

HEARING PART-HELD IN PRIVATE

Professional Conduct Committee Initial Hearing

31 March to 4 April 2025

| Name: | EMAMI, Nariman |
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| Registration number: | 175607 |
| Case number: | CAS-206247-C4X7M7 |
| General Dental Council: | Sian Priory, Counsel Instructed by Holly Watt, IHLPS |
| Registrant: | Present Unrepresented |
| Fitness to practise: | Impaired by reason of misconduct |
| Outcome: | Suspension (with a review) |
| Duration: | 9 Months |
| Immediate order: | Immediate suspension order |
| Committee members: | Anthony Mole (Chair, Lay Member) Janhvi Amin (Dentist Member) Victoria Hewson (Dental Care Professional Member) |
| Legal Adviser: | William Hoskins |
| Committee Secretary: | Lola Bird |



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

EMAMI, Nariman, a dentist, Zahnarzt Berlin 2008 is summoned to appear before the Professional Conduct Committee on 31 March 2025 for an inquiry into the following charge:

The Charge (as amended)

"That being a registered dentist:

- 1. You failed to respond adequately to Person A's complaint about Person B's dental treatment.
- 2. You failed to have appropriate insurance or indemnity in place specifically from:
 - (a) 27 January 2019 to 30 April 2019; and/or
 - (b) 1 May 2020 until 31 July 2020.
- 3. From 14 September 2022 until at least 16 May 2023, you failed to cooperate with an investigation conducted by the GDC.
- 4. From at least April 2021 until 4 March 2025, you have failed to maintain a correct and up to date registered address.

And, by reason of the facts alleged, your fitness to practise is impaired by reason of misconduct."

Mr Emami,

1. This is a Professional Conduct Committee hearing in respect of a case brought against you by the General Dental Council (GDC).

2. You are representing yourself at these proceedings. The Case Presenter for the GDC is Ms Sian Priory, Counsel.

3. The hearing commenced on 31 March 2025 and is being conducted remotely by Microsoft Teams video-link.

4. On the morning of 31 March 2025, following your request, which was agreed by the GDC, the Committee adjourned the hearing to allow you additional time to prepare your case, and to ensure that you were in a comfortable environment with suitable technology to enable you to fully participate in the proceedings. The adjournment was extended to include the whole of the next day, 1 April 2025, to afford you time to obtain evidence, which both parties agreed would be relevant to the allegation relating to your indemnity. The hearing commenced formally on 2 April 2025.

Decision on preliminary application to amend the charge - 2 April 2025

5. At the outset of the hearing on 2 April 2025, Ms Priory made an application under Rule 18 of the *GDC (Fitness to Practise) Rules Order of Council 2006*, to amend the original charge (as set out in the Notice of Hearing dated 28 January 2025).

6. Ms Priory first applied to amend head of charge 2, which originally read:

"2. From at least 01 January 2019 to at least 31 December 2020 you failed to have appropriate insurance or indemnity in place".

7. Ms Priory submitted that the application to amend head of charge 2 was being made in light of documentation provided by you on 1 April 2025 and reviewed by the GDC. She submitted that the documentation indicated that there were two periods of time relevant to this case, during which you did not have professional indemnity in place. Ms Priory therefore applied to have those two time periods incorporated into the charge by amending head of charge 2 to read as follows:

- 2. You failed to have appropriate insurance or indemnity in place specifically from:
 - (a) 27 January 2019 to 30 April 2019; and/or
 - (b) 1 May 2020 until 31 July 2020.

8. Ms Priory also applied to amend head of charge 4 to include a date range. Head of charge 4 originally read:

"4. You have failed to maintain a correct and up to date registered address"

9. Ms Priory requested that head of charge 4 be amended to read:

From at least April 2021 until 4 March 2025, you have failed to maintain a correct and up to date registered address.

10. You submitted that you had no objection to the proposed amendments, and you confirmed that you understood the reasons for the application.

11. Having heard from both parties, and having accepted the advice of the Legal Adviser, the Committee granted the GDC's application to amend heads of charge 2 and 4. In reaching its decision, the Committee took into account that the proposed amendment to head of charge 2 was as a result of additional evidence provided by you, upon which both parties had reached an agreed position. The Committee noted that the proposed amendment to head of charge 2 would not cause any injustice, given that timeframe of that allegation would be narrowed in scope. The Committee also considered that the requested amendments, to both head of charge 2 and head of charge 4, would provide greater clarity and assist you in better understanding the GDC's allegations. In all the circumstances, the Committee was satisfied that in agreeing to the application, no injustice would be caused to either party.



12. The charge was amended accordingly.

Admissions to the charge – 2 April 2025

13. The Committee next heard your admissions to the charge. You admitted all the factual allegations, namely that:

- You failed to respond adequately to Person A's complaint about Person B's dental treatment.
- You failed to have appropriate insurance or indemnity insurance in place from 27 January 2019 to 30 April 2019 and from 1 May 2020 until 31 July 2020.
- You failed to cooperate with an investigation conducted by the GDC from 14 September 2022 until at least 16 May 2023.
- You failed to maintain an up to date registered address from at least April 2021 until 4 March 2025.

