

**PUBLIC HEARING
Professional Conduct Committee
Initial Hearing**

11- 15 May 2026

Name: ADOMAVICIUTE, Santa

Registration number: 295751

Case number: CAS-209228-L5H2Z5

General Dental Council: Natalie Bird, Counsel
Instructed by Sarah Barker, IHLPS

Registrant: Present
Represented by Mr Vitalii Morgan

Fitness to practise: Impaired by reason of misconduct

Outcome: Fitness to Practise Impaired. Reprimand Issued

Committee members: Andrea Hammond (Chair and DCP Member)
Nicola Jordan (Dentist Member)
Konrad Chrzanowski (Lay Member)

Legal adviser: Alice Moller

Committee Secretary: Kate Anderson

1. This was a Professional Conduct Committee (PCC) inquiry into the facts which formed the basis of the allegation against you that your fitness to practise is impaired by reason of misconduct.
2. You were present at the hearing and represented by your husband, Mr Vitalii Morgun. Ms Natalie Bird, Counsel, appeared on behalf of the General Dental Council (GDC).
3. The hearing was held remotely on Microsoft Teams.

The Charges

4. The charges in this case are as follows:

“That being registered as a dental care professional:

1. *From approximately 8 July 2021 to 2 August 2023, you have offered and / or provided the Regulated Activity* of surgical procedures for cosmetic purposes, namely thread-lifting treatment, without being registered with the Care Quality Commission (CQC).*
2. *From on or around 12 October 2019, you have offered and / or provided dental blocks and / or local anaesthetic without being registered with the GDC.*
3. *From on or around 8 July 2021, you have offered and / or provided dental blocks and / or local anaesthetic.*
4. *From on or around 15 April 2022, you have advertised training courses to be delivered by yourself regarding the provision of dental blocks and / or local anaesthetic.*
5. *On the following dates, you caused and / or allowed the publication of adverts for Prescription Only Medicines (POM), namely dental blocks and / or local anaesthetic, via your business social media page(s):*
 - a. *12 October 2019; and / or*
 - b. *15 January 2022; and / or*
 - c. *15 April 2022.*
6. *In respect of allegations 5(a) and / or 5(b) and / or 5(c), the subject material posted to your business social media page(s) was in contravention of:*
 - a. *Regulation 284(1) of the Human Medicines Regulations 2012; and / or*
 - b. *the rules and guidelines set by the Advertising Standards Agency.*
7. *In respect of allegations 3, and / or 4 above, you have worked and / or offered to work outside your scope of practice.*
8. *Your actions in respect of allegations 2, and / or 3, and / or 4, and / or 7 above put patients’ safety at risk.*

9. *For a period of time up to and including at least 6 December 2024, you have referred to yourself as an 'Aesthetic Medical Nurse' on your website.*
10. *From on or around 17 December 2024 to on or around 16 April 2025, you have referred to yourself as an 'Aesthetic Dental Nurse' on your website.*
11. *Between 19 December 2024 and 16 January 2025, you failed to comply with the GDC's request for details of your supplier of Prescription Only Medicines (POM), namely, dental blocks.*
12. *Your actions in relation to allegations 1, and / or 2, and / or 3, and / or 4 were misleading, in that members of the public would reasonably expect that what you were advertising, and / or offering, and / or providing was something that you were entitled to deliver and / or provide.*
13. *Your actions in relation to allegation 2 were dishonest, in that, having undertaken dental nurse training between 2019 to 2021, which would have covered the GDC's standards and guidance, including its Scope of Practice guidance, you knew that you were not entitled to offer and / or provide dental blocks and / or local anaesthetic as an unregistered practitioner.*
14. *Your actions in relation to allegation 3 were dishonest, in that, having registered with the GDC as a dental nurse in June 2021, you knew that it was outside the scope of your practice to offer and / or provide dental blocks and / or local anaesthetic.*
15. *Your actions in relation to allegation 4 were dishonest, in that, having registered with the GDC as a dental nurse in June 2021, you knew that it was outside the scope of your practice to offer and / or provide training with regards dental blocks and / or local anaesthetic.*
16. *Your actions in relation to allegations 9, and / or 10 were misleading, in that you held yourself out to members of the public using titles which they might wrongly assume to be GDC-recognised titles.*
17. *Your actions in relation to allegations 1, and / or 2, and / or 3, and / or 4, and / or 9, and / or 10 lacked integrity, in that you put the interests of your aesthetic business over and above your duties as a regulated dental professional.*

