

**HEARING PARTLY HEARD IN PRIVATE**

**TOMBAZIDOU-CRAWFORD, Sofia**

**Registration No: 73838**

**PROFESSIONAL CONDUCT COMMITTEE**

**JANUARY 2021**

**Outcome: Erased with Immediate suspension**

Sofia Tombazidou-Crawford, a dentist, Tandläkare Karolinska 1997, was summoned to appear before the Professional Conduct Committee on 18 January 2021 for an inquiry into the following charge:

**Charge** (as AMENDED and READ on 18 January 2021 and as further AMENDED on 19 January 2021 and on 20 January 2021)

“That being a registered dentist:

**PROBITY AND RECORD-KEEPING**

Between 29 March 2016 and 26 April 2017:

1. You back dated the ‘Date of Acceptance’ and the ‘Date of completion’ on the following claims submitted to the NHS:
  - (i) Patient A (Claim no 54469);
  - (ii) Patient B (Claim no 54463);
  - (iii) Patient C (Claim no 54474);
  - (iv) Patient D (Claim no 50070);
  - (v) Patient E (Claim no 54504);
  - (vi) Patient G (Claim no 50030);
  - (vii) Patient H (Claim no 50032);
  - (viii) Patient I (Claim no 50025);
  - (ix) Patient K (Claim no 54510);
  - (x) Patient L (Claim no 54481);
  - (xi) Patient M (Claim no 50049);
  - (xii) Patient N (Claim no 50051);
  - (xiii) Patient P (Claim no 50169);
  - (xiv) Patient Q (Claim no 54554);
  - (xv) Patient S (Claim no 54511);



- (xvi) Patient T (Claim no 54513);
  - (xvii) Patient U (Claim no 54514);
  - (xviii) Patient V (Claim no 50174);
  - (xix) Patient W (Claim no 54532);
  - (xx) Patient X (Claim no 54521);
  - (xxi) Patient Y (Claim no 54518);
  - (xxii) Patient Z (Claim no 54516);
  - (xxiii) Patient AA (Claim no 54473);
  - (xxiv) Patient BB (Claim no 54547);
  - (xxv) Patient CC (Claim no 54491);
  - (xxvi) Patient DD (Claim no 54493);
  - (xxvii) Patient FF (Claim no 54688);
  - (xxviii) Patient GG (Claim no 54528);
  - (xxix) Patient HH (Claim no 54465)
  - (xxx) Patient II (Claim no 54464);
  - (xxxi) Patient JJ (Claim no 54466)
2. Your conduct in paragraph 1 above was:
- (i) MISLEADING, in that the submitted claims were inaccurately placed and assessed in the previous contract year; and/or
  - (ii) DISHONEST, in that you submitted each claim as true and accurate when you knew the information given on the FP17 claim form not to be correct.
3. You back-dated the 'Date of Completion' on the following claims submitted to the NHS:
- (i) Patient F(Claim no 54378);
  - (ii) Patient J (Claim no 54438);
  - (iii) Patient O (Claim no 54539);
  - (iv) Patient R (Claim no 54410);
  - (v) Patient EE (Claim no 54362).
4. Your conduct in paragraph 3 above was:
- (i) MISLEADING, in that the submitted claims were inaccurately placed and assessed in the previous contract year; and/or
  - (ii) DISHONEST, in that you submitted each claim as true and accurate when you knew the information given on the FP17 claim form not to be correct.
5. You made, or instructed someone else to make, backdated FP25 records in relation to treatment provided to the following patients:



- (i) Patient D (Claim no 50070);
  - (ii) Patient H (Claim no 50032);
  - (iii) Patient I (Claim no 50025);
  - (iv) Patient M (Claim no 50049);;
  - (v) Patient P (Claim no 50169);
  - (vi) Patient G (Claim no 50030)
6. Your conduct in paragraph 5 above was:
- (i) MISLEADING, in that the records were inaccurate; and/or
  - (ii) DISHONEST, in that you knowingly made, or instructed another to make, inaccurate records.
7. [withdrawn]:
- (i) [withdrawn];
  - (ii) [withdrawn];
  - (iii) [withdrawn].
8. [withdrawn]:
- (i) [withdrawn]
  - (ii) [withdrawn];
9. [withdrawn].
10. [withdrawn]:
- (i) [withdrawn];
  - (ii) [withdrawn].

