

## HEARING PART-HELD IN PRIVATE

### Professional Conduct Committee Initial Hearing

16 and 17 May 2024

**Name:** GOLOVNJA, Jekaterina

**Registration number:** 248722

**Case number:** CAS-204976-Z4N5G4

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**General Dental Council:** Alecsandra Manning-Rees, Counsel  
Instructed by Holly Watt, IHLPS

**Registrant:** Present  
Represented by Tagbo Ilozue, Counsel  
Instructed by Beverley Hudson, Buxton Coates solicitors

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**Fitness to practise:** Impaired by reason of conviction

**Outcome:** Fitness to Practise Impaired. Reprimand Issued

**Duration:** N/A

**Immediate order:** N/A

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**Committee members:** Jill Crawford (Lay) (Chair)  
Samaneh Nezamivand-Chegini (Dentist)  
Jodie Mahoney (Dental Care Professional)

**Legal adviser:** David Marshall

**Committee Secretary:** Gareth Llewellyn

**At this hearing the Committee made a determination that includes some private information. That information shall be omitted from this public version of the determination and the document marked to show where private material has been removed.**

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**Determination on preliminary matters, including findings of fact – 16 May 2024**

**Name:** GOLOVNJA, Jekaterina

**Registration number:** 248722

Miss Golovnja

1. This is a hearing before the Professional Conduct Committee (PCC). The hearing is being held remotely using Microsoft Teams in line with the Dental Professionals Hearings Service's current practice.
2. You are present and are represented by Tagbo Ilozue of Counsel, instructed by Beverley Hudson of Buxton Coates solicitors. Aleksandra Manning-Rees of Counsel, instructed by Holly Watt of the General Dental Council's (GDC's) In-House Legal Presentation Service (IHLPS), appears for the GDC.

**Hearing to be part-held in private**

3. Dr Ilozue invited the Committee to hold part of the hearing in private in accordance with Rule 53 of the General Dental Council (Fitness to Practise) Rules 2006 ('the Rules') where matters relating to your private life are discussed. Ms Manning-Rees made no objection to the application. The Committee, having accepted the advice of the Legal Adviser, determined to accede to the application for the purposes of protecting your family life. The hearing then proceeded partly in private.

**Admissions**

4. Dr Ilozue on your behalf tendered admissions to both of the heads of charge that you face, namely heads of charge 1 and 2. The charges were read out in session. The Committee determined and announced that the facts alleged at those heads of charge were proven on the basis of your admissions in accordance with Rule 17 (4) of the Rules. The background to the allegations, and the documentary evidence with which the Committee was provided in advance of the hearing, is set out below.

**Background to the case and summary of allegations**

5. The allegations giving rise to this hearing arise out of your conviction for an offence of unlawful subletting.
6. On 20 May 2022 you appeared before Inner London Crown Court and, having pleaded guilty, you were convicted of an offence of unlawful subletting, contrary to Section 1 (2) of the Prevention of Social Housing Fraud Act 2013. You were sentenced to pay a fine in the amount of £100.00, a victim surcharge of the same amount, and the amount of £1,000.00 towards the prosecution's costs. The offence giving rise to your conviction relates to you subletting a residential flat in London owned by the City of London Corporation, for which you had signed a tenancy agreement. The terms and conditions of the tenancy prohibited any subletting of the property.

7. It is further alleged that you failed to immediately inform the GDC of your conviction.

#### **Evidence**

8. The Committee has been provided with documentary material in relation to the heads of charge that you face, including the Certificate of Conviction and the sentencing judge's remarks relating to your court appearance; the witness statement and documentary exhibit of a caseworker in the GDC's Fitness to Practise team with knowledge of the case; and witness statements and documentary exhibits provided by you.
9. The Committee heard no oral evidence at this stage of the hearing.
10. Having determined the facts alleged at heads of charge 1 and 2 proved on the basis of your admissions in accordance with Rule 17 (4), the hearing then moved to stage two.

#### **Determination on misconduct and impairment – 17 May 2024**

11. Following the handing down of the Committee's findings of fact on 16 May 2024, the hearing proceeded to stage two; that is to say, misconduct, impairment and sanction.
12. At the outset of stage two Ms Manning-Rees set out the background to the facts that the Committee found proved at the preliminary stage.