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

** Schedule 1, paragraph 6(1)(c), Health and Social Care Act 2008 (Regulated Activities) Regulations 2014*

Your Admissions

5. The Committee heard your admissions to the charges.

6. Mr Morgun, on your behalf, informed the Committee that you admitted charges 1 to 12, and 16.
7. You denied charges 13, 14, 15 in that any of your conduct alleged in the charges was dishonest. You also denied charge 17 that your actions in allegations 1, and/or 2, and/or 3, and/or 4, and/or 9, and/ or 10 lacked integrity, in that you put the interests of your aesthetic business over and above your duties as a regulated dental professional.
8. Having heard your admissions, the Committee accepted them, and in accordance with Rules 17(4) and 17(5) of the GDC (Fitness to Practise) Rules 2006, the Chair of the Committee announced the factual allegations that you had admitted as 'found proved' on the basis of your admissions.

Background to the case and summary of allegations

9. In opening the case for the GDC, Ms Bird provided the Committee with oral submissions of the background of this case. She submitted that you are a registered Dental Nurse, having qualified in 2021. She submitted that the allegations in this case concern you providing treatments for which you are not qualified or registered to do in the UK, and advertising the use of and providing training for local anaesthetic injections for providing dental blocks.
10. Ms Bird submitted that the witness statements and their associated exhibits provide the background to the case. She submitted that there is the evidence of Laura Sprago of the CQC who has provided a signed witness statement and associated exhibits proving that whilst offering aesthetic treatment, you were not registered with the CQC. This investigation led to the GDC becoming aware of your use of dental blocks and or/local anaesthetic, which falls outside the scope of your practice as a registered Dental Nurse.
11. Ms Bird also submitted that the signed witness statement and associated exhibits provided by Jon Richards, ftp caseworker of the GDC, provide screenshots of your website and social media in which you advertised the use and training of dental blocks and/or local anaesthetic, which is out of your scope of practice. Ms Bird also submitted that the GDC had requested you provide information on how you had received local anaesthetic given that a prescription was necessary, but that you had failed to cooperate with the GDC by not providing the name of the supplier.
12. Ms Bird submitted that an expert report had been created by Dr Bland, who has 40 years of dental experience, in which he sets out that having completed your Dental Nursing qualification, you should have known that you could not perform certain treatments out with your scope of practice and therefore the GDC alleges that you were dishonest in your actions.

13. Lastly, Ms Bird submitted that you had advertised yourself as an 'aesthetic medical nurse', as evidenced by the screenshots and signed witness statement of Rabia Bhatti, GDC Paralegal, which you were informed was a title that you could not use. You subsequently amended this to 'aesthetic dental nurse'. You were informed that you were not able to use this title either, and therefore later removed it. Ms Bird submitted that use of these titles was misleading.

Evidence

14. The evidence provided to the Committee by the GDC was both documentary and oral. The documentary evidence comprised of the following:

- Expert report of Dr Robert Ian Bland
- Signed Witness Statement and associated exhibits of Laura Spargo, CQC National Investigation Officer
- Signed Witness Statement and associated exhibits of Donna Davies, GDC Registration Manager
- Signed Witness Statement and associated exhibits of Jon Richards, GDC Fitness to Practise Caseworker
- Signed Witness Statement and associated exhibits of Rabia Bhatti, GDC Paralegal

15. The Committee heard oral evidence from the Professional Expert, Dr Bland.

16. The documentary evidence received by the Committee on your behalf in response to the allegations were:

- a. Signed witness statement by yourself

17. Furthermore, you gave oral evidence at the hearing.

The Committee's findings of fact

18. The Committee considered all the evidence presented to it, both documentary and oral. It took account of the closing submissions made by Ms Bird on behalf of the GDC and those made by Mr Morgun, on your behalf.

19. The Committee accepted the advice of the Legal Adviser, including in relation to the burden and standard of proof, the need to consider the alleged matters separately, the need to have regard to the specific wording of each allegation and how to approach the evidence.