**STANDARD OF CARE**

11. [withdrawn]
- (i) [withdrawn]:
    - (a) [withdrawn]
    - (b) [withdrawn]
    - (c) [withdrawn]
    - (d) [withdrawn]
    - (e) [withdrawn]
  - (ii) [withdrawn]
  - (iii) [withdrawn];
    - (iv) [withdrawn]:
      - (a) [withdrawn];
      - (b) [withdrawn];
      - (c) [withdrawn];
      - (d) [withdrawn];
      - (v) [withdrawn];



(vi) [withdrawn].

And that, by reason of the facts stated above, your fitness to practise as a dentist is impaired by reason of misconduct.”

On 20 January 2021, the Chairman made the following statement regarding the findings of fact:

“Mrs Tombazidou-Crawford

You are present at this hearing of the Professional Conduct Committee (PCC). You are represented by Mr Andrew Colman of Counsel, instructed by Radcliffes LeBrasseur solicitors. Ms Bo-Eun Yung of Counsel, instructed by the GDC’s In-House Legal Presentation Service, appears for the GDC.

The hearing is being held remotely using Microsoft Teams in line with the GDC’s current practice.

### **Preliminary matters**

#### **APPLICATIONS TO AMEND THE CHARGE**

At the outset of the hearing on 18 January 2021 Ms Yung applied to amend the heads of charge that you face in accordance with Rule 18 of the General Dental Council (Fitness to Practise) Rules 2006 (‘the Rules’). Ms Yung invited the Committee to amend the heads of charge by way of withdrawing heads of charge 7 (iii), 9, 10 and 11 (i), and by removing the word ‘bitewing’ from head of charge 11 (iii).

Mr Colman on your behalf did not contest Ms Yung’s application to withdraw the heads of charge set out above. Mr Colman opposed Ms Yung’s application to amend head of charge 11 (iii) on the basis that the proposed amendment would widen the case that you face, and that notice of the GDC’s intention to amend has only recently been given.

The Committee accepted the advice of the Legal Adviser.

The Committee determined that, in the particular circumstances of this case, it was fair and in the interests of justice for the withdrawals to be made at heads of charge 7 (iii), 9, 10 and 11 (i). The schedule of charge was duly amended.

The Committee determined that it would not be fair or in the interests of justice for the wording of head of charge 11 (iii) to be amended as sought by Ms Yung. The Committee considers that injustice could be caused to you were it to accede to this proposed change, especially as it understands that notice of this application was only given to you and those who act for you very recently.

Ms Yung subsequently applied to withdraw head of charge 11 (iii). Mr Colman made no objection to the application. The Committee determined to accede to the application, and the schedule of charge was amended once more.

On 19 January 2021, during the course of the GDC’s factual case, Mr Colman applied to amend heads of charge 2 (ii) and 4 (ii). Ms Yung on behalf of the GDC endorsed Mr Colman’s application. At the same time Ms Yung applied to withdraw head of charge 7 (i), and to add a head of charge in respect of Patient G’s records, to be numbered 5 (vi). Mr Colman made no objection to Ms Yung’s application.

The Committee accepted the advice of the Legal Adviser.

The Committee determined that it was fair and in the interests of justice for heads of charge 2 (ii) and 4 (ii) to be amended, for head of charge 7 (i) to be withdrawn, and for a new head of charge, to be numbered 5 (vi), to be added to the charges that you face. The schedule of charge was duly amended.