#### **Proceedings at stage two**

13. Ms Manning-Rees and Dr Ilozue of Counsel invited the Committee to determine the questions of misconduct and impairment before going on to consider what sanction, if any, would be appropriate. The Committee, having accepted the advice of the Legal Adviser, acceded to the proposal.
14. The Committee has considered all the evidence presented to it, both oral and documentary. It has taken into account the submissions made by Ms Manning-Rees on behalf of the GDC and those made by Dr Ilozue on your behalf. In its deliberations the Committee has had regard to the GDC's *Guidance for the Practice Committees, including Indicative Sanctions Guidance* (October 2016, updated December 2020). The Committee has also had regard to the GDC's *Guidance for decision makers on the impact of criminal convictions and cautions* (May 2014). The Committee has accepted the advice of the Legal Adviser.

#### **Evidence at stage two**

15. The Committee heard oral evidence from you.
16. The Committee has also received documentary evidence at this stage of the proceedings. This material includes your witness statements prepared for these proceedings, with documentary exhibits; certificates of continuing professional development (CPD); and testimonials from patients and colleagues.

IN PRIVATE

17. [text omitted].

IN PUBLIC

#### **Misconduct**

18. The Committee first considered whether the facts that it has found proved at head of charge 2 constitute misconduct. The Committee has heard that Ms Manning-Rees on behalf of the GDC submitted that the facts amount to misconduct, whilst Dr Ilozue on your behalf submitted that the matters are not so serious as to constitute misconduct. In considering this and all other matters, the Committee has exercised its own independent judgement.
19. In its deliberations the Committee has had regard to the following paragraphs of the GDC's *Standards for the Dental Team* (September 2013) in place at the time of the matters giving rise to the facts that the Committee has found proved at head of charge 2. These paragraphs state that, as a dentist:
- 9.3 You must inform the GDC if you are subject to criminal proceedings or a regulatory finding is made against you anywhere in the world.*
- 9.3.1 You must inform the GDC immediately if you are subject to any criminal proceedings anywhere in the world. See our guidance on reporting criminal proceedings for more information.*
20. The Committee made findings of fact in respect of head of charge 2 at the preliminary stage of this hearing. The Committee found that you failed to immediately inform the GDC of your conviction for an offence of unlawful subletting.
21. In light of the findings of fact that it has made at head of charge 2, the Committee has determined that those proven facts amount to misconduct. The Committee considers that your failure to immediately inform the GDC of your conviction is a serious matter, and amounts to a breach of the standards set out above. It finds that your conduct fell far below the standards reasonably to be expected of a registered dental professional. The Committee is mindful that adhering to these standards is a fundamental requirement of registration. You gave evidence, which the Committee accepted, about the steps that you took to seek advice and assistance from your indemnifier in relation to how to inform the GDC. Nonetheless, it was your responsibility to immediately inform the GDC of the fact of your conviction in a timely manner. Your failure to do so was a serious breach of the standards reasonably to be expected.
22. The Committee has therefore determined that the facts that it has found proved at head of charge 2 amount to misconduct.

### **Impairment**

23. The Committee next considered whether your fitness to practise is currently impaired by reason of your misconduct, or your conviction, or both.
24. Ms Manning-Rees submitted that your conviction for an offence of unlawful subletting requires a finding of impairment on public interest grounds. Dr Ilozue submitted that impairment is conceded in respect of your conviction on public interest grounds.
25. In considering these matters, the Committee again exercised its own independent judgement. Throughout its deliberations, the Committee has borne in mind that its overarching objective is to protect the public, which includes the protection of patients and the wider public, the maintenance of public confidence in the profession and in the regulatory process, and the declaring and upholding of proper standards of conduct and behaviour.