20. In making its findings on the facts, the Committee bore in mind that the burden of proof rests with the GDC. There was no requirement for you to prove anything. Also, that the standard of proof is the civil standard, that is, whether the alleged facts are proved on the balance of probabilities. The Committee has had to decide whether it is more likely than not that the alleged matters are proved.

21. The Committee considered each head of charge separately and made the following findings:

That, being registered as a dental care professional:	
1	<p>From approximately 8 July 2021 to 2 August 2023, you have offered and/or provided the Regulated Activity* of surgical procedures for cosmetic purposes, namely thread-lifting treatment, without being registered with the Care Quality Commission (CQC).</p> <p>Proved by reason of admission</p>
2	<p>From on or around 12 October 2019, you have offered and/or provided dental blocks and/or local anaesthetic without being registered with the GDC.</p> <p>Proved by reason of admission</p>
3	<p>From on or around 8 July 2021, you have offered and/or provided dental blocks and/or local anaesthetic.</p> <p>Proved by reason of admission</p>
4	<p>From on or around 15 April 2022, you have advertised training courses to be delivered by yourself regarding the provision of dental blocks and/or local anaesthetic.</p> <p>Proved by reason of admission</p>
5	<p>On the following dates, you caused and/or allowed the publication of adverts for Prescription Only Medicines (POM), namely dental blocks and/or local anaesthetic, via your business social media page(s):</p>
5a	<p>12 October 2019; and/or</p> <p>Proved by reason of admission</p>
5b	<p>15 January 2022; and/or</p> <p>Proved by reason of admission</p>
5c	<p>15 April 2022.</p> <p>Proved by reason of admission</p>
6	<p>In respect of allegations 5(a) and/or 5(b) and/or 5(c), the subject material posted to your business social media page(s) was in contravention of:</p>
6a	<p>Regulation 284(1) of the Human Medicines Regulations 2012; and/or</p> <p>Proved by reason of admission</p>

6b	<p>the rules and guidelines set by the Advertising Standards Agency.</p> <p>Proved by reason of admission</p>
7	<p>In respect of allegations 3, and/or 4 above, you have worked and/or offered to work outside your scope of practice.</p> <p>Proved by reason of admission</p>
8	<p>Your actions in respect of allegations 2, and/or 3, and/or 4, and /or 7 above put patients' safety at risk.</p> <p>Proved by reason of admission</p>
9	<p>For a period of time up to and including at least 6 December 2024, you have referred to yourself as an 'Aesthetic Medical Nurse' on your website.</p> <p>Proved by reason of admission</p>
10	<p>From on or around 17 December 2024 to on or around 16 April 2025, you have referred to yourself as an 'Aesthetic Dental Nurse' on your website.</p> <p>Proved by reason of admission</p>
11	<p>Between 19 December 2024 and 16 January 2025, you failed to comply with the GDC's request for details of your supplier of Prescription Only Medicines (POM), namely, dental blocks.</p> <p>Proved by reason of admission</p>
12	<p>Your actions in relation to allegations 1, and/or 2, and/or 3, and/or 4 were misleading, in that members of the public would reasonably expect that what you were advertising, and/or offering, and/or providing was something that you were entitled to deliver and/or provide.</p> <p>Proved by reason of admission</p>
13	<p>Your actions in relation to allegation 2 were dishonest, in that, having undertaken dental nurse training between 2019 to 2021, which would have covered the GDC's standards and guidance, including its Scope of Practice guidance, you knew that you were not entitled to offer and/or provide dental blocks and/or local anaesthetic as an unregistered practitioner.</p> <p>Not proved</p> <p>When considering this charge, the Committee referred to the test set out in the case of <i>Ivey v Genting Casinos (UK) Ltd. t/a Crockfords</i> [2017] UKSC 67. It first considered the actual state of your knowledge or belief as to the facts at the time. The Committee then considered whether your conduct would be viewed as dishonest by the objective standards of ordinary and decent people.</p>



The Committee considered the evidence before it, and noted that the GDC had proved that you were enrolled on a dental course during this period and that it was likely that during this course you would have been informed of what was allowed in the scope of practice of a UK Dental Nurse. The Committee accepted Dr Bland's oral evidence that it would have been '*abundantly clear during dental nurse training she was not able to obtain or administer local anaesthetic*'.