On 20 January 2021, following the conclusion of the GDC's evidence on the facts, Ms Yung applied to withdraw the remainder of head of charge 11 in its entirety. Mr Colman made no objection to the application. The Committee accepted the advice of the Legal Adviser. The Committee determined to accede to the application. The schedule of charge was amended once more.

Ms Yung also applied to withdraw head of charge 7 (ii), and by consequence heads of charge 8 (i) and (ii). Mr Colman made no objection to the application. The Committee accepted the advice of the Legal Adviser. The Committee determined to accede to the application. The schedule of charge was amended once more.

### **ADMISSIONS**

Mr Colman tendered admissions on your behalf to heads of charge 1 to 6, as amended, in their entirety, that is to say all of the heads of charge which have not been withdrawn. The Committee noted the admissions.

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

The allegations giving rise to this hearing relate to probity and record-keeping concerns arising out of your submission of a number of claims for payment to the NHS.

The GDC alleges that, on dates between 29 March 2016 and 26 April 2017, you backdated the 'date of acceptance' and 'date of completion' on 31 claims that you submitted to the NHS in respect of individual patients, and that you backdated the 'date of completion' on five claims that you submitted to the NHS in respect of other patients. It is contended that such conduct was misleading, in that the claims that you submitted were then inaccurately placed and assessed within the previous contract year. The GDC also alleges that your conduct was dishonest, in that you submitted each claim as true and accurate when you knew the information given on the FP17 claim form not to be correct.

It is further alleged that you made, or instructed another individual to make, backdated 'FP25' records in relation to the treatment that you provided to six patients. The GDC contends that such alleged conduct was misleading, in that the records were inaccurate, and was also dishonest, in that you knowingly made, or instructed someone else to make, inaccurate records.

### **Evidence**

The Committee has been provided with documentary material in relation to the heads of charge that you face, including the witness statement and documentary exhibits of a contract manager for NHS England's East of England region, who has knowledge of your dental contract and claims and who is referred to for the purposes of these proceedings as Witness 1; the reports of the GDC's expert witness with regard to the probity allegations that you face, namely Mr Julian Scott; the reports of the GDC's expert witness with regard to the clinical allegations that you had faced before they were withdrawn, namely Mr Geoffrey Bateman; NHS claiming data relevant to the heads of charge; the clinical records of the patients involved in this case; your witness statements, the report of your expert witness, namely Mr David Kramer, in relation to the clinical allegations which have since been withdrawn; and the joint report of Mr Bateman and Mr Kramer.

The Committee heard oral evidence from Mr Scott, from Witness 1, and from Mr Bateman.

### **Committee's findings of fact**



The Committee has taken into account all the evidence presented to it. It has considered the submissions made by Ms Yung on behalf of the GDC and those made by Mr Colman on your behalf.

The Committee has accepted the advice of the Legal Adviser. The Committee is mindful that the burden of proof lies with the GDC and has considered the heads of charge against the civil standard of proof, that is to say the balance of probabilities. The Committee has considered each head of charge separately, although its findings will be announced together.

The Committee was greatly assisted by the oral evidence of Mr Scott and Mr Bateman. They each provided clear and credible evidence, and were both fair, balanced and measured in providing their opinions. The Committee was further assisted by the evidence of Witness 1, who provided relevant and helpful evidence.

I will now announce the Committee's findings in relation to each head of charge, as amended:

	<i>PROBITY AND RECORD-KEEPING</i>
	<i>Between 29 March 2016 and 26 April 2017:</i>
1.	<i>You back dated the 'Date of Acceptance' and the 'Date of Completion' on the following claims submitted to the NHS:</i>
1. (i)	<i>Patient A (Claim no 54469);</i>  <b>Admitted and proved</b>
	The Committee finds the facts alleged at head of charge 1 (i) proved on the basis of your admission. The Committee also finds the other facts to which you have made admissions proved on the basis of those respective admissions. In reaching its findings on each of the heads of charge, the Committee has taken into account and accepted the agreed expert evidence of Mr Scott, as well as the documentary information placed before it, including the records for the patients in this case.  In approaching heads of charge 2 (ii), 4 (ii) and 6 (ii), the Committee applied the test set out in <i>Ivey v Genting Casinos (UK) Ltd. t/a Crockfords</i> [2017] UKSC 67. The test is that the Committee must decide subjectively the actual state of your knowledge or belief as to the facts, and must then apply the objective standards of ordinary and decent people to determine whether your conduct was dishonest by those standards.
1. (ii)	<i>Patient B (Claim no 54463);</i>  <b>Admitted and proved</b>
1. (iii)	<i>Patient C (Claim no 54474);</i>  <b>Admitted and proved</b>
1. (iv)	<i>Patient D (Claim no 50070);</i>



	<b>Admitted and proved</b>
1. (v)	<i>Patient E (Claim no 54504);</i> <b>Admitted and proved</b>
1. (vi)	<i>Patient G (Claim no 50030);</i> <b>Admitted and proved</b>
1. (vii)	<i>Patient H (Claim no 50032);</i> <b>Admitted and proved</b>
1. (viii)	<i>Patient I (Claim no 50025);</i> <b>Admitted and proved</b>
1. (ix)	<i>Patient K (Claim no 54510);</i> <b>Admitted and proved</b>
1. (x)	<i>Patient L (Claim no 54481);</i> <b>Admitted and proved</b>
1. (xi)	<i>Patient M (Claim no 50049);</i> <b>Admitted and proved</b>
1. (xii)	<i>Patient N (Claim no 50051);</i> <b>Admitted and proved</b>
1. (xiii)	<i>Patient P (Claim no 50169);</i> <b>Admitted and proved</b>
1. (xiv)	<i>Patient Q (Claim no 54554);</i> <b>Admitted and proved</b>
1. (xv)	<i>Patient S (Claim no 54511);</i> <b>Admitted and proved</b>
1. (xvi)	<i>Patient T (Claim no 54513);</i> <b>Admitted and proved</b>
1. (xvii)	<i>Patient U (Claim no 54514);</i> <b>Admitted and proved</b>



1. (xviii)	<i>Patient V (Claim no 50174);</i> <b>Admitted and proved</b>
1. (xix)	<i>Patient W (Claim no 54532);</i> <b>Admitted and proved</b>
1. (xx)	<i>Patient X (Claim no 54521);</i> <b>Admitted and proved</b>
1. (xxi)	<i>Patient Y (Claim no 54518);</i> <b>Admitted and proved</b>
1. (xxii)	<i>Patient Z (Claim no 54516);</i> <b>Admitted and proved</b>
1. (xxiii)	<i>Patient AA (Claim no 54473);</i> <b>Admitted and proved</b>
1. (xxiv)	<i>Patient BB (Claim no 54547);</i> <b>Admitted and proved</b>
1. (xxv)	<i>Patient CC (Claim no 54491);</i> <b>Admitted and proved</b>
1. (xxvi)	<i>Patient DD (Claim no 54493);</i> <b>Admitted and proved</b>
1. (xxvii)	<i>Patient FF (Claim no 54688);</i> <b>Admitted and proved</b>
1. (xxviii)	<i>Patient GG (Claim no 54528);</i> <b>Admitted and proved</b>
1. (xxix)	<i>Patient HH (Claim no 54465);</i> <b>Admitted and proved</b>
1. (xxx)	<i>Patient II (Claim no 54464);</i> <b>Admitted and proved</b>



