

**Professional Conduct Committee  
Review Hearing****24 April 2024****Name:** NOTTA SINGH, Gurpreet**Registration number:** 150378

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**General Dental Council:** Sarah Barker IHLPS.**Registrant:** Unrepresented

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**Fitness to practise:** Impaired by reason of misconduct**Outcome:** Suspension extended (with a review)**Duration:** 12 months

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**Committee members:** Edythe Murie (Chair and Lay member)  
Laura Owen (DCP member)  
Hemash Shah (Dentist member)**Legal adviser:** William Hoskins**Committee Secretary:** Gurjeet Dhuper

1. This is a resumed hearing before the Professional Conduct Committee (PCC) pursuant to section 27C of the *Dentists Act 1984 (as amended)* ('the Act').
2. The purpose of this hearing has been for the Committee to review Mr Notta's case and determine what action should be taken in relation to his registration. Neither party is participating in today's hearing, following a request by the GDC for the review to be conducted on the papers.
3. The Committee first considered the issues of service and whether to proceed with the hearing in the absence of Mr Notta. The Committee accepted the advice of the Legal Adviser on these matters.

### **Decision on service**

4. The Committee considered whether notice of the hearing had been served on Mr Notta in accordance with Rules 28 and 65 of the *General Dental Council (Fitness to Practise) Rules 2006 Order of Council* ('the Rules').
5. The Committee received from the GDC an indexed hearing bundle of 62 pages. The bundle contained a copy of the Notice of Hearing dated 11 March 2024 ('the notice'), which was sent to Mr Notta's registered address. A copy of the notice was also sent to him by email. 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. It noted from the associated Royal Mail 'Track and Trace' receipt, also within the hearing bundle, that the notice letter had been delivered on 13 March 2024 and was signed for by "NOTTA".
6. The Committee was satisfied that the notice sent to Mr Notta complied with the required 28 day notice period. It was also satisfied that it contained proper notification of today's hearing, including its date and time, as well as confirmation that the hearing would be held remotely via Microsoft Teams. Mr Notta was further notified that the Committee had the power to proceed with the hearing in his absence.
7. On the basis of all the information provided, the Committee was satisfied that notice of the hearing had been served on Mr Notta in accordance with the Rules and the Act.

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

8. The Committee next considered whether to exercise its discretion under Rule 54 to proceed with the hearing in the absence of Mr Notta. 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 explained in the case of *General Medical Council v Adeogba [2016] EWCA Civ 162*. The Committee remained mindful of the need to be fair to both Mr Notta and the GDC, taking into account the public interest in the expeditious review of this case.

9. The Committee noted from the Notification of Hearing letter of 11 March 2024 that Mr Notta was asked to confirm by 25 March 2024, if there is any reason why this hearing should not proceed on the papers. However, Mr Notta has not provided a reason for his non-attendance, nor has he requested an adjournment. It further noted that the GDC made further attempts to contact Mr Notta by email and telephone, however the emails to Mr Notta were returned as undeliverable and the contact number held for Mr Notta did not ring or transfer to voicemail, but instead showed as unavailable.
10. The Committee therefore concluded that Mr Notta has voluntarily absented himself from today's proceedings. The Committee noted there was no information before it to indicate that an adjournment was likely to secure his attendance on a future date. It noted that Mr Notta did not engage with his previous review hearing in May 2023.
11. In all the circumstances, the Committee determined that it was fair and in the public interest to proceed with the hearing in the absence of Mr Notta and on the papers.

### **Background to Mr Notta's case**

12. On 17 November 2021, the PCC found Mr Notta's fitness to practise to be impaired by reason of misconduct and directed that his registration be suspended for a period of six months with a review. A summary of the findings made by that initial PCC is as follows:

*"The initial PCC found that there were multiple failings in your clinical practice. These failings were repeated on several patients, and occurred over several years. In particular, the initial PCC found in relation to three patients, that you had failed to tell them that their permanent dentures were the same, lesser quality as temporary dentures, and that this failing was misleading and dishonest. The initial PCC also found that you had failed to quality grade radiographs in respect of two patients.*

*The initial PCC found multiple failings in your record keeping, including failing to record discussions with patients about treatment options and the risks and benefits of treatment.*

*The initial PCC found that in February 2018, you knowingly utilised a chairside assistant whose scope of practice did not permit him to undertake the role.*