Decision on your admissions to the charge - 2 April 2025

14. The Committee was satisfied that your admissions were clear and unequivocal. It therefore accepted them and announced all the factual allegations in this case as 'proved by way of admission'. That concluded the first stage of the hearing.

Summary of the factual background

15. Ms Priory referred the Committee to the case background, as set out in her written opening note, dated 28 March 2025, which was provided to the Committee in advance of the hearing. A copy of the opening note was also provided to you.

16. Also before the Committee, were a number of witness statements provided by members of GDC and Dental Complaints Service (DCS) staff, outlining their involvement in this case in their various professional capacities.

17. The Committee noted that at the material time you were employed at a dental practice in London. However, since the receiving of the complaint in this case, you have informed the GDC that you returned to live in Germany in or around April 2021.

18. On 27 October 2021, Person A contacted DCS to make a complaint on behalf of Person B. The complaint was regarding dental implants that you provided to Person B.

19. After having been informed of the complaint on 9 February 2022, you replied to DCS on 16 February 2022 by way of an email, in which you apologised for the problems that Person B had experienced with their treatment. You also informed DCS that you had moved to Germany in May 2021 and referred to other personal circumstances.

20. Following your email of 16 February 2022, you provided no further responses or information, despite being contacted by DCS on numerous occasions between February and April 2022. On 16



May 2022, when attempts to maintain communication with you had failed, DCS wrote to inform you that it was closing the complaint and forwarding the matter to the GDC's fitness to practise department.

21. The GDC commissioned a Clinical Advice Report from an Implantologist. Whilst the author of that report was not critical of the dental care you provided to Person B, there was criticism of your apparent failure to engage with Person A's complaint.

22. As part of its investigation, the GDC contacted you to request that you provide confirmation of having appropriate indemnity in place during the period of the complaint, and to confirm your correct and up to date registered address.

23. You had still not provided the GDC with confirmation of your indemnity as at the start of this hearing on 31 March 2025. You did, however, provide some evidence of indemnity during the adjournment on 1 April 2025, which resulted in the amendment to head of charge 2. In relation to your registered address, the Committee noted from Ms Priory's opening note that on 4 March 2025 you updated your registered address with the GDC, in care of a UK address.

Stage Two of the hearing

24. The Committee's tasks at this second stage of the hearing are to consider whether the facts admitted and found proved amount to misconduct, and if so, whether your fitness to practise is currently impaired by reason of that misconduct. If the Committee determines that there is current impairment, it must go on to consider what sanction, if any, to impose on your registration.

25. The Committee would usually deliberate on the Stage Two matters sequentially and provide one determination encompassing all its decisions. However, given that you are unrepresented at this hearing, and English is not your first language, the Committee decided, with the agreement of the GDC, that it would first deliberate and hand down its decision on misconduct. Then, if necessary, it would proceed to deliberate separately on the issue of current impairment, and lastly, if current impairment is found, make its decision on any sanction. The Committee considered that dividing Stage Two into sub-stages would assist you in preparing any further evidence or making any further submissions in relation to the key issues to be determined.

Summary of parties' submissions and evidence in relation to misconduct - 2 April 2025

26. It was Ms Priory's submission that the facts admitted and found proved amount to misconduct. She submitted that this is a case in which you have accepted a failure to engage from the inception of Person A's complaint, throughout the involvement of DCS, and throughout the GDC's investigation. Ms Priory highlighted that this was a long period of time. She submitted that it is a fundamental expectation that a registrant engages with a patient's complaint to reach a resolution, and also engages with the GDC, so the regulator can ensure that the registrant is practising safely for the protection of the public and to maintain public confidence in the dental profession. Ms Priory submitted that your failings in not engaging were serious.

27. Ms Priory submitted that, similarly, having professional indemnity in place is a fundamental requirement to ensure that patients are protected in the event of any errors in their dental treatment. She submitted that the Committee may consider that your failure to have indemnity in place over the



two periods concerned was aggravated by the fact that you came to the attention of the GDC by way of a patient complaint.

28. In relation to your failure to maintain a correct and up to date registered address, Ms Priory submitted that this demonstrated your fundamental disregard for the GDC's essential function, in terms of being able to communicate with registrants to ensure safe practice.

29. It was Ms Priory's submission that the matters admitted and found proved represent a significant departure from a number of the GDC's *'Standards for the Dental Team'* (effective from September 2013) ('the GDC Standards').