1. (xxxi)	<i>Patient JJ (Claim no 54466).</i>  <b>Admitted and proved</b>
2.	<i>Your conduct in paragraph 1 above was:</i>
2. (i)	<i>MISLEADING, in that the submitted claims were inaccurately placed and assessed in the previous contract year; and/or</i>  <b>Admitted and proved</b>
2. (ii)	<i>DISHONEST, in that you submitted each claim as true and accurate when you knew the information given on the FP17 claim form not to be correct.</i>  <b>Admitted and proved</b>
3.	<i>You back-dated the 'Date of Completion' on the following claims submitted to the NHS:</i>
3. (i)	<i>Patient F (Claim no 54378);</i>  <b>Admitted and proved</b>
3. (ii)	<i>Patient J (Claim no 54438);</i>  <b>Admitted and proved</b>
3. (iii)	<i>Patient O (Claim no 54539);</i>  <b>Admitted and proved</b>
3. (iv)	<i>Patient R (Claim no 54410);</i>  <b>Admitted and proved</b>
3. (v)	<i>Patient EE (Claim no 54362).</i>  <b>Admitted and proved</b>
4.	<i>Your conduct in paragraph 3 above was:</i>
4. (i)	<i>MISLEADING, in that the submitted claims were inaccurately placed and assessed in the previous contract year; and/or</i>  <b>Admitted and proved</b>
4. (ii)	<i>DISHONEST, in that you submitted each claim as true and accurate when you knew the information given on the FP17 claim form not to be correct.</i>  <b>Admitted and proved</b>



5.	<i>You made, or instructed someone else to make, backdated FP25 records in relation to treatment provided to the following patients:</i>
5. (i)	<i>Patient D (Claim no 50070);</i> <b>Admitted and proved</b>
5. (ii)	<i>Patient H (Claim no 50032);</i> <b>Admitted and proved</b>
5. (iii)	<i>Patient I (Claim no 50025);</i> <b>Admitted and proved</b>
5. (iv)	<i>Patient M (Claim no 50049);</i> <b>Admitted and proved</b>
5. (v)	<i>Patient P (Claim no 50169);</i> <b>Admitted and proved</b>
5. (vi)	<i>Patient G (Claim no 50030).</i> <b>Admitted and proved</b>
6.	<i>Your conduct in paragraph 5 above was:</i>
6. (i)	<i>MISLEADING, in that the records were inaccurate; and/or</i> <b>Admitted and proved</b>
6. (ii)	<i>DISHONEST, in that you knowingly made, or instructed another to make, inaccurate records.</i> <b>Admitted and proved</b>
7.	[Withdrawn]
7. (i)	[Withdrawn]
7. (ii)	[Withdrawn]
7. (iii)	[Withdrawn]
8.	[Withdrawn]
8. (i)	[Withdrawn]
8. (ii)	[Withdrawn]
9.	[Withdrawn]



10. (i)	[Withdrawn]
10. (ii)	[Withdrawn]
	<i>STANDARD OF CARE</i>
11.	[Withdrawn]
11. (i) (a)	[Withdrawn]
11. (i) (b)	[Withdrawn]
11. (i) (c)	[Withdrawn]
11. (i) (d)	[Withdrawn]
11. (i) (e)	[Withdrawn]
11. (ii)	[Withdrawn]
11. (iii)	[Withdrawn]
11. (iv)	[Withdrawn]
11. (iv) (a)	[Withdrawn]
11. (iv) (b)	[Withdrawn]
11. (iv) (c)	[Withdrawn]
11. (iv) (d)	[Withdrawn]
11. (v)	[Withdrawn]
11. (vi)	[Withdrawn]

We move to stage two.”

On 25 January 2021 the Chairman announced the determination as follows:

“Mrs Tomabazidou-Crawford

### **Proceedings at stage two**

The Committee has considered all the evidence presented to it, both written and oral. It has taken into account the submissions made by Ms Yung on behalf of the GDC, and those made by Mr Colman 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 accepted the advice of the Legal Adviser.

### **Evidence**



The Committee has been provided with further documentation relevant to its deliberations at stage two. These documents include witness statements from your dental colleague, testimonial letters from a patient and a dental colleague, and certificates relating to continuing professional development (CPD) that you have undertaken.