The Committee accepted Dr Bland's oral and written evidence, including the contents of his expert report which was not challenged by the registrant.

The Committee accepted your oral and written evidence that you had been trained in the use of local anaesthetic in Lithuania, and that you therefore believed that you were able to perform this procedure in the UK. The Committee accepted that you had consistently stated that your understanding was that dental practice and aesthetic practice were separate, and that you understood that you were not permitted to provide local anaesthetic in the dental setting and therefore had never done so. The Committee considered your accounts to be consistent across both your oral and written evidence, and it was satisfied that this could be relied on in its consideration. The Committee considered that you had failed to check regulations in the UK and had not checked your indemnity insurance in enough detail to read that you were not able to provide dental block and/or local anaesthetic in the UK. The Committee took account of your oral and written evidence that, as soon as you discovered that you were not permitted to provide dental blocks and/or local anaesthetic, you stopped doing so.

The Committee considered whether your conduct was dishonest, judged by the objective standards of ordinary and reasonable people. The Committee concluded that whilst your conduct was reckless and that you may have been negligent in not conducting research into UK regulations, it did not determine that a member of the public would find your conduct to be dishonest. It accepted that you were trained overseas, but that you did not conduct any research to establish whether you could properly administer dental blocks and/or local anaesthetic in the UK. It considered that you had openly advertised the use of dental blocks and/or local anaesthetic online which the Committee considered to be naïve, but did not consider that someone acting dishonestly would be likely to advertise these services so openly. The Committee therefore determined that an objective member of the public who was aware of your state of mind at the time, would assess that you may have been incompetent and/or negligent, but not dishonest.

Taking all of this into account, the Committee determined that the GDC had not discharged the burden on it to prove this charge.

	<p>Accordingly, it finds charge 13 not proved.</p>
14	<p>Your actions in relation to allegation 3 were dishonest, in that, having registered with the GDC as a dental nurse in June 2021, you knew that it was outside the scope of your practice to offer and/or provide dental blocks and/or local anaesthetic.</p> <p>Not proved</p> <p>The Committee determined that for the same reasons as set out above in charge 13, you did not sufficiently check what was in your scope of practice as a Dental Nurse, but that this did not mean that you were dishonest in your conduct.</p> <p>The Committee accepted your evidence that you thought training as a Dental Nurse would give you a better understanding of facial anatomy and would improve your aesthetic practice, not that completing a Dental Nursing qualification would give you the right to provide local anaesthetic. It accepted your consistent account that you believed your overseas training was sufficient to permit you to provide dental blocks and/or local anaesthetic in the UK within the aesthetic field, as opposed to the dental field in which you knew you could not provide local anaesthetic. The Committee considered that you had a genuine belief that you were entitled to provide dental blocks and/or local anaesthetic in the aesthetics field, given your training.</p> <p>Taking all of this into account, the Committee determined that the GDC had not discharged the burden on it to prove this charge.</p> <p>Accordingly, it finds charge 14 not proved.</p>
15	<p>Your actions in relation to allegation 4 were dishonest, in that, having registered with the GDC as a dental nurse in June 2021, you knew that it was outside the scope of your practice to offer and/or provide training with regards dental blocks and/or local anaesthetic.</p> <p>Not proved</p> <p>The Committee once again referred to the test of dishonesty set out in the case of <i>Ivey v Genting Casinos (UK) Ltd. t/a Crockfords</i> [2017] UKSC 67.</p> <p>The Committee considered your state of mind at the time you offered and/or provided training in relation to dental blocks and/or local anaesthetic. It considered the evidence before it and noted that the GDC had provided a picture of you from an advertisement for teaching how to use dental blocks and/or local anaesthetic. The Committee accepted your oral evidence, that the injection shown in this photo was filler, and not anaesthetic as alleged by the GDC. The Committee accepted your evidence that you had a genuine belief that, as you were trained</p>

