

**HEARING HEARD IN PUBLIC  
FALOONA, Jo  
Registration No: 147795  
PROFESSIONAL CONDUCT COMMITTEE  
JANUARY 2023**

**Outcome: Erased with immediate suspension**

FALOONA, Jo, a dental nurse, Verified competency in Dental Nursing, was summoned to appear before the Professional Conduct Committee on 9 January 2023 for an inquiry into the following charge:

**Charge**

“That being a registered dental care professional:

1. Whilst employed at [Redacted] ("the Practice"), you obtained oxytetracycline and/or flucloxacillin using Person A's details without their knowledge on the following dates:
  - a) 7 September 2016
  - b) 23 October 2017
  - c) 4 February 2019
  - d) 20 May 2020
  - e) 5 November 2020
2. You obtained oxytetracycline and/or flucloxacillin as specified in Charge 1 for purposes other than for use at the Practice.
3. On 8 December 2020, you provided Person A with a copy a self-referral letter addressed to the General Dental Council.
4. Your conduct as set out in Charge 1 and/or Charge 2 was:
  - a) Misleading;
  - b) Dishonest.
5. Your conduct as set out in Charge 3 was:
  - a) Misleading;
  - b) Dishonest, in that you knew you had not made a self-referral to the General Dental Council.

AND that by reason of the matters alleged above, your fitness to practise is impaired by reason of misconduct.”

As Ms Faloono did not attend and was not represented at the hearing, the Chairman made a statement regarding proof of service on 9 January 2023 and on 11 January 2023, the Chairman announced the finding of facts:

“This is a Professional Conduct Committee (PCC) hearing in respect of a charge brought against Mrs Faloono by the General Dental Council (GDC). The hearing is being conducted remotely by Microsoft Teams video-link.

Mrs Faloono is not present at the hearing, and she is not represented in her absence. The Case Presenter for the GDC is Ms Lucy Sweetland, Counsel.

### **PRELIMINARY MATTERS – 9 January 2023**

At the outset of the proceedings, Ms Sweetland made an application under Rule 54 of the *GDC (Fitness to Practise) Rules Order of Council 2006* (‘the Rules’), to proceed with the hearing notwithstanding Mrs Faloono’s absence. The Committee took account of Ms Sweetland’s submissions in respect of the application, and it considered the supporting documentation provided. The Committee accepted the advice of the Legal Adviser in relation to service and proceeding in the absence of Mrs Faloono.

### **Decision on service**

The Committee first considered whether notice of the hearing had been served on Mrs Faloono in accordance with Rules 13 and 65. It had sight of the Notice of Hearing dated 8 December 2022 (‘the notice’), which was sent to Mrs Faloono’s registered address by Special Delivery and by First Class post. The Committee took into account that there is no requirement within the Rules for the GDC to prove delivery of the notice, only that it was sent. However, it had regard to the Royal Mail ‘Track and Trace’ receipt, which confirmed that the copy of the notice sent by Special Delivery was delivered on 9 December 2022 and signed for in the printed name of ‘FALOONA’. In addition, a copy of the notice was sent to Mrs Faloono on 8 December 2022 as an attachment within a secure email.

The Committee was satisfied that the notice sent to Mrs Faloono complied with the 28-day notice period required by the Rules. It was also satisfied that the notice contained all the required particulars, including the date and time of the hearing, confirmation that it would be held remotely by video-link on Microsoft Teams, and that the Committee had the power to proceed with the hearing in Mrs Faloono’s absence.

On the basis of all the information before it, the Committee was satisfied that notice of the hearing had been served on Mrs Faloono in accordance with the Rules.

### **Decision on whether to proceed with the hearing in the absence of the registrant**

The Committee next considered whether to exercise its discretion under Rule 54 to proceed with the hearing in the absence of Mrs Faloono. It approached this issue

with the utmost care and caution. The Committee took into account the factors to be considered in reaching its decision, as set out in the case of *R v Jones* [2003] 1 AC 1HL, and as affirmed in subsequent regulatory cases including the case of *General Medical Council v Adeogba* [2016] EWCA Civ 162. The Committee remained mindful that fairness to Mrs Faloono was an important consideration, but it also bore in mind the need to be fair to the GDC. The Committee had regard to its duty to act expeditiously in the public interest.

The Committee was satisfied that all reasonable efforts had been made by the GDC to notify Mrs Faloono of this hearing. The notice of 8 December 2022 was sent to her by post and by email, and there is evidence to indicate that a copy of the notice was received at her registered address. Mrs Faloono did not respond to the notice of 8 December 2022. The Committee noted that there was previous communication between Mrs Faloono and the Witness Support Officer of the Dental Professionals Hearings Service regarding her attendance at this hearing, which she was informed was *“due to take place in January 2023”*. In an email to the Witness Support Officer dated 30 November 2022, Mrs Faloono wrote *“Thank you for your email. I wish nothing more to do with the gdc had enough of them...”*.

