STATUTORY COMMITTEE OF THE PHARMACEUTICAL SOCIETY OF NORTHERN IRELAND

In the matter of:	Stephen Alan Rodgers (3536)
Location:	The offices of the Pharmaceutical Society NI, 73 University Street, Belfast, BT7 1HL.
Date:	26 September 2025
Committee:	Mr Gary Potter KC (Chair), Mr Paul Archer (Lay), Mrs Liz Kerr (Registrant)
Persons Present and Capacity:	Mr Stephen Alan Rodgers (Registrant), Mr Sam Magee KC, Barrister instructed by Mr Matt Wilson Solicitor (Registrant's Legal Representatives), Mr Jonpaul Shields, Barrister, instructed by the Society , Mr Alan Goleac (PSNI Paralegal)

SERVICE

1. There were no issues about service.

PRELIMINARY LEGAL ARGUMENT

2. There was no preliminary legal argument.

BACKGROUND

3. The Committee reminded itself that this was a review hearing of the decision made at the principal hearing of 12 & 13 March 2025, which found the Registrant's fitness to Practise to be currently impaired. In accordance with paragraph 7(2)(d) of Schedule 3 to the Pharmacy (Northern Ireland) Order 1976, the Committee directed that the Registrant should be suspended from practice for a period of six months.

4. The Committee reminded itself that on the 12 & 13 March 2025 the Registrant had faced the following allegations:

ALLEGATIONS

5. The Registrant faced the following allegations;

A. On or about 20th October 2023, whilst employed as a Pharmacist Manager, you dishonestly appropriated property belonging to N&R Gordon Ltd trading as Gordon Chemists, namely Neupro (2mg) transdermal patches, a prescription only medicine, intending to permanently deprive N&R Gordon Ltd of this property, contrary to the Section 1 of the Theft Act (NI) 1969.

B. On or about 20th October 2023, whilst employed as a Pharmacist Manager at Gordons Chemists, 187 Albertbridge Road, Belfast, BT5 4PS, you unlawfully obtained for your own or another's use, a prescription only medicine, namely, namely Neupro (2mg) transdermal patches, without a valid prescription.

C. On or about 10th February 2024, whilst employed as a Pharmacist Manager, you dishonestly appropriated property belonging to N&R Gordon Ltd trading as Gordon Chemists, namely various retail products, intending to permanently deprive N&R Gordon Ltd of this property, contrary to the Section 1 of the Theft Act (NI) 1969.

D. On or about 12th February 2024, whilst employed as a Pharmacist Manager, you dishonestly appropriated property belonging to N&R Gordon Ltd trading as Gordon Chemists, namely a retail product and a prescription only medication (Metronidazole tablets), intending to permanently deprive N&R Gordon Ltd of this property, contrary to the Section 1 of the Theft Act (NI) 1969.

E. On or about 12th February 2024, whilst employed as a Pharmacist Manager at Gordons Chemists, 187 Albertbridge Road, Belfast, BT5 4PS, you unlawfully obtained for your own or another's use, a prescription only medicine, namely Metronidazole tablets, without a valid prescription.

F. On or about 12th February 2024, whilst employed as a Pharmacist Manager at Gordons Chemists, 187 Albertbridge Road, Belfast, BT5 4PS, you failed to make any record of a supply of a prescription only medicine, namely Metronidazole tablets.

G. On or between 20th October 2023 and 12th February 2024, whilst employed as a Pharmacist Manager at Gordons Chemists, 187 Albertbridge Road, Belfast, BT5 4PS, you abused your position as a pharmacist and as manager of pharmacy premises to unlawfully obtain medicinal and retail products.

Breach of professional standards alleged:

The general principle of registration as a pharmacist that requires you to act to promote and maintain public confidence in the pharmacy profession.

Principle 2 – Provide a safe and quality service.

- Standard 2.1 – Provide safe, effective and quality care:

  - Standard 2.1.2 - Effectively control and manage the sale or supply of medicinal and related products paying particular attention to those with a potential for abuse or dependency.
  - Standard 2.1.6 - Ensure that you do not, whether by your actions or omissions, create a risk to patient care or public safety.
  - Standard 2.1.11 - Avoid treating yourself or anyone with whom you have a close personal relationship except for minor ailments or in an emergency.

- Standard 2.3 - Record, store and process data clearly and accurately:

  - Standard 2.3.1 - Complete records promptly or as soon as reasonably practicable after the patient intervention or activity has occurred.

Principle 3 – Act with professionalism and integrity at all times.