	<p>overseas, you were entitled to provide training and that you were able to do so. The Committee accepted your oral and written evidence that you did not in fact ever train anyone in providing dental blocks and/or local anaesthetic.</p> <p>The Committee considered whether your conduct was dishonest, judged by the objective standards of ordinary and reasonable people. The Committee once again concluded that whilst you were reckless in not conducting research into UK regulations, it did not determine that a member of the public would find your conduct to be dishonest. It considered that you had openly advertised the use of dental blocks and/or local anaesthetic online because you had a genuine belief that your overseas training gave you the right to offer training in the UK, and that this was therefore not dishonest.</p> <p>The Committee determined that the GDC had not discharged the burden on it to prove this charge. Accordingly, it finds charge 15 not proved.</p>
16	<p>Your actions in relation to allegations 9, and/or 10 were misleading, in that you held yourself out to members of the public using titles which they might wrongly assume to be GDC-recognised titles.</p> <p>Proved by reason of admission</p>
17	<p>Your actions in relation to allegations 1, and/or 2, and/or 3, and/or 4, and/or 9, and/ or 10 lacked integrity, in that you put the interests of your aesthetic business over and above your duties as a regulated dental professional.</p> <p>Not proved</p> <p>The Committee considered that a registrant has a duty to adhere to the professional and ethical standards expected of a registrant, and that practising with integrity is an important standard. It is also important for registered dental professionals to act so as to justify public trust in the profession.</p> <p>It considered each of the charges separately and concluded that your actions in relation to charge 17 suggested an oversight on your part, and an ignorance of the standards expected of a registered dental professional. It noted that the GDC standards include guidance on advertising, both in relation to services and any practising title.</p> <p>Although the Committee considered that your actions were careless or reckless, in breach of relevant standards, the Committee also concluded that the GDC had not demonstrated that your actions were motivated by putting the interests of your aesthetic business over and above your duties as a regulated dental professional.</p> <p>The Committee found your oral and written evidence to be consistent, including in relation to your evidence about your intentions when</p>

providing local anaesthetic and/or dental blocks, and in their advertisement. It accepted that you sought to minimise discomfort to your customers during treatment. The Committee also accepted your evidence that you wished to share knowledge with others.

The Committee took account of evidence that you charged an additional £10 for use of a dental block and/or local anaesthetic. However, the Committee did not consider that £10 was a large sum in the context of the cost of materials to provide a dental block and/or local anaesthetic. The Committee accepted that you may have been providing this treatment in the perceived interest of the customers.

The Committee determined that the GDC had not discharged the burden on it to demonstrate that your actions lacked integrity in that you put the interests of your aesthetic business over and above your duties as a regulated dental professional. Accordingly, it finds this charge not proved.

22. We move to stage two.

Stage 2 Determination

23. Following its announcement of its decision on the facts, the hearing moved to Stage 2. At Stage 2, the Committee considered whether the facts found proved amounted to misconduct and, if so, whether your fitness to practise is currently impaired by reason of your misconduct. If it found that your fitness to practise is impaired, it would consider what sanction, if any, should be imposed.

Documents

24. You provided further documents for this stage of the hearing. This included a level 7 NVQ certificate in aesthetics and Continuing Professional Development (CPD) logs and certificates.

Submissions

25. Ms Bird first addressed the Committee in respect of the findings at stage 1 of this hearing. She said that the allegations in relation to dishonesty and a lack of integrity had been found not proved, and therefore she submitted that the Committee would only be considering the allegations that you had admitted, relating to working out of scope of practice, advertising and not cooperating with the GDC.

26. Ms Bird submitted that if the Committee found misconduct and current impairment of your fitness to practise on public protection grounds, then she would invite the Committee to make an order of suspension. However, if the Committee were to find current impairment on public interest grounds only, Ms Bird submitted that that she would invite the Committee to impose a reprimand on your registration.