On the basis of the information before it, the Committee was satisfied that Mrs Faloono is aware of this hearing, and that her absence is voluntary. In the circumstances, the Committee considered that an adjournment of the hearing would serve no meaningful purpose. It took into account that Mrs Faloono did not request an adjournment, and that it had received no information to suggest that deferring the proceedings would secure her attendance on a future date.

The Committee had regard to the public interest in determining the allegations against Mrs Faloono without undue delay. It considered that, without good reason for an adjournment, this hearing should proceed as scheduled. Accordingly, it decided that it was fair, reasonable and in the public interest to proceed with the hearing notwithstanding Mrs Faloono’s absence.

### **FINDINGS OF FACT – 11 January 2023**

The charge against Mrs Faloono, a registered dental nurse, relates to the period September 2016 to December 2020, when she was working as a Practice Manager at a dental practice (‘the Practice’). Throughout this period the Practice was owned by Person A, who was also the Practice Principal. Person A has since sold the Practice but continues to work there as an Associate.

Ms Sweetland opened the case for the GDC by outlining the background to the allegations, as referenced in the documentary evidence relied upon by the Council.

In summary, the Committee heard that Person A and Mrs Faloono had known each other since 2009 from a previous place of work, and that Person A had invited Mrs Faloono to work for the Practice as the Practice Manager when she purchased it in 2015. It was maintained that Mrs Faloono worked in a position of trust at the

Practice, with complete oversight of tasks such as the management of the Practice's email account and the ordering of medication for the Practice.

It was highlighted that prior to any concerns being raised, Person A had left the mechanics of ordering medication for the Practice solely to Mrs Faloon. The Practice had an account with a particular supplier ('the Supplier'), who issued invoices in respect of orders that were made. The invoices were then provided by Mrs Faloon to Person A, who considered them on a monthly basis. It was the GDC's case that Mrs Faloon had been in a position to determine which invoices she placed before Person A, and which she did not.

In April 2019 the name of the Practice changed, as did the address for the Practice's email account. A system was set up so that any emails sent to the Practice's former email account were forwarded to its new email account.

It was said that in March 2020, during the national lockdown due to the Covid-19 pandemic, Person A began looking at the Practice's email account, a task that she had not previously undertaken. Person A's evidence was that on one occasion between March and June 2020, when checking the Practice's new email account, she noticed a statement from the Supplier which listed Mrs Faloon's home address. However, after having queried the matter with Mrs Faloon, with no response from her, Person A stated that she dismissed the inconsistency as a mistake.

When the Practice resumed operating after the national lockdown, Person A continued to check the Practice's new email account. It was stated that this was because Person A had other concerns about Mrs Faloon at the time. In November 2020, Person A noticed that emails were not being received to the Practice's new email account. Therefore, on 1 December 2020, she logged into the Practice's old email account, where she saw a number of emails including an acknowledgement from the Supplier regarding a request to change the email address on the Practice's account with them.

Person A investigated the matter further and was said to have discovered that, although the account with the Supplier remained linked to the Practice, the email address had been changed to Mrs Faloon's personal email address, and the postal address had been changed to Mrs Faloon's home address. Person A stated that she found a number of orders for medication about which she had no knowledge.

In the light of her concerns, Person A sought advice, including from her defence union. She was advised to notify the GDC of the matters, but to first allow Mrs Faloon the opportunity to refer herself to the Council if she wished to do so. On 8 December 2020 Mrs Faloon sent an email to Person A including her letter of resignation from the Practice, and also enclosing what purported to be her self-referral letter to the GDC. However, the GDC's case is that no letter of self-referral was ever received from Mrs Faloon. Subsequently, Person A made her own referral to the GDC.

On the basis of the GDC's evidence, Mrs Faloon faces allegations in relation to orders for medication made on five dates over the period September 2016 to November 2020. It is alleged that she obtained oxytetracycline and/or flucloxacillin using Person A's details and without Person A's knowledge, and for purposes other than for use at the Practice. It is alleged that Mrs Faloon's conduct in this regard was misleading and dishonest. There are also allegations of misleading and dishonest conduct in relation to the issue of Mrs Faloon's alleged self-referral letter to the GDC, which she provided to Person A.

### **Evidence**

The documentary evidence provided by the GDC to the Committee included the following:

- the signed witness statement of Person A dated 8 August 2022, along with associated exhibits;
- the signed witness statement of Witness B, a Senior Casework Manager at the GDC, dated 8 August 2022, along with associated exhibits; and
- the signed witness statement of Witness C, an Accounts Manager with the Supplier, dated 27 July 2022, along with associated exhibits.

The Committee also heard oral evidence from these three witnesses. Person A and Witness B appeared via the Microsoft Teams video-link to give their evidence.