The Committee also heard oral evidence from you.

### **Fitness to practise history**

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

### **Misconduct**

The Committee first considered whether the facts that it has found proved constitute misconduct. Ms Yung submits, and you accept, that those facts amount to misconduct. In considering this matter, the Committee has exercised its own independent judgement.

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 facts that it has found proved. These paragraphs state that as a dentist:

- 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.
- 1.7.1 You must always put patients' interests before any financial, personal or other gain.
- 4.1 [You must] make and keep contemporaneous, complete and accurate patient records.
  - 4.1.3 You must understand and meet your responsibilities in relation to patient information in line with current legislation. You must follow appropriate national advice on retaining, storing and disposing of patient records.
  - 4.1.4 You must ensure that all documentation that records your work, including patient records, is clear, legible, accurate, and can be readily understood by others. You must also record the name or initials of the treating clinician.
  - 4.1.5 If you need to make any amendments to a patient's records you must make sure that the changes are clearly marked up and dated.
- 9.1 [You must] 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's findings relate to you having submitted a total of 36 backdated claims to the NHS in respect of the same number of patients, either by backdating the 'date of acceptance' and 'date of completion', or by backdating the 'date of completion' alone. Your conduct was misleading, in that the claims that you submitted were then inaccurately placed and assessed as part of the previous contract year. Your conduct was also dishonest, in that you submitted each claim as true and accurate when you knew the information given on the 'FP17' claim forms not to be correct. You also made, or instructed another person to make, backdated 'FP25' records in relation to



the treatment that you provided to six patients. Such conduct was misleading, in that the records were inaccurate, and was also dishonest, in that you knowingly made, or instructed another individual to make, inaccurate records.

The Committee considers that your conduct fell far short of the standards reasonably expected of a dentist. Your actions have brought the standing and reputation of the profession into disrepute, and have undermined public trust and confidence in the profession. You have breached a fundamental tenet of the profession, namely the need to be honest and to act with integrity. The Committee also finds that your misconduct was serious, and would be considered by your fellow practitioners to be deplorable. The Committee therefore has little difficulty in determining that these findings amount to misconduct.

### **Impairment**

The Committee then went on to consider whether your fitness to practise is currently impaired by reason of your misconduct. In doing so, the Committee has again exercised its independent judgement. The Committee has heard from Ms Yung that the GDC submits, and that Mr Colman on your behalf concedes, that your fitness to practise is impaired. Throughout its deliberations, the Committee has borne in mind that its primary duty is to address the public interest, which includes the protection of patients, 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 finds that your fitness to practise is currently impaired by reason of the misconduct that it has found. The Committee's findings relate to repeated acts of dishonesty which might be difficult to remediate. Your dishonest conduct was premeditated, in that you decided to backdate NHS claims to avoid the risk of a 'clawback' of monies. Your misleading and dishonest conduct was repeated within a period of approximately 13 months. Your misconduct extended to you backdating patient records in six particular cases in an effort to cover up your deception and avoid detection. Your dishonesty was motivated by financial gain, or at least avoiding financial loss.

The Committee considers that you have not demonstrated sufficient evidence of you having insight into, and remediation of, your misconduct. As such, the Committee considers that you are liable to repeat your misconduct. The Committee notes from the evidence presented to it that you have undertaken some educational work on appropriate claiming. You also made full admissions to each of the facts that the Committee subsequently found proved, and you accepted that those facts amounted to misconduct and that your fitness to practise is impaired as a result. This connotes some insight into your misconduct. You also accepted responsibility for your actions when giving evidence to this Committee. The Committee is mindful that you did not need to give evidence, and it appreciates the assistance that you gave it by doing so. You also expressed remorse for your actions, which the Committee considers is genuine and heartfelt. The Committee also appreciates that these proceedings, culminating in this hearing, have had a significant emotional effect on you. The Committee also took into account your previous good character, and is mindful that there has been no repetition of your behaviour.