27. With regard to misconduct, Ms Bird referred the Committee to the relevant case law and the GDC's *Standards for the Dental Team (2013)*.
28. Ms Bird submitted that your conduct in the facts found proved was in breach of Standards 1.3 and sub-standard 1.3.1, 1.9 and sub-standard 1.9.1, 6.3, 7.2 and sub-standard 7.2.1, 8.1, and 9.4 and the sub standard 9.4.1. Ms Bird submitted that the Committee should consider these standards and the facts found proved together, and not separately in making a finding of misconduct. Ms Bird submitted that the standards breached amount to a risk to the public, a risk of bringing the profession into disrepute, and fell below the standards expected of a dental professional and therefore submitted that your conduct can be properly judged as misconduct.
29. Ms Bird also submitted that in line with sections 37 and 38 of the Dentists Act 1984 (as amended) ("the Act"), your conduct could potentially be considered as illegal practice as you were not allowed to advertise and offer local anaesthetic to customers. Ms Bird submitted that while it was not for the Committee to determine any criminal findings, it could consider this matter.
30. Ms Bird then moved on to the issue of current impairment. She referred to the relevant case law and the GDC's guidance, and submitted that impairment can be considered in two parts: the public protection component and the public interest component.
31. In respect of public protection, Ms Bird submitted that there was a lack of insight into your conduct and insufficient evidence of remediation. Ms Bird submitted that whilst you had told the Committee that you stopped the conduct once you were made aware that it was not permitted within your scope of practice, there was no real evidence of insight and reflection before the Committee and that your insight is developing at best. Ms Bird submitted that whilst you had completed a level 7 NVQ in aesthetics, you did not provide further evidence of CPD and an understanding of GDC and CQC practice, and therefore there was no remediation for the conduct specifically found proved at this hearing. Ms Bird submitted that there was little evidence to suggest that you had a full understanding of GDC standards. Ms Bird therefore submitted that there was a risk of repetition in your conduct which posed a risk to the public. She submitted that your fitness to practise is currently impaired on public protection grounds.
32. In respect of public interest, Ms Bird submitted that even if the Committee were to deem that your conduct did not lead to your fitness to practise being impaired on public protection grounds, a finding of impairment on public interest grounds was firmly required. She submitted that the allegations included probity and patient safety concerns which led to risks in terms of public trust in the profession. Ms Bird submitted that if no finding of impairment was made, there was a real risk that the public confidence in the profession would be undermined. Ms Bird reminded the Committee to consider the overarching objective of the GDC. Ms Bird also submitted that Dr Bland had considered your conduct to fall far below the standards expected of a registered dental professional and that working out of your scope of practise was a serious matter. For these reasons, Ms Bird invited the Committee to make the finding that your fitness to practise is currently impaired on public interest grounds.
33. Ms Bird lastly addressed the Committee on the matter of sanction. Ms Bird referred to the relevant case law and the GDC guidance. She submitted that the Committee must consider proportionality and consider the range of sanctions available to it. Ms Bird

submitted that there were aggravating factors that the Committee must consider including an ongoing risk of harm to the public given your lack of insight and therefore lack of knowledge of the GDC standards, as well as the risk of repetition. She submitted however that there were also mitigating factors to be considered, these being that you do not have an adverse fitness to practise history, your conduct was inadvertent, and English is not your first language. Ms Bird however submitted that your language should be given limited weight as you moved to the UK in 2013 and your language was of good enough standard to complete a Dental Nursing course.

34. Ms Bird submitted that a reprimand was appropriate when the conduct found proved fell on the lower end of the scale of seriousness. She submitted that a reprimand would be appropriate should the Committee find impairment on public interest grounds alone, but that if it were to make a finding on public protection grounds too, this would not be sufficient.
35. Ms Bird submitted that a sanction of conditions would not be appropriate in this case as the risks identified are not able to be addressed by conditions. She submitted that as you were not working in the dental field, it would be questionable whether conditions could be workable. Ms Bird also submitted that while you are currently subject to an interim order of conditions, the Council did not deem this to be appropriate at the substantive stage.
36. Ms Bird lastly submitted that if the Committee were to find that you were impaired on both public interest and public protection grounds, that an order of suspension for 6 months, with a review, would be most appropriate. She submitted that this would allow you time to complete remediation. She submitted that whilst the Committee should consider a sanction of erasure out of completeness, the GDC believed that this would be disproportionate as a sanction of suspension would be sufficient and proportionate to deal with the identified risks.
37. Mr Morgun made submissions on your behalf. He submitted that you accept that you had breached the standards identified by the GDC and accepted that the facts found proved amounted to misconduct. Mr Morgun submitted that you accept that the facts found proved are serious, and that you accept as a registrant that you should have understood the standards and complied with working within your scope of practice. Mr Morgun submitted that the Committee had not found dishonesty or a lack of integrity proved. He also submitted that no patient had been harmed, and no local anaesthetic training had ever been carried out. He submitted that you had believed you were allowed to provide local anaesthetic and training on this, and therefore if the Committee were to find that the facts found proved amount to misconduct, it is due to a mistake and not understanding the GDC standards well enough only.
38. Mr Morgun next referred to the matter of impairment. He submitted that you are not currently impaired. On public protection grounds, Mr Morgun submitted that there is no current risk to the public as you have completed remedial work and gained insight into your conduct. For example, you changed your practising titles, you no longer carry out thread lifts, and you now know that the correct approach is to check UK regulations, and now also understand that dental and aesthetic fields must be approached in the same manner. He also submitted that there were never any patient complaints nor medical emergencies and therefore no actual harm was caused to patients. Mr Morgun submitted that there is no risk of repetition as you now understand your scope of