Due to practical issues, Witness C could not attend via video-link, and therefore gave her oral evidence by telephone. This was following a successful application made by Ms Sweetland to allow Witness C to participate by telephone.

In acceding to the application in respect of Witness C, the Committee accepted the advice of the Legal Adviser, who confirmed that Rule 57 was the relevant Rule to be considered in the circumstances. The Legal Adviser also reminded the Committee to consider the issue of fairness to both parties in reaching its decision.

The Committee took into account all the relevant factors drawn to its attention, including the nature of Witness C's evidence. It noted that Witness C is not the main witness in this case. It also noted that the purpose of her oral evidence would be to provide further information to the Committee around the processes of the Supplier in relation to orders for medication, and the governance in respect of certain supplied medications. In the particular circumstances, the Committee concluded that there would be no unfairness in hearing from Witness C by telephone. Indeed, it considered that it would be fair to both parties to hear what Witness C had to say in relation to the relevant allegations.

### **The Committee's findings**

The Committee considered all the evidence presented to it, both documentary and oral. It took account of the closing submissions made by Ms Sweetland on behalf of the GDC. The Committee accepted the advice of the Legal Adviser. It considered

each head of charge separately, bearing in mind that the burden of proof rests with the GDC, and that the standard of proof is the civil standard, that is, whether the alleged facts are proved on the balance of probabilities.

The Committee's findings are as follows:

1.	<i>Whilst employed at ("the Practice"), you obtained oxytetracycline and/or flucloxacillin using Person A's details without their knowledge on the following dates:</i>
1.a	<p>7 September 2016</p> <p><b>Found proved.</b></p> <p>The Committee had before it copies of the relevant invoices issued by the Supplier to the Practice in the name of Person A. She exhibited these invoices with her witness statement of 8 August 2022. The Committee had regard to the invoice dated 7 September 2016, which relates to an order from the Supplier for the medications oxytetracycline and flucloxacillin. In addition to being in Person A's name, both the billing and shipping address on the invoice are that of the Practice.</p> <p>In her oral evidence, Person A stated that she had no knowledge of the five orders featured in Charge 1. Further, she told the Committee that oxytetracycline and flucloxacillin, both of which she understood to be antibiotics, were not medications that she had ever used at the Practice. She explained that the Practice is an orthodontic practice, where medications are not routinely prescribed to patients. She stated that the only medications kept at the Practice were those contained in its emergency drugs box, as it is a mandatory requirement to keep this box fully stocked.</p> <p>The Committee accepted the evidence of Person A. It found her evidence to be credible. She was the owner and Practice Principal at the time, and she was clear that she did not place or authorise orders for oxytetracycline and/or flucloxacillin, as these medications were never used at Practice, nor were they prescribed by her. The Committee heard from Witness C that both oxytetracycline and flucloxacillin are prescription only medications.</p> <p>The Committee also noted and accepted Person A's evidence that on 8 December 2020, she received from Mrs Faloon a copy of Mrs Faloon's self-referral letter that she had composed for the GDC. The Committee had sight of the email sent by Mrs Faloon to Person A on that date, in which Mrs Faloon stated, <i>"Please find attached my letter of resignation with immediate effect, also attached is a copy of my letter to the GDC..."</i>. The copy of Mrs Faloon's letter to the GDC dated 8 December 2020 and also seen by the Committee, states that <i>"I wish to report myself for</i></p>



	<p><i>fraudulently obtaining medication without the knowledge of my employer...". Whilst the Committee took into account that Mrs Faloono does not refer to any dates in her self-referral letter, she does admit to ordering "oxytetracycline and 1 box of Flucloxacillin". The Committee considered that the information in the letter does lend weight to the contention that Mrs Faloono had been placing orders with the Supplier using Person A's details and without her knowledge.</i></p> <p>In all the circumstances, the Committee was satisfied that there is sufficient evidence to find this head of charge proved on the balance of probabilities.</p>
1.b	<p><i>23 October 2017</i></p> <p><b>Found proved.</b></p> <p>The Committee had regard to the invoice dated 23 October 2017, which relates to an order from the Supplier for oxytetracycline. This invoice was in the name of Person A, and the billing and shipping address on the invoice are that of the Practice. Having taken all the evidence into account, including that of Person A, and the copy of Mrs Faloono's self-referral letter to the GDC dated 8 December 2020, the Committee found this head of charge proved for the same reasons set out at 1a above.</p>
1.c	<p><i>4 February 2019</i></p> <p><b>Found proved.</b></p> <p>The Committee had regard to the invoice dated 4 February 2019, which relates to an order from the Supplier for oxytetracycline. This invoice was in the name of Person A, and the billing and shipping address on the invoice are that of the Practice. Having taken all the evidence into account, including that of Person A, and the copy of Mrs Faloono's self-referral letter to the GDC dated 8 December 2020, the Committee found this head of charge proved for the same reasons set out at 1a above.</p>
1.d	<p><i>20 May 2020</i></p> <p><b>Found proved.</b></p> <p>In finding this head of charge proved for the same reasons given at 1a above, the Committee also took into account the different information on the invoice dated 20 May 2020. It noted that whilst this invoice was in Person A's name, along with reference to the Practice and the Practice's email address, the billing and shipping address are that of Mrs Faloono. This indicated to the Committee that the order, which was for oxytetracycline, was delivered to Mrs Faloono's home.</p>
1.e	<p><i>5 November 2020</i></p>