*The initial PCC found that you practised without adequate indemnity insurance on two occasions, in December 2016 and February 2017, when treating UK patients in India for dental implants.*

*The initial PCC found that you had permitted or caused to be published an advertisement for dental implant treatment in the Solihull Observer on or around 19 May 2016 stating, "success rates > 99%", which was misleading and dishonest.*

*The initial PCC determined that the facts found proved against you amounted to misconduct. In its determination of 17 November 2021, with reference to a number of the GDC's Standards for the Dental Team (September 2013), that Committee stated the following:*

*The Committee considered your clinical failings to have fallen far below the standard reasonably expected of you, save for your record-keeping failings, where the expert opinion evidence was that these fell below (rather than far below) that standard. Your clinical failings were wide-ranging and occurred over an extended period and included breaches of statutory requirements in respect of radiography. They represented clear breaches of the above quoted standards and the Committee determined that the breaches were serious and met the threshold of misconduct.*

*The Committee considered your practising without indemnity, your dishonesty towards patients in respect of the quality of the dentures you were providing to them and your dishonesty in respect of your advertised success rate for the dental implant treatment to be serious breaches of fundamental tenets of the profession which in themselves each clearly meet the threshold of misconduct.*

*Likewise, the Committee considered your performing surgery on a patient with a chairside assistant whose scope of practice did not permit him to undertake that role to be a serious breach of a fundamental tenet of the profession which clearly meets the threshold of misconduct. You were not treating the patient as an out of hours emergency and there were no other exceptional circumstances which would have justified your failure to have worked with another appropriate trained member of the dental team.*

*Accordingly, the Committee determined that the facts found proved amount to misconduct.*

*The initial PCC further determined that your fitness to practise was impaired by reason of your misconduct. It stated in its determination of 17 November 2021 that:*

*There is evidence of diligent and accelerated attempts by you to address your clinical failings following the announcement of the Committee's findings of fact in March 2021. The reports and oral evidence of both ..., your workplace supervisor and your professional mentor respectively, are positive and reassuring. They both spoke of your firm commitment to addressing your clinical failings and of a positive attitude which you have maintained in respect of this.*

*...*

*The Committee also had regard to the positive testimonials you provided from colleagues and professional peers in support of your character and performance as a dentist.*

*The Committee is encouraged by the evidence you have provided of your remediation in respect of your clinical failings. You demonstrate good insight and are on the path towards full remediation. In the Committee's judgement, further periods of workplace supervision and mentorship would be necessary for you to complete your remediation and to demonstrate embedded improvement in practice, owing to much of your remediation having only been undertaken over the past several months.*

*At this stage there remains a real risk of repetition of your clinical failings should you be allowed to practise without restriction.*

*In the Committee's judgement, your reflections and evidence of remediation did not go so far as to demonstrate a full understanding and appreciation of your dishonesty. You deeply*

*regret the way in which you had behaved. You acknowledge that it was wrong and you recognise the wider impact your dishonesty has on patient trust in their clinician.*

*However, you do not appear to go so far as to recognise and accept your thought processes at the time as having been dishonest. You instead placed much reliance on the difficult personal circumstances and pressures you were under and appeared to characterise your dishonesty more as being inadvertent or technical in nature, rather than as the result of thought processes by you. Accordingly, you only demonstrate limited insight into your dishonesty at this stage.*

*You also did not demonstrate to the Committee any clear understanding of the seriousness and inappropriateness of performing surgery on a patient with chairside assistance from a person who was neither trained nor qualified to provide such assistance. You did not express any clear understanding of the clinical risks you exposed both the patient and the chairside assistant to in those circumstances in addition to the professional risks you exposed the chairside assistant to by causing him to work beyond his Scope of Practice as a dental technician. You did not express any clear understanding of the fundamental importance of only working with appropriately trained members of the dental team.*

*The Committee was also concerned that you do not presently demonstrate that you appreciate the gravity of treating patients when you knew you were not properly indemnified for those aspects of the treatment undertaken overseas.*

*The Committee determined that your fitness to practise as a dentist is currently impaired by reason of your clinical failings, your dishonesty, your practising without indemnity and your having performed surgery on a patient without chairside assistance from an appropriately member of the dental team. You are yet to demonstrate full remediation into these matters and there therefore remains a risk of repetition. Further, public confidence in the profession and this regulatory process also requires a finding of current impairment owing to the seriousness of your misconduct.*