practice, and in fact you stopped practising out of your scope as soon as you were made aware of the matter. He also submitted that the Committee should consider that you admitted to the allegations and have accepted throughout the hearing that you understand where your conduct fell short of the standards expected.

39. Mr Morgun submitted that you were also not currently impaired on public interest grounds. He submitted that the Committee had not found proved the allegations relating to dishonesty and a lack of integrity, which were more serious than those admitted. He submitted that you had provided consistent evidence that you simply misunderstood your scope of practice, but that you did not try to conceal anything and no patients were ever subject to actual harm. He submitted that you had consistently accepted responsibility for your failures. He therefore submitted that the public interest can be met with no further finding made.
40. Mr Morgun submitted that if the Committee find that you are currently impaired by reason of your misconduct, then it should only impose the least restrictive sanction that would be sufficient and proportionate. He submitted that in this case, a reprimand is sufficient. Mr Morgun submitted that this would publicly mark the seriousness of your conduct, uphold the professional standards, and maintain public confidence in the dental profession. He submitted that this would also avoid a harsher sanction which is disproportionate given that there is no risk to patients. Mr Morgun finally submitted that if the Committee concluded that a reprimand was not sufficient, targeted conditions would be the next most appropriate sanction.

Committee's Decision

41. The Committee has borne in mind that its decisions on misconduct, impairment and sanction are matters for its own independent judgment. There is no burden or standard of proof at this stage of the proceedings. The Committee had regard to the GDC's Guidance document, *'Fitness to Practise: Guidance for the practice committees'* (6 January 2026) (the GDC's Guidance) and the relevant case law. The Committee also received advice from the Legal Adviser which it accepted.

Misconduct

42. The Committee first considered whether the facts found proved amounted to misconduct. In doing so, the Committee had regard to the GDC's publication, *Standards for the dental team* (September 2013).
43. The Committee determined that you had breached the following standards in particular:
- 1.3.3- You must make sure that any advertising, promotional material or other information that you produce is accurate and not misleading, and complies with the GDC's guidance on ethical advertising.*
 - 1.5.3 - You must follow the guidance on medical emergencies and training updates issued by the Resuscitation Council (UK).*

1.9.1 - You must find out about, and follow, laws and regulations affecting your work. This includes, but is not limited to, those relating to:

data protection

employment

human rights and equality

registration with other regulatory bodies.

6.3 - You must delegate and refer appropriately and effectively.

7.2- You must work within your knowledge, skills, professional competence and abilities.

7.2.1- You must only carry out a task or a type of treatment if you are appropriately trained, competent, confident and indemnified. Training can take many different forms. You must be sure that you have undertaken training which is appropriate for you and equips you with the appropriate knowledge and skills to perform a task safely.

8.1- Always put patients' safety first.

44. The Committee considered that your conduct linked to your aesthetic practice had breached the above fundamental standards of dentistry. It took account of your recognition that your conduct had fallen below the standards expected, as submitted by the GDC. The Committee accepted Dr Bland's expert report in which he opined that your conduct fell below the standard expected, including but not limited to the indemnity issues and the risk to patient safety in working out of scope of practice. As a result, the Committee determined that the facts found proved in relation to working out of scope of practice and the advertisement concerns amounted to misconduct. This is because other dental professionals and members of the public would condemn your admitted errors and omissions.

45. The Committee however was not satisfied that your conduct in relation to not providing the GDC with information relating to your supplier of anaesthetic amounted to misconduct. It accepted your consistent evidence that you feared for your safety, so would only be willing to provide the requested information under the condition of anonymity. The Committee was satisfied that you had a reasonable justification for not providing the information requested and had been engaging in the fitness to practise process, and therefore did not conclude that this fact found proved amounted to misconduct.