	<p><b>Found proved.</b></p> <p>In finding this head of charge proved for the same reasons given at 1a above, the Committee took into account the further changes to information on the invoice dated 5 November 2020. It noted that whilst this invoice was in Person A's name and there is reference to the Practice, the associated email address, and the billing and shipping address are that of Mrs Faloono. The Committee was satisfied on the evidence that this order, which was also for oxytetracycline, was delivered to Mrs Faloono's home.</p>
2.	<p><i>You obtained oxytetracycline and/or flucloxacillin as specified in Charge 1 for purposes other than for use at the Practice.</i></p> <p><b>Found proved.</b></p> <p>The Committee had regard to Mrs Faloono's self-referral letter that she composed for the GDC, dated 8 December 2020. In that letter, she admitted to fraudulently obtaining the medications oxytetracycline and flucloxacillin without her employer's knowledge, and she stated that the medications were obtained for the personal use of a close relative with a long-term medical condition.</p> <p>The Committee was satisfied on the evidence that this head of charge is proved in that the medication obtained by Mrs Faloono was for purposes other than for use at the Practice.</p>
3.	<p><i>On 8 December 2020, you provided Person A with a copy a self-referral letter addressed to the General Dental Council.</i></p> <p><b>Found proved.</b></p> <p>As set out in head of charge 1a above, the Committee had sight of the email sent by Mrs Faloono to Person A on 8 December 2020, in which Mrs Faloono stated, "Please find attached my letter of resignation with immediate effect, also attached is a copy of my letter to the GDC...". The Committee also had before it the copy of Mrs Faloono's letter to the GDC dated 8 December 2020, which is addressed to the Council. As stated above, the Committee accepted Person A's evidence that she received this letter from Mrs Faloono in an email at or around 10.12am on 8 December 2020.</p>
4.	<p><i>Your conduct as set out in Charge 1 and/or Charge 2 was:</i></p>
4.a	<p><i>Misleading;</i></p> <p><b>Found proved in relation to Charge 1 and Charge 2.</b></p> <p>The Committee took into account the definition of misleading as provided in the legal advice that it received and accepted. It noted that to mislead is</p>



	<p>to cause someone to believe that something is correct when it is not. It also took into account that misleading conduct can be devoid of intention.</p> <p>The Committee was satisfied on the evidence that in acting as found proved in Charge 1 above, Mrs Faloono misled the Supplier into believing that Person A, a registered dentist, had authorised the orders for medication that she placed on those dates. All the orders were made in Person A's name and included reference to the Practice, although the email, billing and shipping addresses changed over time. Witness C told the Committee that the Supplier is a wholesaler that provides medication to private dental practices and that an account could only be opened and used by a registered dentist, although a Practice Manager could administer it on their behalf. The Committee was satisfied that the inclusion of Person A's name gave the impression to the Supplier that the orders were being made with Person A's knowledge. This was not the case. The Committee noted and accepted the evidence of Person A that she had been unaware of the orders in question.</p> <p>The Committee was also satisfied on the evidence that in acting as found proved in Charge 2 above, Mrs Faloono misled the Supplier into believing that the orders for medication that she placed on those dates were for use at the Practice. All the orders were made in Person A's name and included reference to the Practice. The Committee was satisfied that the inclusion of these details gave the impression to the Supplier that Mrs Faloono was ordering the medication for use at the Practice. However, as seen from her self-referral letter of 8 December 2020, this was not the case.</p>
4.b	<p><i>Dishonest</i></p> <p><b>Found proved in relation to Charge 1 and Charge 2.</b></p> <p>In relation to Charge 1, which relates to the orders placed by Mrs Faloono on the five dates in question, the evidence is that these are prescription medications, which Mrs Faloono was not authorised to obtain. The evidence shows that she went to significant lengths to hide the matter from Person A. The Committee noted and accepted Person A's evidence that the five invoices were not in the pile of invoices that Mrs Faloono gave her to sign around the material times. It also took into account that the medications were not paid from the Practice's account. The indication being that Mrs Faloono paid for them herself. Accordingly, in relation to Mrs Faloono's state of mind, the Committee was satisfied on the evidence that she knew that she was obtaining the oxytetracycline and the flucloxacillin without authorisation, and dishonestly.</p> <p>The Committee was further satisfied that ordinary decent people would regard Mrs Faloono's actions as found proved in Charge 1 to be</p>