BY REASON OF MISCONDUCT

26. The Committee first considered whether your fitness to practise is currently impaired by reason of the misconduct that it has found in respect of head of charge 2.
27. The Committee considers that the misconduct that it has identified has been remedied to the extent that your fitness to practise is not currently impaired. You have demonstrated clear and considerable insight into your misconduct, and have displayed significant insight. You came before the Committee making full admissions to the facts that the Committee went on to find proved. You have also undertaken a considerable amount of focussed and targeted CPD. You gave evidence to the Committee in an open and frank manner. You readily accepted your shortcomings and the Committee accepted that your expressions of regret and remorse were genuine. The Committee also found that you were able to describe how you would approach a similar situation in a different manner as a result of the learning and reflections that you have undertaken. The Committee accepted that, at the time of your misconduct, your personal circumstances were particularly difficult, as described in your oral and documentary evidence, and that, notwithstanding this, you accept your accountability for your failure to report promptly. The Committee noted that your circumstances have now improved.
28. In the circumstances, the Committee considers that your misconduct is now highly unlikely to be repeated. The Committee also considers that your misconduct is not at the higher end of the spectrum, as it relates to a belated referral of your conviction some two months after being convicted, rather than a failure to inform the GDC at all. Whilst amounting to misconduct, this delay does not suggest that you wilfully and deceitfully withheld the conviction from the GDC for a sustained period of time, particularly as you took advice from your indemnifier at the time about how to disclose your conviction to the GDC. The Committee accepted your evidence that you were informed by your indemnifier that the disclosure should be made in a formal letter, but that they were unable to assist you with that, and that it took you some time to obtain such assistance. The Committee notes that you accept that you should have contacted the GDC immediately and directly.
29. The Committee also finds that a finding of impairment by reason of misconduct is not in the wider public interest. The Committee considers that the reasonable and informed observer would, like the Committee, have regard to the nature of your misconduct, the circumstances prevailing at the time of your misconduct as referred to above, as well as the steps that you have taken to reflect upon and remedy your misconduct. The Committee considers that a finding of impairment by reason of misconduct is not required to maintain public confidence in the profession or to declare and uphold proper professional standards of conduct and behaviour. In the Committee's judgement the public's trust and confidence in the profession, and in the regulatory process, would not be significantly undermined if a finding of impairment was not made in the particular circumstances of this case.
30. Accordingly, the Committee finds that your fitness to practise is not currently impaired by reason of your misconduct.

#### BY REASON OF CONVICTION

31. The Committee next considered whether your fitness to practise is currently impaired by reason of the conviction that the Committee found proved at head of charge 1. The conviction was summarised in the Committee's earlier determination in the following terms.
32. On 20 May 2022 you appeared before Inner London Crown Court and, having pleaded guilty, you were convicted of an offence of unlawful subletting, contrary to Section 1 (2) of the Prevention of Social Housing Fraud Act 2013. You were ordered to repay £13,125.00 to the

City of London Corporation. The judge's sentencing remarks show you were fined £1,000.00 and were ordered to pay the amount of £1,000.00 towards the prosecution's costs. The offence giving rise to your conviction relates to you subletting a residential flat in London owned by the City of London Corporation, for which you had signed a tenancy agreement. The terms and conditions of the tenancy prohibited any subletting of the property.

33. Whilst the Committee finds that your conviction for an offence of unlawful subletting does not suggest that you pose a risk to the public, and whilst it notes that neither party have sought to suggest otherwise, the Committee considers that a finding of current impairment is required in the wider public interest in relation to your conviction. The Committee is mindful of the specific *Standards* referred to above, and it considers that the offence is such to bring the profession into disrepute. Your underlying conduct was characterised by the sentencing judge as being dishonest. The nature of the offence for which you were convicted, whereby you gained money that was not lawfully yours, making a profit in the process, and potentially deprived those in need of social housing, means that a finding of impairment is required to declare and uphold proper professional standards of conduct and behaviour. It further considers that public trust and confidence in the profession, and in the regulatory process, would be significantly undermined if a finding of impairment were not made in the particular circumstances of this case.
34. The Committee has therefore determined that your fitness to practise is impaired by reason of your conviction on public interest grounds alone.

### **Determination on sanction – 17 May 2024**

35. Following the Committee handing down its determination on misconduct and impairment on 17 May 2024, the hearing continued that same day in respect of the further question of sanction.

#### **Fitness to practise history**

36. Ms Manning-Rees addressed the Committee in accordance with Rule 20 (1) (a) of the General Dental Council (Fitness to Practise) Rules 2006 ('the Rules'). She stated that you have no fitness to practise history with the GDC.

#### **Submissions**

37. The Committee has had regard to the submissions made by both parties. Ms Manning-Rees on behalf of the GDC submitted that your conviction is for a dishonesty-related offence which involved financial gain, and that a period of suspended registration for a period of six months, would represent a suitable disposal. Ms Manning-Rees submitted that the GDC is neutral as to whether a review hearing should be directed should the Committee determine to suspend your registration.
38. Dr Ilozue on your behalf submitted that you are 'not a dishonest criminal', and referred to factors which he stated mitigate your conviction at the sanction stage. Dr Ilozue submitted that it is not necessary, and would be disproportionate, to suspend your registration. Dr Ilozue instead invited the Committee to either take no further action, or to issue a reprimand. Dr Ilozue submitted that a period of suspension in the order of six months as sought by the GDC would be particularly excessive, and that a review hearing is not necessary given that the Committee has not identified any public protection issues or outstanding remediation work.