Impairment

46. The Committee then considered whether your fitness to practise is currently impaired by reason of your misconduct on the grounds of the protection of the public and/or is in the wider public interest.

47. The Committee considered whether your conduct in the past had put patient safety at risk and then considered whether there was a likelihood of repetition. It considered that

you had demonstrated good insight at this hearing: this is because your evidence explained why you had acted as you had, that you now understood that your conduct was wrong, and you had made changes to ensure that your misconduct would not be repeated. The Committee considered your early admissions also indicated insight in relation to advertisements and working out of scope of practice. You accepted that you had failed to uphold standards or maintain confidence in the dental profession and had also put patient safety at risk. The Committee took account of your oral and written evidence, in the context of submissions by Mr Morgun. The Committee accepted that you had shown remorse.

48. The Committee considered whether your conduct was remediable, and bore in mind the changes you have made. It recognised that you stopped working outside scope of practice, without delay, after being informed of the issues in relation to administering local anaesthetic, advertising, and the misuse of job titles. The Committee took account of your early remediation, and the fact that you had worked within scope of practice since; you had also completed a further NVQ level 7 qualification in aesthetics. The Committee concluded that your misconduct was remediable and had been remediated. In view of your insight and changes made, the Committee found that you do not currently pose a risk to the public.
49. Accordingly, the Committee determined that a finding of impairment of fitness to practise is not required on public protection grounds.
50. The Committee then went on to consider whether a finding of impaired fitness to practise is required to uphold standards and/or to maintain public confidence in the dental profession. The Committee concluded that, given the nature of the concerns to which you admitted, if a finding of impairment was not made this would undermine public confidence in the dental profession and the GDC as a regulator. Therefore, the Committee determined that a finding of impairment is necessary in the wider public interest, to maintain public confidence in the profession and to uphold proper standards of conduct.
51. Accordingly, the Committee has determined that your fitness to practise is currently impaired by reason of your misconduct, solely on public interest grounds.

Sanction

52. The Committee next considered what sanction, if any, to impose on your registration. It recognised that the purpose of a sanction is not to be punitive although it may have a punitive effect. The Committee applied the principle of proportionality, balancing your interest with the public interest. It also took account of the *GDC's Guidance*.
53. The Committee considered the mitigating and aggravating factors in this case and took into consideration the relevant paragraphs in the *GDC's Guidance* on these matters.
54. The Committee identified the following mitigating factors:

- You have no previous fitness to practise history;
- No evidence of further regulatory breaches since the relevant time;
- Evidence of remorse and insight;
- No evidence of any actual harm to patients.

55. The Committee identified the following aggravating factor:

- Risk of harm to patients.

56. The Committee decided that it would not be appropriate to conclude this case with no further action. A sanction was required to uphold standards and maintain standards in the dental profession.

57. The Committee considered the criteria for imposing a reprimand in the guidance. The Committee was satisfied that, although not one single incident, your actions all related to misconduct which stemmed from your oversight of regulations and which you immediately stopped when it was brought to your attention. It was satisfied that you had shown remorse and taken corrective steps to remove the risk of harm to the public. It considered that acting out of scope of your practice had been inadvertent. The Committee determined that a reprimand was the appropriate and proportionate sanction to impose in all the circumstances of this case.

58. The Committee considered that a sanction of conditions would not be workable or appropriate to deal with the concerns in this case. It noted that you do not currently work in a dental setting where conditions could be monitored.

59. The Committee also considered whether to impose a sanction of suspension. It noted that the GDC had sought this sanction if your fitness to practise had been found to be impaired on public protection grounds. However, the Committee did not consider that you posed a risk to members of the public. In all the circumstances, the Committee concluded that a sanction of suspension was not necessary to protect the public or required in the wider public interest. It considered that a sanction of suspension (or erasure) would be disproportionate.

60. The Committee has therefore determined that a reprimand should be recorded against your name in the Register. The fact of this reprimand, and a copy of this determination, will appear alongside your name in the Register for a period of 12 months. The reprimand forms part of your fitness to practise history and is disclosable to prospective employers and prospective registrars in other jurisdictions.

61. The interim order of conditions on your registration is hereby revoked.

62. That concludes this hearing.