	<p>dishonest.</p> <p>Charge 2 relates to Mrs Falooona's obtaining of the oxytetracycline and the flucloxacillin for purposes other than for use at the Practice. In considering her state of mind at the time, the Committee again consider the evidence of the steps that she took to make the orders for medication look like they were being procured for use at the Practice. This included maintaining references to Person A and the Practice on the orders, even when other details were changed. The Committee was satisfied that Mrs Falooona did these things to avoid detection.</p> <p>The Committee was further satisfied that in the minds of ordinary decent people Mrs Falooona's actions as found proved at Charge 2 would be viewed as dishonest.</p>
5.	<p><i>Your conduct as set out in Charge 3 was:</i></p>
5.a	<p><i>Misleading;</i></p> <p><b>Found not proved.</b></p> <p>The Committee accepted the evidence of Person A, as set out in her witness statement that shortly after 10am on 8 December 2020, she received the email from Mrs Falooona attaching the self-referral letter that Mrs Falooona had composed and addressed to the GDC, also dated 8 December 2020. The Committee considered it unclear from Person A's oral evidence whether, having received the self-referral letter, she believed that Mrs Falooona had already sent the letter to the GDC or that Mrs Falooona intended to do so.</p> <p>The Committee also took into account that in her covering email to Person A on 8 December 2020, Mrs Falooona simply states "...attached is a copy of my letter to the GDC". She does not indicate whether or not the letter has yet been sent to the Council.</p> <p>Taking all of this into account, the Committee was not satisfied that there is sufficient evidence to prove on the balance of probabilities that Person A or anyone else was misled by Mrs Falooona providing a copy of a self-referral letter to Person A. It was the view of the Committee that the GDC has not discharged its burden of proof in relation to this allegation.</p>
5.b	<p><i>Dishonest, in that you knew you had not made a self-referral to the General Dental Council.</i></p> <p><b>Found not proved.</b></p> <p>The Committee received no evidence as to Mrs Falooona's intention regarding her self-referral letter. As stated in the Committee's findings at 5a, Mrs Falooona does not indicate whether the letter has yet been sent to</p>



the GDC.

Furthermore, the Committee received no evidence, one way or another, regarding the sending of the self-referral letter by Mrs Faloona to the GDC. It did, however, consider significant the evidence that there may have been issues with the GDC receiving letters from Person A around December 2020 and January 2021 due to issues with the post. It was Person A's evidence that she sent at least two letters to the Council by post, but the evidence, as confirmed by Witness B, is that only one letter from Person A appears on the GDC's system. The Committee concluded that it could not safely infer that Mrs Faloona's letter was not sent on the sole basis that it does not appear on the GDC's electronic filing system.

In all the circumstances, the Committee concluded that the GDC had not provided sufficient evidence to prove this head of charge to the requisite standard.

We move to Stage Two.”

On 12 January 2023, the Chairman announced the determination as follows:

“This is a Professional Conduct Committee hearing in respect of Mrs Faloona. The hearing is being held remotely by Microsoft Teams video-link.

Mrs Faloona is neither present nor represented. The Case Presenter for the General Dental Council (GDC) is Ms Lucy Sweetland, Counsel.

### **The facts found proved**

At the first stage of the hearing, the Committee found proved that, whilst employed as a Practice Manager at a dental practice ('the Practice'), Mrs Faloona, a registered dental nurse, obtained the prescription only medications oxytetracycline and/or flucloxacillin on five separate occasions, using the details of her employer, Person A, without Person A's knowledge. Person A is a registered dentist and was, at the material times, the owner, and Practice Principal.

Mrs Faloona obtained the medications for purposes other than for use at the Practice. In a letter she sent to Person A, dated 8 December 2020, Mrs Faloona admitted that she had been “*fraudulently obtaining medication without the knowledge of my employer...*” and also stated that the medication was for the personal use of a close relative with a long-term medical condition.

The Committee determined that Mrs Faloona's conduct in obtaining the medication using the details of Person A without her knowledge, and for purposes other than for use at the Practice, was misleading and dishonest.

### **This stage of the hearing**

The Committee's tasks at this second stage of the hearing have been to consider whether the facts found proved against Mrs Faloon amount to misconduct and, if so, whether her fitness to practise is currently impaired by reason of that misconduct. The Committee noted that if it found current impairment, it would need to consider the issue of sanction.

The Committee considered all the evidence presented to it at the fact-finding stage. It received no further evidence at this stage of the hearing. The Committee took account of the submissions made by Ms Sweetland in relation to misconduct, impairment, and sanction. It accepted the advice of the Legal Adviser. It noted that there is no burden or standard of proof at this stage of the proceedings, and that its decisions were for its independent judgement.