- Standard 3.1 – Act with honesty and integrity at all times:

  - Standard 3.1.1 – Adhere to accepted and acceptable standards of personal and professional conduct at all times both inside and outside the work environment.
  - Standard 3.1.2 - Maintain public trust and confidence in your profession by acting with honesty and integrity in your dealings with others. This applies to your professional, business and educational activities.

By your acts or omissions, it is alleged that you have (a) brought the profession into disrepute, (b) failed, on a professional basis, to observe the principles and obligations set out above and (c) undermined public confidence in the profession

6. The Committee reminded itself that as the Registrant accepted the facts at the principal hearing, the Committee had found the facts proved by reason of that admission under Regulation 34(6) of the Regulations.

7. The Committee further reminded itself that at the principal hearing, after consideration of the evidence and submissions from both parties, it had concluded that the Registrant's fitness to practice was impaired. In reviewing the Committee's decision on impairment at the principal hearing, the Committee considered the following to be of particular relevance to the review:

-As appears at paragraph 31, the Committee had been told that,

a. The misconduct was not isolated. It had been repeated over a period of time from October 2023 to February 2024. Specifically, on three occasions, there was evidence that the Registrant stole items from the pharmacy in circumstances where this was unlawful;

b. The Registrant acted dishonestly on each of the three occasions;
c. Of the three occasions, two involve removal of medication from the pharmacy without lawful authority.
d. His misconduct amounted to an abuse of a privileged position of trust.
e. The misconduct occurred within the pharmacy premises and, on two occasions, was connected to the safe and effective control of medicines;
f. He removed medicines from the pharmacy without any appropriate record being made of transactions, in breach of his obligations (standard 2.3.1 of the Code);
g. He breached a basic professional obligation not to treat family and friends, or anyone who he had a close personal relationship with (standard 2.1.11 of the Code);
h. The Registrant's dishonest behaviour was connected to, and adversely impacted, the Registrant's professional obligation to exercise safe and effective control of medicines (standard 2.1.2 of the Code);
i. There was evidence of untruthfulness, and evasion when challenged by the Head of Human Resources, when interviewed, and also during the investigative and disciplinary processes. He attempted to conceal his actions, sought to deflect and misdirect, until confronted with the evidence about his actions, including CCTV footage;
j. He created a potential risk of harm to patients, although there was no evidence of actual harm to patients or to the public.

-As appears at paragraph 33, as to insight, the Committee did not consider there was sufficient evidence of demonstrable insight. It is unclear as to why the Registrant engaged in this behaviour on three separate occasions over a number of months, against the background of an otherwise unblemished record as a pharmacist from 2000. From the investigation and disciplinary processes it is not clear to the Committee as to why the Registrant chose to engage in this behaviour.

-As appears at paragraph 34, as to remediation, the evidence is limited. The Committee were informed that the Registrant has registered to engage in an ethics development course, but has not, as yet, engaged in such a course. He has been working in a supervisory role in a retail business, but it is unclear as to what that role involved and how it has addressed his attempts at remediation. The Committee also took in to consideration that dishonest behaviour is difficult to remediate.

-As appears at paragraph 35, as to the risks of recurrence, the Committee noted that the Registrant has admitted his actions, the allegations and the facts, and has apologised and shown remorse for his actions. Further, even though the Registrant has an unblemished work record from 2000, the Committee cannot say that there is no risk of recurrence, because the Committee cannot be sure about the reasons why the Registrant engaged in this behaviour on three occasions.

8. The Committee reminded itself that pursuant to paragraph 7(2)(e) of Schedule 3 of the Order the Committee at the principal hearing imposed a six month Suspension order. The review Committee considered the following mitigating and aggravating factors identified at the principal hearing concerning the decision on sanction to be of particular relevance:

-As appears at paragraph 49, as to mitigating factors, the Committee took into consideration;

a. The Registrant had an unblemished work record as a pharmacist for 24 years.
b. The Committee had received five references which were supportive describing him as experienced, knowledgeable, fair, dedicated and empathetic. However, all of these references addressed the Registrant’s personal and professional behaviour prior to the subject allegations.
c. One of the references described the Registrant as having a wealth of pharmacy experience with roles as an area manager, relief pharmacist, locum pharmacist, pharmacy manager, director, superintendent pharmacist, and a wholesale operations manager. It was also noted that he was described as an experienced vaccinator and experiential learning supervisor. Having said that, the Committee are surprised that this wealth of experience did not lead to the Registrant providing the Committee with sufficient demonstrable insight and evidence of remediation.
d. Whilst the Registrant’s behaviour involved the serious matter of dishonesty, the Committee accepted submissions that the level of dishonesty was at a lower level which included theft of low value retail items.
e. The Registrant’s behaviour was described as impulsive against the background of an otherwise good professional career.
f. At this regulatory hearing, the Registrant did admit the allegations and admitted the facts giving rise to those allegations. This approach avoided the need for witnesses to be called and to be subject to cross examination, and allow the committee to move quickly to Stage 2 as to impairment.
g. There was no evidence of any patient harm.
h. The Registrant cooperated with the Society and complied with the imposition of an Interim Suspension Order from 03 April 2024.
i. The Registrant has since been employed in a supervisory role in retail.