However, the Committee considers that your insight and remediation are only limited. The manner in which you gave evidence to the Committee suggests that you have not properly reflected on the serious conduct that has precipitated these proceedings. Although you made full admissions at the outset of the hearing, you do not appear to have taken time to reflect carefully and critically on the events in question. When giving evidence you were quick to take responsibility for the matters giving rise to these



proceedings, but you did not appear to have any real understanding of how and why you repeatedly acted in a dishonest manner.

Furthermore, you do not appear to recognise the damage that your dishonesty has caused to the standing and reputation of the profession or to the public's trust and confidence in the profession. In your evidence you mentioned the effect that your dishonest conduct has had on your dental practice, business partners, colleagues and family, but you did not appear to recognise the impact that your misconduct has had on the wider profession and the public.

The Committee also considers that, although you have clearly been affected by these proceedings, you still appear to remain unconvinced of the need to reflect upon and remediate your dishonesty to ensure that there is no future repetition. In your evidence you appeared to directly associate your dishonesty with your difficult working circumstances at the time. Consequently, you appear to consider that, having removed yourself from that difficult situation, you are no longer at risk of repeating your dishonest conduct. In evidence you were not able to reassure the Committee about how you would act differently in the future, and the Committee is not satisfied that you have properly reflected upon how you might act in a similar or different stressful situation. Therefore, whilst the Committee accepts that you felt under pressure at the time, it is not satisfied that you now have in place appropriate support and coping mechanisms to guard against a repeat of your misconduct. Indeed, you stated in evidence that you 'don't believe' that seeking help is appropriate.

In the circumstances, the Committee considers that your insight and remediation is limited and incomplete, and that as such it cannot be said that a repeat of your dishonest conduct is highly unlikely.

The Committee finds that a finding of impairment is also, and undoubtedly, required in order to declare and uphold proper standards of conduct and behaviour and to maintain trust and confidence in the profession. Your dishonest conduct has breached a fundamental tenet of the profession, and has brought the reputation of the profession into disrepute. Your dishonesty was directly related to your work as a dentist and amounts to a breach of trust, including the trust placed in you by patients and the NHS. In the Committee's judgement public trust and confidence in the profession would be significantly undermined if a finding of impairment were not made in the particular circumstances of this case.

### **Sanction**

The Committee then determined what sanction, if any, would be appropriate in light of the findings of facts, misconduct and impairment that it has made. The Committee recognises that the purpose of a sanction is not punitive, although it may have that effect, but is instead imposed in order to protect patients and safeguard the wider public interests referred to above. The Committee has heard that Ms Jung on behalf of the GDC invites the Committee to erase your name from the register. Mr Colman on your behalf submitted that a lesser sanction of suspension would be more proportionate and appropriate.

In reaching its decision the Committee has again taken into account the GDC's *Guidance for the Practice Committees, including Indicative Sanctions Guidance* (October 2016, updated December 2020). The Committee has applied the principle of proportionality, balancing the public interest with your own interests.

The Committee has considered the aggravating and mitigating factors present in this case.



In terms of mitigating factors, the Committee notes the difficult circumstances at your place of work at the time of the incidents giving rise to these proceedings, and the strained professional relationships that you described. The Committee notes that you are of previous good character with no other fitness to practise history. You have expressed genuine remorse and came before the Committee making full admissions. The Committee notes that a considerable period of time has elapsed with no further reported issues.

In relation to aggravating factors, your dishonest conduct was premeditated, and was motivated by financial gain, or at least by the desire to avoid a financial loss. Your conduct amounted to a breach of trust, and was repeated within a period of approximately 13 months. You attempted to cover up your wrongdoing by backdating FP25 records. You also lack full insight into your dishonest conduct.