### **Summary of the GDC's submissions**

It was Ms Sweetland's submission in relation to the issue of misconduct, that Mrs Faloon clearly breached two specific standards from the GDC's '*Standards for the Dental Team*' (Effective from September 2013) ('the GDC Standards'). Ms Sweetland referred the Committee to Standard 1.3, which states, "*You must be honest and act with integrity*". She also highlighted Standard 9.1, which states, "*Ensure that your conduct, both at work and in your personal life, justifies patients' trust in you and the public's trust in the dental profession*"

Ms Sweetland submitted that Mrs Faloon had deceived her employer, who was also a colleague and a friend, in order to falsely obtain large quantities of prescription medication, and that she did so over a significant period of time. Ms Sweetland stated that this was serious and that it was conduct that fell far short of that expected of a registered dental professional.

In relation to impairment, it was Ms Sweetland submission that Mrs Faloon's fitness to practise is currently impaired on both the grounds of public protection and the wider public interest. She highlighted that the medication obtained by Mrs Faloon was only to be prescribed by a suitably qualified prescriber, and that Mrs Faloon would have known this. Further, that she would have known that she was providing the medication to someone outside of those safeguards, which was plainly inappropriate.

Ms Sweetland submitted that a lack of honesty and integrity are hard to remediate. She stated that in any event there was no evidence before the Committee of any remediation that had been undertaken by Mrs Faloon. Ms Sweetland submitted that it was unknown what Mrs Faloon had been doing in the last two years.

Whilst Ms Sweetland acknowledged Mrs Faloon's admissions in her letter sent to Person A dated 8 December 2020, as well as Mrs Faloon's expression of remorse, she asked the Committee to take into account that the letter was written after Mrs Faloon's actions had been discovered. Ms Sweetland maintained that there

was no real evidence before the Committee of any recognition by Mrs Faloono of her actions or how she has sought to make amends. Therefore, Ms Sweetland submitted, there was a risk of repetition. Ms Sweetland stated that in light of the facts found proved, and the lack of any meaningful engagement by Mrs Faloono, public confidence in the dental profession and the regulator would be undermined if a finding of impairment were not made in the circumstances.

In addressing the Committee on the issue of sanction, Ms Sweetland referred the Committee to the '*Guidance for the Practice Committees including Indicative Sanctions Guidance*' (Effective from October 2016; last reviewed December 2020), and she outlined what she considered to be the aggravating features in this case. She also highlighted factors in mitigation, including that Mrs Faloono has no fitness to practise history.

It was Ms Sweetland's submission on behalf of the GDC that the appropriate and proportionate sanction was erasure, as the facts found proved reflected a serious departure from the standards, an abuse of a position of trust, and serious dishonesty.

### **Decision on misconduct**

The Committee considered whether the facts found proved against Mrs Faloono amount to misconduct. It took into account that a finding of misconduct in the regulatory context requires a serious falling short of the professional standards expected of a registered dental professional. The Committee had regard to the GDC Standards, and it was satisfied that the following Standards are engaged in this case:

- 1.3 You must be honest and act with integrity.
  - 1.3.1 You must justify the trust that patients, the public and your colleagues place in you by always acting honestly and fairly in your dealings with them. This applies to any business or education activities in which you are involved as well as to your professional dealings.
  - 1.3.2 You must make sure you do not bring the profession into disrepute.
- 9.1 Ensure that your conduct, both at work and in your personal life, justifies patients' trust in you and the public's trust in the dental profession.

The Committee considered that Mrs Faloono's behaviour, as highlighted in the facts found proved, fell far short of the above GDC Standards set by her regulatory body. There are strict rules governing prescription only medications, and the ability to prescribe and supply them is restricted to suitably qualified prescribers. In the Committee's view, in acting as she did, Mrs Faloono demonstrated a complete disregard for the safeguards surrounding prescription medication. She also placed the person to whom she said she was providing the medication at risk of harm, given that she was doing so outside of her remit as a dental nurse and Practice Manager.

The Committee also took into account that Mrs Faloono's behaviour continued over a prolonged period of time, and that she made real efforts to conceal her wrongdoing.

She dishonestly exploited her position of trust within the Practice, as well as the trust placed in her by her employer, Person A.

It was the view of the Committee that members of the public would not expect someone that was in Mrs Faloon's position, as a registered dental nurse and as the Practice Manager, to do what she did. The Committee further considered that fellow members of the dental profession would regard Mrs Faloon's behaviour to be deplorable.

In all the circumstances, the Committee determined that the facts found proved against Mrs Faloon amount to misconduct.