- As appears at paragraph 50, as to aggravating factors, the Committee took into consideration that;

  a. The Registrant engaged in acts of dishonesty.
  b. The dishonesty occurred on three separate occasions between October 2023 and February 2024.
  c. His actions were deliberate and were not one off.
  d. The Registrant abused his privileged position of trust.
  e. The allegations gave rise to issues about a lack of accurate record keeping.
  f. When the allegations were put to him during the employer's investigation process the Registrant prevaricated, and failed to admit to his actions, until he was faced with evidence against him including CCTV footage. The Registrant could and should have admitted to his actions at the first opportunity.
  g. The Committee were not satisfied as to the extent of insight that the Registrant had demonstrated into his actions and why he acted this way against the background of a 24 year career in pharmacy.
  h. By his actions the Registrant has significantly damaged his own professional and personal reputation, and has damaged the reputation of the profession as a whole.
  i. By his actions, the Registrant has breached a number of standards in the pharmacy Code of Conduct as set out in the Committee's decision of impairment.

9. The Committee also considered the following paragraphs of the decision on sanction at the principal hearing to be particularly relevant:

- As appears at paragraph 54, the Committee then considered the sanction of Suspension and whether this sanction would maintain public confidence in the pharmacy profession and be in the public interest. The Committee noted that the sanction of Suspension may be required to highlight to the profession and to the public that the conduct of the Registrant is unacceptable and unbefitting a member of the pharmacy profession. Such a sanction would be appropriate if the Registrant's conduct fell short of being fundamentally incompatible with continued registration. The Committee are not satisfied, at this stage, that the Registrant has demonstrated sufficient insight nor that he has taken any relevant steps to remediate his actions, the Committee cannot be confident about the risk of repetition. Accordingly, the Committee considers that the most appropriate and proportionate sanction, and one which meets the regulatory objective is a sanction of Suspension for a period of 6 months. The Committee considers this period of 6 months would be sufficient to afford the Registrant time to meet the expectations that the Committee has set out in this decision.

-As appears at paragraph 55, in imposing a Suspension Order for 6 months, this Order will be reviewed by the Statutory Committee at that stage. This Committee has a number of expectations which it hopes the Registrant will address fully.

The Committee expects that;

a. The Registrant produces a detailed written reflective piece which demonstrates insight into why he acted as he did between October 2023 and February 2024, after 24 years of an unblemished career in pharmacy, and which demonstrates insight into his significant breach of professional standards.

b. The Registrant produces detailed evidence of the steps that he has actually taken to remediate his actions during the period of suspension.

c. The Registrant produces a development plan as to where he could practice, and in what capacity, to allow the Committee to reconsider his fitness to practise at the review of his Suspension. The development plan should proactively address the deficiencies in his practice and demonstrate behavioural improvement.

DECISION ON REVIEW

10. The Committee reminded itself that its role in a Review Hearing is not to reassess the appropriateness of the original sanction but to examine the Registrant's actions since the principal hearing, and to consider whether the Registrant's fitness to practise is no longer impaired or remains impaired**.** The Committee's attention was drawn to the words of Blake J in the case of Abrahaem v General Medical Council (2008) EWHC 183 (Admin) where he said,

> "the review has to consider whether *all* the concerns raised in the original finding of impairment through misconduct have been sufficiently addressed to the Panel's satisfaction. In practical terms there is a persuasive burden on the practitioner at a review to demonstrate that he or she has fully acknowledged why past professional performance was deficient and through insight, application, education, supervision or other achievement sufficiently addressed the past impairments. "

11. The Committee was also reminded of the relevant words of the Supreme Court in the case of the GPhC v Khan [2016] UKSC 64, where the Supreme Court emphasised:

> "the focus of a review hearing is upon the current fitness to practise of the registrant to resume practice, judged in the light of what he has, or has not achieved since the date of the suspension. The review committee will note the particular concerns articulated by the original committee and seek to discern what steps, if any, the registrant has taken to allay them during the period of suspension. The original committee will have found that his fitness to practise *was* impaired. The review committee asks: does his fitness to practise *remain* impaired?

