training and is registered. The service is overseen by a recently registered pharmacist from another branch.

As the service became more popular, more appointments start to run over and Sanyo has started to worry about collecting her children from school. The supervising pharmacist has started to note that Sanyo has become agitated and impatient when appointments are overrunning and has fed back that Sanyo needs to maintain a professional attitude throughout appointments. One day, Sanyo was in a hurry to finish an overrunning appointment and forgot to enter a clinical measurement in the patient’s record. As a result, the patient had to be contacted and the measurement retaken.

The pharmacist overseeing the service raised a concern about Sanyo’s conduct to her workplace training supervisor. Sanyo is concerned that this will impact on her ability to complete her training successfully. She feels this is unfair and tells her supervisor she no longer wishes to work with the pharmacist.

What action did the employer take?
Sanyo’s supervisor was surprised by the complaint and consulted guidance from Sanyo’s education provider and asked a senior member of the HR team to investigate impartially.

The HR staff member spoke to Sanyo, her supervisor and the pharmacist supervising the diabetes service. It became clear that Sanyo needed an adjustment to working patterns. They also recognised that the pharmacy’s process for accommodating trainees with flexible working requirements was informal and did not meet the requirements of the agreement they had signed with Sanyo’s education provider. They were also concerned that policies and attitudes may have contributed to the breakdown of communication between Sanyo and the pharmacist.

However, the HR officer noted that Sanyo’s response to the situation had not been ideal either, as she had not sought advice, been involved in error, and that her relationship with a colleague had been damaged. They also noted that the error was inconvenient but not safety issue, and that there were other mitigating factors – that Sanyo’s was new and still developing her learning in relation to professional standards, that she had been placed in a stressful situation, and that policies and attitudes at were largely responsible for the situation.
The HR staff member was confident that the situation could be addressed locally through support and changes to her working pattern and did not have serious concerns about Sanyo’s professionalism.

**Support Sanyo received**

Sanyo’s workplace training supervisor:

- acknowledged the problems raised by the diabetes service overrunning and noted the situation was not Sanyo’s fault, but there was some learning for Sanyo as well as the pharmacy chain
- asked her to access and reflect on her course provider’s learning materials about recognising when to seek support, and to discuss them at their next supervision session
- recorded that the discussion had taken place as part of her education portfolio under the professionalism strand of the portfolio
- met with the pharmacist overseeing the diabetes service and explained that Sanyo’s need to leave on time was not related to attitude or performance and;
- agreed that the service would start and end half an hour earlier
- arranged a meeting between Sanyo and the pharmacist responsible for the service where they agreed to work together in a professional manner
- asked Sanyo to discuss her involvement with the diabetes service in their regular meetings
- discussed any further adjustment Sanyo might need for her work or education programme; they agreed that nothing further was needed but would review the situation as the course continued.

The HR manager also agreed that pharmacy should:

- formalise and extend its process to request support or adjustments for trainees with caring responsibilities, and include it as standard in the induction for all staff joining the pharmacy as a trainee of any kind
- review its online equality and diversity training package for coverage of issues relevant to carers and parents and to and reissue to staff across the chain

Sanyo was pleased that her needs as a carer were being recognised and that her employer was updating its processes and training. She also recognised the professionalism issues the situation raised in the discussion with her supervisor; she was worried about returning to work in the diabetes service but agreed to do so at the revised time and with the support put in place.

**Key learning**

**Reasonable adjustments**

Education and training providers need to make consider adjustments to accommodate students and trainees for a range of issues. They must consider further or different reasonable adjustments if required by the student or trainee if the original adjustment does not address the issue. This requirement applies equally to training providers who employ their trainees.

**Declaring support needs issues**

Trainees and students should always be encouraged to request support required. It is equally important for employers and education providers to have clear and formal processes that trainees can use to request support and promote these to trainees. Advertising them regularly and asking trainees to notify them of any changes in status can help to ensure support needs are addressed early.
Understanding the origin of issues

Concerns about conduct or behaviour may often reflect an underlying issue. Policies and staff training should be informed by an understanding of the issues that can affect different groups. Education and training providers, in investigating a concern, should take care to look impartially at the concern, and consider the possibility there is an unmet support need underlying a concern.

Having an understanding about the issues that can affect different groups of trainees is helpful. In this example, considering the issues that might be particularly relevant to trainees with caring responsibilities may have avoided the issue developing in the way it did.

Resolving issues locally

Most issues can be resolved locally and do not require formal processes or escalation to an education provider or the GPhC. It is important for training providers such as employers to make a note and offer monitoring or follow up, tailored to the circumstances if the concern. Training providers, such as employers, can contact organisations providing education or the GPhC for support if an issue can’t be addressed locally.

What if…?

- Sanyo had discussed her worries about childcare with her supervisor?
- Sanyo did not recognise the potential for impact on patients and her working relationship from the situation?
- Sanyo’s employer had been proactive in asking about support needs when she started training?