#### **Proceedings at stage two following the finding of impairment on the grounds of conviction**

39. As set out in the previous determination on misconduct and impairment, the Committee has considered all the evidence presented to it, both oral and documentary, as well as the submissions of both parties. In its deliberations the Committee has had regard to the GDC's *Guidance for the Practice Committees, including Indicative Sanctions Guidance* (October 2016, updated December 2020). The Committee has also had regard to the GDC's *Guidance for decision makers on the impact of criminal convictions and cautions* (May 2014). The Committee has accepted the advice of the Legal Adviser.
40. The Committee has considered what sanction, if any, is appropriate in light of the findings of fact, misconduct and impairment that it has made. The Committee recognises that the purpose of a sanction is not to be punitive, although it may have such an effect, but is instead imposed to protect patients and safeguard the wider public interest considerations mentioned in the preceding determination.
41. In considering the matter of sanction, the Committee again exercised its own independent judgement. Throughout its deliberations, the Committee has borne in mind that its overarching objective is to protect the public, which includes the protection of patients and the wider public, the maintenance of public confidence in the profession and in the regulatory process, and the declaring and upholding of proper standards of conduct and behaviour. The Committee has applied the principle of proportionality, balancing the public interest with your own interests. The Committee has again exercised its own independent judgement.

#### **Mitigating and aggravating factors**

42. The Committee has paid careful regard to the mitigating and aggravating factors present in this case.
43. In respect of the mitigating factors that are present, the Committee notes your difficult personal circumstances as referred to in the Committee's previous determination; that you are of previous good character, with supportive testimonials from patients and colleagues, and no fitness to practise history; that you have been of good conduct following your conviction, and have expressed genuine remorse and regret for, and considerable insight into, your offending behaviour; that you, and you alone, have repaid in full the monies that were gained; that you have taken steps to avoid a repeat of the offence giving rise to your conviction, including targeted and focussed CPD.

IN PRIVATE

44. [text omitted].

IN PUBLIC

45. In terms of further mitigating factors, the Committee also notes that a considerable number of years have passed since the offending behaviour ceased; and that the offence was a single, isolated incident, albeit perpetuated over a protracted period of time.
46. The Committee is clear that you are accountable for agreeing to sublet the flat, which you knew at the time to be wrong.

IN PRIVATE

47. [text omitted].



IN PUBLIC

48. The Committee notes that you have not resiled from your accountability for allowing the flat to be sublet.
49. In terms of aggravating factors, the Committee notes that the offence for which you were convicted resulted in financial gain, and that your offence entailed a breach of the trust placed in you by the local authority and the public. The Committee notes that dishonesty was inherent in the offence for which you were convicted.

### **Sanction**

50. The Committee has considered the range of sanctions available to it, starting with the least restrictive. In the light of its findings, the Committee considers that taking no action would not be sufficient in the particular circumstances of this case. In the Committee's judgement, public trust and confidence in the profession and in the regulatory process would be significantly undermined if no action were taken given the fact and nature of your criminal conviction. The Committee considered that some form of action is needed to declare and uphold proper professional standards of conduct and behaviour.
51. The Committee next considered whether it would be appropriate to conclude the case with a reprimand. After careful consideration the Committee has concluded that it would be appropriate and proportionate to issue a reprimand. The Committee has found that you do not pose a risk to the public; that you have shown genuine and compelling remorse for, insight into and rehabilitation of your underlying conduct; that your offence was an isolated incident, albeit protracted over a period of time; and that you have no fitness to practise history with the GDC.

IN PRIVATE

52. [text omitted].

IN PUBLIC

53. Having heard oral evidence from you about your regret and remorse, the Committee is satisfied that your offending behaviour is not indicative of a wider character trait.
54. The Committee therefore considers that a reprimand is sufficient to declare and uphold proper professional standards of conduct and behaviour, and to maintain public trust and confidence in the profession in the particular circumstances of this case.
55. The Committee did consider whether a higher sanction such as a period of conditional or suspended registration would be appropriate. It considered that no higher sanction than that of reprimand is needed in order to address the public interest considerations referred to above. The Committee considers that a sanction of suspension would be disproportionate, particularly given the mitigating factors in this case.
56. This reprimand, and a copy of the public 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.
57. That concludes this case.