### **Decision on impairment**

The Committee next considered whether Mrs Faloon's fitness to practise is currently impaired by reason of her misconduct. It had regard to the over-arching objective of the GDC, which is: the protection, promotion and maintenance of the health, safety, and well-being of the public; the promotion and maintenance of public confidence in the dental profession; and the promotion and maintenance of proper professional standards and conduct for the members of the dental profession.

The Committee had regard to the seriousness of the findings made in this case. Mrs Faloon endangered the health of another by supplying them with prescription only medication which she was not suitably qualified to provide. The Committee also took into account that dishonesty is a characteristic that is difficult to remedy. Notwithstanding this, the Committee considered whether there was any evidence before it to indicate that Mrs Faloon had addressed the serious concerns raised.

In its considerations, the Committee had regard to the letter that Mrs Faloon sent to Person A dated 8 December 2020, in which Mrs Faloon admitted to fraudulently obtaining medication. The Committee noted that in that letter, Mrs Faloon also expressed regret for her actions, and she appeared to be open about why she had obtained the medication, and to whom she had provided it. However, the Committee took into account that it received no evidence to support her claim that the medication was for a close relative with a health issue. The Committee also remained mindful that Mrs Faloon sent the letter to Person A after she had been confronted about her actions. It further took into account that shortly before sending the letter to Person A, Mrs Faloon had continued to try to conceal her dishonesty by changing the email address on the Practice's account with the Supplier of the medications.

The Committee noted that there has been no evidence in the intervening time in respect of Mrs Faloon's insight into her misconduct, or in respect of any remediation that she has undertaken. In fact, Mrs Faloon has not engaged meaningfully with the GDC's fitness to practise process. The most recent correspondence from her was her email of 30 November 2022 regarding her attendance at this hearing, in which she stated that *"I wish nothing more to do with the gdc had enough of them. I have left dentistry given up my registration. Don't know what more they want"*.

The Committee considered that there was a risk of harm to whoever Mrs Faloono supplied medication to, given that Mrs Faloono did not have the requisite knowledge or qualification to supply prescription only medication. In the absence of any current evidence regarding Mrs Faloono's level of insight, and the lack of any evidence to suggest that she has sought to address the concerns raised in this case, the Committee concluded that there is a risk of repetition. The Committee received little evidence to reassure it that she would not in the future seek to exploit her status as a registered dental care professional. The Committee considered that if Mrs Faloono were to repeat her misconduct, there would be a risk of harm to the public on account of her reckless disregard for the governance around medication. Accordingly, the Committee determined that a finding of impairment is necessary for the protection of the public.

The Committee also determined that such a finding is in the wider public interest. Mrs Faloono breached fundamental GDC Standards, including the requirement to act honestly and with integrity. Her dishonesty was directly linked to her professional practice, involving the exploitation of her role at the Practice, as well as a breach of trust placed in her by Person A. The Committee also took into account the willingness with which Mrs Faloono bypassed the systems in place to safeguard the public in terms of prescription medications. In all the circumstances, the Committee concluded that public confidence in the dental profession would be seriously undermined if a finding of impairment were not made. It also considered that a finding of impairment is required to declare and uphold proper professional standards.

The Committee therefore determined that Mrs Faloono's fitness to practise is currently impaired by reason of her misconduct.

### **Decision on sanction**

The Committee considered what sanction, if any, to impose on Mrs Faloono's registration. It noted that the purpose of any sanction is not to be punitive, although it may have that effect, but to protect patients and the wider public interest. In reaching its decision, the Committee had regard to the '*Guidance for the Practice Committees including Indicative Sanctions Guidance*' (Effective from October 2016; last reviewed December 2020) ('the Guidance'). It applied the principle of proportionality, balancing the public interest with Mrs Faloono's interests.

The Committee first considered whether to conclude this case without taking any action in relation to Mrs Faloono's registration. It decided, however, that such a course would be wholly inappropriate given the seriousness of its findings and the identified risk of repetition. Taking no action would not serve to protect the public, nor would it uphold the wider public interest.

The Committee next considered whether to issue Mrs Faloono with a reprimand. It had regard to the Guidance at paragraph 6.9, which lists factors relevant to imposing this sanction. The Committee took into account Mrs Faloono has no fitness to

practise history, and that she did express remorse in her letter to Person A dated 8 December 2020. However, given the serious nature of Mrs Faloon's misconduct, which was repeated and prolonged, and its assessment that Mrs Faloon poses an ongoing danger to the public, the Committee decided that a reprimand would not be appropriate. It took into account that a reprimand would not impose any restriction on Mrs Faloon's registration, and therefore would not be sufficient to protect the public, nor would such a sanction, in the Committee's view, satisfy the wider public interest.