12. Having heard the submissions of Mr. Shields for the Society and Mr. Magee KC for the Registrant, and having received the Registrant's bundle, including a written

reflections document, and a number of supportive references, the Committee does not consider that the Registrant has satisfied the persuasive burden lying upon him to demonstrate sufficient insight and remediation, and consequently there remains some risk of recurrence. Accordingly, the Committee considers that the Registrant's fitness to practice remains impaired.

REASONS

13. The Committee was previously concerned about the adequacy of the Registrant's insight, whether he had demonstrated effective remediation, and as to the risk of recurrence as we set out in paragraphs 33, 34 & 35 of our original decision, and repeated in this review decision.

14. The Committee decided to impose a Suspension Order for 6 months and set out in paragraph 55 what the Committee expected the Registrant to do, and to produce for the Committee at the review stage.

15. It was clear from the approach taken by the Registrant, and his legal team at the review hearing, that the Registrant realised himself that he was not quite ready to resume unrestricted practice, that he required supervision to maintain, develop and refresh his professional knowledge, skills and competence after an effective period of suspension from practice of approximately 18 months. On the evidence before it the Committee considered that he needed to demonstrate greater insight into his actions, and to undertake further remediation before he could be considered for unrestricted practice.

16. The Committee acknowledged the content of the reflective statement. However, this was not compiled until August 2025. The Committee also noted that the continuing professional development online courses that he undertook were not in fact undertaken until August 2025. His reflective piece did not include any detail about any reflection arising from undertaking these two CPD courses. A further reflective piece to address the expectations of the Committee at the principal hearing with relevance to a development plan was not received until the morning of the review hearing on the 26 September 2025.

17. The Committee did consider that it was an important step for him to take to volunteer once a week with a pharmacist to try to improve his understanding of his obligations as a professional pharmacist, and to start to redevelop his

knowledge skills and competence. However, the Registrant informed the Committee that he did not start this voluntary work until the start of August 2025, and consequently he had only completed around 7 full days of this voluntary work by the time of this review. The Committee considered that it would have been more helpful for him to have engaged in this voluntary work much earlier during the course of the suspension period, and with a more detailed written reference from his supervising pharmacist.

18. In conclusion, whilst the Committee considers that the Registrant had provided greater insight, and had provided greater evidence of remedial steps, the Committee were not satisfied that he had demonstrated sufficient insight nor taken sufficient remedial steps for the Committee to conclude that his fitness to practise was no longer impaired. Consequently, the Committee conclude that his fitness to practice remains impaired.

SANCTION

19. The Committee had to consider the appropriate sanction at this review stage, and as it did at the original hearing, the Committee had regard to the Indicative Sanctions Guidance and the relevant issues set out in its decision on sanction.

20. Realistically, there were two potential Sanctions for the Committee to consider. First, to impose Conditions for a period of time that could be workable and appropriate and which had a realistic chance of being met by the Registrant, and which were capable of being verified by the Statutory Committee. The Committee also had to consider whether Conditions were appropriate to protect the public at this stage. Secondly, the Committee considered whether it should impose a Sanction of a further Suspension.

21. The Committee did not consider that taking no action, giving the Registrant a Warning, or at the other end of the scale, removing the Registrant from the register, were either appropriate or proportionate on the facts and circumstances of this case.

22. The Committee did consider that the imposition of Conditions for a period of 12 months with the Conditions appearing in the Schedule to this decision, were appropriate and proportionate, would protect the public, and would also maintain

public confidence in the profession, and maintain proper standards of professional behaviour.

SCHEDULE OF CONDITIONS

Schedule of Conditions for 12 Months

(i) To identify the name and contact details of a Supervisor, who must be a Pharmacist registered with the Pharmaceutical Society of Northern Ireland ("the Society"), 14 days prior to recommencing practice, with such person to be approved by the Society.

(ii) To place yourself and remain under the close supervision of this Supervisor at all times.

(iii) Not to work as a Responsible Pharmacist, Superintendent Pharmacist or sole Practitioner during the period of these Conditions.

(iv) To work with a Supervisor to formulate a personal development plan designed to address the breaches of professional standards arising from the Registrant's admitted behaviour, particularly,

1. Provide a safe and quality service, and
2. Act with professionalism and integrity at all times.

(v) To forward a copy of the personal development plan to the Society within two months of the recommencement of practice.

(vi) To forward a written report before the review hearing takes place setting out in detail how you have maintained and developed your knowledge, skills and competence during the period of the Conditions.

(vii) To arrange for your Supervisor to send a written report to the Society every three months after the recommencement of your practice, with a final report from the Supervisor in advance of the review hearing, so that there will be four reports submitted before the review hearing takes place.

COSTS

23. No costs application was made by the Society.

Gary Potter KC

Chair of the Statutory Committee

26 September 2025