*The initial PCC determined to impose an order of suspension on your registration for a period of six months. In directing a review of the order shortly before its expiry, that Committee stated:*

*The reviewing Committee may be assisted by evidence of the continuing steps you have taken towards your remediation and evidence that you have fully reflected upon and understood the risks of performing surgery on a patient with a chairside assistant whose Scope of Practice did not permit him to undertake that role."*

### **First review of the order 6 June 2022**

13. In June 2021 the first review of the order was held. Mr Notta attended the hearing and was legally represented. The reviewing PCC at that time determined:

*"The Committee was satisfied, having considered all of the evidence provided, that you have undertaken a considerable amount of work towards addressing the attitudinal concerns*

*raised by the initial PCC, including your dishonesty. The Committee took into account that such concerns are not easily remediable. However, it was satisfied from your reflections, and from the testimonials attesting to a change in your mindset, that you have remedied your past attitudinal issues. The Committee considered that you have now demonstrated an appreciation and understanding of your past behaviour and attitude. Given the evidence of your extensive insight, the Committee considered it unlikely that you would repeat the attitudinal element of your misconduct. It also considered that the wider public had been served by the suspension of your registration. In all the circumstances, the Committee was satisfied that your fitness to practise is no longer impaired on account of the attitudinal concerns.*

*However, the Committee was not satisfied that you have discharged the persuasive burden in relation to the clinical aspects of this case. The Committee acknowledged your written reflections in relation to the identified shortcomings in your clinical practice, as well as the information in the testimonials from those who have continued to work with and support you over the period of your suspension. Whilst the Committee was satisfied from this evidence that you have worked hard to accept and address your clinical failings, which has included putting significant thought into mechanisms and safeguards to prevent recurrence, there is no evidence to show how your learning and reflection has been embedded into your practice. The Committee accepted that this has not been possible because of your suspension, and that this is no fault of your own. Nonetheless, the reality is that there is insufficient evidence before the Committee to reassure it that patients would not be put at risk if you were to return to unrestricted clinical practice. Accordingly, the Committee decided that a finding of impairment is necessary for the protection of the public.*

*The Committee also considered the wider public interest in the context of your clinical failings. In its view, public confidence in the dental profession would be undermined if a finding of impairment were not made, given the absence of any evidence of how your remediation has been incorporated into your practice.*

*In all the circumstances, the Committee determined that your fitness to practise remains impaired by reason of your misconduct, specifically in relation to the clinical concerns that were identified by the initial PCC."*

14. The PCC determined to terminate the order of suspension and replace with conditions for a period of 12 months with a review.

### **Second review of the order 3 May 2023**

15. In May 2023 the second review of the order was held. Mr Notta did not attend that hearing nor was he legally represented on his behalf. The hearing proceeded in his absence. At that hearing the PCC determined:

*"The Committee first determined that Mr Notta's fitness to practise continues to be impaired by reason of misconduct. As identified at the last review, the probity and attitudinal aspects of his misconduct have been remedied but the clinical matters remain outstanding, as Mr*



*Notta is yet to implement his learning into his clinical work and to demonstrate any embedded improvement in practice. The clinical matters are fully remediable through evidence of continued learning, audit and satisfactory supervised practice, as provided for within the structured framework of the conditions which were set by the last reviewing Committee. However, Mr Notta has not complied with those conditions. There is no evidence that he has in fact resumed clinical work following the suspension of his registration by the initial PCC in November 2021. There was no record before the Committee of any of the audits required under the conditions and no supervisory reports are available to the Committee. The evidence before the Committee is that Mr Notta had decided to leave the profession in September 2022 and there has been no engagement from him with his workplace supervisor since that time and only very limited engagement with the GDC which ceased after the telephone call on 31 October 2022. In those circumstances, he demonstrates no evidence of any remediation of the outstanding clinical matters and there remains a significant risk of repetition of his clinical failings should Mr Notta be allowed to resume unrestricted practice. There would therefore be a real risk of harm to the public and public confidence in the profession and its regulation would be undermined if no finding of continued impairment were to be made.*

*Accordingly, the Committee determined that Mr Notta's fitness to practise continues to be impaired by reason of misconduct."*

16. At that hearing the PCC directed that the period of conditional registration be terminated and replaced with a period of suspension for 12 months with a review. The Committee stated:

*"This maximum period of suspension prior to review is appropriate as there was nothing to indicate to the Committee that there would be any engagement from Mr Notta or evidence of remediation from him in the intervening period.*

*Mr Notta is encouraged to re-engage in the proceedings. If he does not do so, then the reviewing Committee is unlikely to be in any different a position to the Committee today and may decide to further extend the period of suspension."*

### **Today's review**

17. Today is the third review of the PCC substantive order. In comprehensively reviewing this case today, the Committee took account of the written submissions provided by the GDC. No written submissions or any other material were received on behalf of Mr Notta. It accepted the advice of the Legal Adviser.
18. In its written submissions, the GDC submits that there has been no material change since the last review hearing and that Mr Notta's fitness to practise remains currently impaired by reason of his misconduct. In relation to sanction, the GDC submitted that it would be appropriate and proportionate to consider extending the order of suspension for 12 months with a review.

### **Current Impairment**

19. In considering whether Mr Notta's fitness to practise is currently impaired by reason of his misconduct the Committee has borne in mind that this is a matter for its own independent judgement. It has also had regard to its duty to protect the public, to declare and uphold proper standards of conduct and competence and to maintain public confidence in the profession. The Committee bore in mind that at a review hearing the onus is on a registrant to demonstrate that their fitness to practise is no longer impaired.
20. The Committee considered that there has been no evidence of material change since the last review hearing in May 2023. There is no evidence before this Committee that Mr Notta has addressed his past misconduct and provided any evidence of remediation. It also took account of the fact that Mr Notta is unrepresented and accepted that this process may be challenging for him. However, the Committee was of the view that it is incumbent on Mr Notta, as a GDC registrant, to engage with his regulator and provide evidence of remediation. The Committee considered that Mr Notta has not demonstrated sufficient insight into his misconduct.
21. Given its concerns regarding Mr Notta's lack of insight and incomplete remediation the Committee determined that a finding of current impairment is required to protect patients. The Committee was of the view that a finding of current impairment was also in the public interest in order to maintain public confidence and uphold the standards of the profession. It was also of the view that a fully informed member of the public aware of the initial findings made would be concerned if a finding of current impairment was not made.
22. The Committee therefore determined that Mr Notta's fitness to practise remained currently impaired by reason of his misconduct as found in November 2021.

### **Sanction**

23. The Committee next considered what direction, if any, to make. It has had regard to the GDC's "Guidance for the Practice Committees including Indicative Sanctions Guidance" (Effective October 2016, revised December 2020).
24. The Committee has borne in mind the principle of proportionality, balancing the public interest against Mr Notta's own interests. The public interest includes the protection of the public, the maintenance of public confidence in the profession, and declaring and upholding proper standards of conduct and performance within the profession.
25. The Committee first considered whether it would be appropriate to allow the current order to lapse at its expiry or to terminate it with immediate effect. Given Mr Notta's lack of engagement with the GDC, his incomplete remediation and lack of insight into his misconduct the Committee has concluded that it would not be appropriate to terminate the current order or to allow it to lapse.
26. The Committee considered whether to replace the current order of suspension with an order of conditions. However, it had regard to the evidence of his lack of insight and his ongoing lack of engagement with the regulatory process, including this hearing today. The Committee



does not have confidence in Mr Notta complying with conditions. In these circumstances, the Committee has concluded that replacing the suspension order with a conditions of practice order would not be workable or appropriate.

27. In all the circumstances, the Committee has determined to extend the current suspension order on Mr Notta's registration for a period of 12 months with a review. In deciding on the period, the Committee took into account the serious nature of all the facts found proved in this case. It was satisfied that this further period of suspension is required in this case. The Committee considered that a period of 12 months will afford him time to focus on any remediation and engagement with the GDC.
28. A Committee will review Mr Notta's case at a resumed hearing to be held shortly before the end of the period of suspension. That Committee will consider what action to take in relation to his registration. Mr Notta will be informed of the date and time of that resumed hearing.
29. Mr Notta has 28 days, from the date that notice is deemed to have been served upon him, to appeal this Committee's direction. Unless Mr Notta exercises his right of appeal, the current suspension order on his registration will be extended by a period of 12 months. In the event that Mr Notta does exercise his right of appeal, the current suspension order will remain in force until the resolution of the appeal or the next review hearing.
30. That concludes this determination.