The Committee has considered the range of sanctions available to it, starting with the least restrictive. In the light of the findings made against you, the Committee has determined that it would be wholly inappropriate and disproportionate to conclude this case with no action or with a reprimand. The Committee's findings of repeated and serious dishonest conduct mean that taking no action, or issuing a reprimand, would be insufficient to maintain public confidence and trust in the profession and in the regulatory process, and would not declare and uphold proper standards of conduct and behaviour.

The Committee next considered whether a period of conditional registration would be appropriate. Your dishonest conduct could not in the Committee's view be properly addressed with conditions. In any event, the Committee considers that a period of conditional registration would not be sufficient to declare and uphold proper professional standards of conduct and behaviour or maintain trust and confidence in the profession.

The Committee therefore went on to consider whether to suspend your registration. Having given the matter careful consideration, the Committee concluded that a period of suspension would not be sufficient to meet the public interest considerations so clearly engaged in this serious case. Your dishonest conduct is of a serious kind. Your misconduct is deeply damaging to your fitness to practise, to the standing and reputation of the profession, and the public's trust and confidence in the dental profession. You have breached a fundamental tenet of the profession, namely the requirement to act with honesty and integrity. The Committee was particularly troubled by the proven instances of you attempting to cover-up your dishonesty by backdating patient records. In assessing the seriousness of your dishonesty, the Committee considers that the significance of such attempts to conceal your wrongdoing outweighs other considerations which might lessen the seriousness of your dishonesty, such as the case not relating to claims for work that was not provided, or overclaiming for work done.

In the Committee's judgement there is a significant risk of you repeating your conduct on account of the clear shortcomings in your insight and remediation. You lack full insight into your dishonest conduct, and you do not appear to have identified the need to properly reflect upon your misconduct despite having had a considerable amount of time in which to do so. The Committee is doubtful that a period of suspension would bring about a change in how you view your repeated dishonest conduct, and would not for instance lead to you carefully and critically reflecting on your dishonesty in order to avoid a repeat.

Your abuse of your position of trust was such a significant departure from the standards reasonably to be expected of a registered dentist that a sanction lesser than erasure would not be sufficient to declare and uphold proper standards of conduct and



behaviour or maintain public trust and confidence in the profession in the particular circumstances of this case.

The Committee therefore directs that your name be erased from the register.

**Immediate order**

Having directed that your name be erased from the register, the Committee now invites submissions as to whether it should impose an order for your immediate suspension in accordance with section 30 (1) of the Dentists Act 1984 (as amended).

**Determination on immediate order – 25 January 2021**

Having directed that your name be erased from the register, the Committee invited submissions as to whether it should impose an order for your immediate suspension in accordance with section 30 (1) of the Dentists Act 1984 (as amended). The Committee has had regard to the GDC's *Guidance for the Practice Committees, including Indicative Sanctions Guidance* (October 2016, updated December 2020).

Ms Yung on behalf of the GDC submitted that an immediate order is necessary to protect the public, is also in the public interest and is in your own interests. Mr Colman on your behalf submitted that an immediate order is not necessary on any of those three grounds, and in particular would prevent you from properly making appropriate arrangements for your practice arising out of the Committee's substantive direction of erasure.

The Committee has accepted the advice of the Legal Adviser.

In all the circumstances, the Committee considers that an immediate order of suspension is necessary to protect the public and is otherwise in the public interest. The Committee has determined that, given the risks that it has identified, it would not be appropriate to permit you to practise before the substantive direction of erasure takes effect. The Committee considers that an immediate order for suspension is consistent with the findings that it has set out in its main determination."

The effect of the foregoing determination and this immediate order is that your registration will be suspended from the date on which notice of this decision is deemed served upon you. Unless you exercise your right of appeal, the substantive direction of erasure will be recorded in the dentists' register 28 days from the date of deemed service. Should you so decide to exercise your right of appeal, this immediate order of suspension will remain in place until the resolution of any appeal.

That concludes this case."