The Committee went on to consider whether to impose conditions on Mrs Faloon's registration. It reminded itself that conditions need to be workable, measurable, and enforceable. Given the nature of the misconduct found, which includes serious dishonesty that persisted over a protected period of time, with real efforts to cover up the wrongdoing, the Committee decided that conditional registration would not be appropriate or proportionate. It concluded that it could not formulate any conditions that would address the serious concerns in this case to afford the necessary protection to the public and the wider public interest. In any event, as Mrs Faloon has not engaged meaningfully with the fitness to practise process, and therefore the Committee could not be confident that she would comply with conditions even if they could be imposed.

Accordingly, the Committee considered whether to suspend Mrs Faloon's registration for a specified period. In doing so, it had regard to the Guidance at paragraph 6.28, which outlines factors to be considered when deciding whether the sanction of suspension in more serious cases may be appropriate. The Committee considered that the following factors relevant to a suspension applied in this case, namely that:

- there is evidence of repetition of the behaviour, in that Mrs Faloon's behaviour was repeated over a number of years;
- Mrs Faloon has not shown sufficient insight and she poses a significant risk of repeating her behaviour;
- patients' interests would be insufficiently protected by a lesser sanction; and
- public confidence in the profession would be insufficiently protected by a lesser sanction.

However, the Committee considered that there is also evidence in this case of harmful deep-seated professional attitudinal problems which, as stated in paragraph 6.28, "*might make erasure the appropriate order*". The Committee was seriously concerned about the nature and gravity of Mrs Faloon's misconduct, which was linked to her practice, and which persisted over a significant period of time.

In the circumstances, the Committee had regard to paragraph 6.34 of the Guidance which deals with the sanction of erasure. It noted that a number of the factors for erasure are present in this case, namely that:

- there has been a serious departure(s) from the relevant professional standards;
- a continuing risk of serious harm to the public has been identified;
- there has been an abuse of a position of trust, in that Mrs Faloono exploited her role at the Practice, as well as her registration and the registration of Person A;
- there has been serious dishonesty, which was persistent and covered up; and
- Mrs Faloono has demonstrated a persistent lack of insight into the seriousness of her actions or their consequences.

It was the judgement of the Committee that erasure is necessary and proportionate to protect members of the public and the wider public interest, and that the suspension of Mrs Faloono's registration would not be sufficient. It came to this conclusion having considered the existence of the factors above from paragraph 6.34 of the Guidance in this case.

In deciding against the sanction of suspension, the Committee carefully considered the potential consequences for Mrs Faloono of the erasure of her name from the Register of Dental Care Professionals. It is a serious matter to deny Mrs Faloono the ability to work in a profession in which she is qualified.

However, this is a case in which serious findings have been made relating to Mrs Faloono's honesty and integrity as a dental professional, and on the evidence before it, the Committee is concerned that there are deep-seated issues around her professional attitude. It has been provided with nothing to suggest that those issues have been resolved and it has identified a risk of repetition. In her last communication in November 2022, Mrs Faloono's response in relation to these proceedings was that she did not want to have anything more to do with the GDC.

Taking all of the circumstances of this case into account, the Committee concluded that Mrs Faloono's behaviour, in the absence of meaningful reflection, insight or remediation, is fundamentally incompatible with being a dental professional. It therefore determined that the only appropriate and proportionate sanction is that of erasure.

The Committee now invites submissions from Ms Sweetland as to whether an immediate order of suspension should be imposed on Mrs Faloono's registration to cover the 28-day appeal period, pending its substantive determination for erasure taking effect."

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"The Committee has made a substantive direction in this case and therefore the interim order currently in place on Mrs Faloono's registration is hereby revoked.

In reaching its decision on whether to impose an immediate order of suspension on Mrs Faloona's registration until the substantive direction for erasure takes effect, the Committee took account of the submission made by Ms Sweetland that such an order should be imposed. It accepted the advice of the Legal Adviser.

The Committee determined that it is necessary for the protection of the public, and is otherwise in the public interest, to impose an immediate order of suspension on Mrs Faloona's registration. In its substantive determination, the Committee has identified a real risk of harm to the public if Mrs Faloona is able to continue practising without any restriction. In the circumstances, it considered that it would be inappropriate and inconsistent to allow Mrs Faloona the opportunity to remain in unrestricted practice over the 28-day appeal period, or possibly longer, in the event of an appeal. An immediate order is therefore necessary for the protection of the public.

The Committee also considered that the imposition of an immediate order is in the wider public interest. It has determined that Mrs Faloona behaviour, as highlighted in this case, is fundamentally incompatible with continued GDC registration. The Committee considered that public confidence in the dental profession and this regulatory process would be seriously undermined in the absence of an order suspending Mrs Faloona's registration immediately.

The effect of the foregoing substantive determination and this order is that Mrs Faloona's registration will be suspended to cover the appeal period. Unless she exercises her right of appeal, the substantive direction for erasure will take effect 28 days from the date of deemed service. Should Mrs Faloona exercise her right of appeal, this immediate order will remain in place until the resolution of the appeal.

That concludes this determination."