30. You gave oral evidence to the Committee under Affirmation. You stated that you accepted everything Ms Priory had said regarding the duty of a registrant. You told the Committee that even though you moved to Germany in 2021, you maintained your UK registered address with the GDC which, you said, was the address of a friend. You stated that you had not viewed this as a problem, until your discussions with the GDC as part of this hearing, given that your friend had passed all your correspondence to you. You said that you believed that your registered address with the GDC had to be a UK address. You also highlighted that you had kept the same email address and phone number. You invited the Committee to note that you have recently changed your address with the GDC and stated that you now appreciate the importance of having a current and up to date registered address.

31. With regard to the issue of your indemnity, you said that you also agreed with the submissions of Ms Priory regarding the importance of having professional indemnity in place. You said that having indemnity was both in your interests and in the interests of patients. You told the Committee that you were aware of the difficulties that can arise from not having indemnity, including in terms of patients being unable to claim compensation.

32. In relation to the two periods that you were without indemnity, you stated that the period from 27 January 2019 to 30 April 2019 may have been around the time that you had changed indemnity provider, and there was some confusion over the specific extent of your cover. However, you said that you could not recall whether you had treated any patients during this first period. In respect of the second period, 30 May 2020 to 31 July 2020, you said that you did not know how this gap in your indemnity occurred. You said that it could have been that your direct debit did not go through. You stated that you did work during this second period in 2020, as you had initially been unaware of any issues with your indemnity cover at the time. However, you recalled that at some stage, a question was raised by your then employer about whether your indemnity details were correct, after which you said that you stopped working for a time. You said that this was because you recognised that to work without indemnity was not in the interest of the public or your own interests.

33. You also addressed Person A's complaint and your failure to cooperate with the GDC's investigation. You stated that you had replied to the GDC the best you could. You said that you no longer had access to Person B's records.

34. You told the Committee that you understand the GDC's position in this case, and that when you were in the UK you co-operated with the GDC as fast as you could and all the time. You said that you have learned a lot in the last few days about the importance of the issues that have been



highlighted and about your errors. You apologised for what happened and stated that this would not happen again in future.

35. Having heard your oral evidence, Ms Priory confirmed that she had nothing to add to her submissions on misconduct.

36. You made brief submissions reiterating that you had learned a lot, and apologising for the disadvantage to Person B. You stated that you would accept whatever the Committee decided, bearing in mind the GDC's role in protecting the public.

Decision on misconduct – 3 April 2025

37. The Committee considered whether the facts admitted and found proved amount to misconduct. It took into account that a finding of misconduct in the regulatory context requires a serious falling short of the professional standards expected of a registered dental professional. The Committee accepted the advice of the Legal Adviser.

- 38. The Committee was satisfied that the following GDC Standards are engaged in this case:
 - 1.8 You must have appropriate arrangements in place for patients to seek compensation if they have suffered harm.
 - 2.1 You must communicate effectively with patients listen to them, give them time to consider information and take their individual views and communication needs into account.
 - 5.3 You must give patients who complain a prompt and constructive response.
 - 9.4 You must co-operate with any relevant formal or informal inquiry and give full and truthful information.
 - 9.4.1 If you receive a letter from the GDC in connection with concerns about your fitness to practise, you must respond fully within the time specified in the letter. You should also seek advice from your indemnity provider or professional association.

39. The Committee first had regard to your failure to adequately respond to Person A's complaint about Person B's dental treatment. It was the view of the Committee that you had ample opportunity to respond to DCS and/or directly to the patient, but you did not do so. The Committee regarded this as a significant departure from the standard expected of you. In reaching its conclusion, the Committee took into account that you failed to reach any resolution with the patient over a significant period of time. Whilst it noted that you stated that you made some contact with the GDC in respect of the matter, it was not satisfied that there is any evidence before it of an adequate response to Person A's complaint.

40. In relation to your failure to have in place appropriate insurance or indemnity for the two periods concerned, the Committee noted that you provided broad reasons as to why these failings may have occurred. However, it bore in mind that it is your responsibility to ensure that you have



appropriate indemnity in place. Professional indemnity is a requirement of registration. The Committee considered that your failure to ensure that you had indemnity during the periods in question represented a serious and fundamental departure from the expected standards, given the serious risk of unwarranted harm to patients. In the absence of appropriate insurance or indemnity cover, any patients who experienced problems with dental treatment you provided would be unable to claim compensation. The Committee noted that in your oral evidence you acknowledged the importance of having indemnity. The Committee further took into account that there were two separate periods during which you did not hold indemnity, which demonstrates a repeated failure.

41. The Committee next considered your failure to engage with the GDC's investigation from 14 September 2022 to 16 May 2023. It was satisfied that this also amounted to a serious falling short of what was expected in the circumstances. The GDC Standards clearly indicate that if a concern is raised regarding a registrant, there is a duty on the registrant to engage and co-operate with any investigation into their fitness to practise. You failed to engage with the GDC's investigation over a sustained period of time. The Committee noted from the witness statements provided, which were not disputed by you, that several attempts were made by the GDC to contact you by email and by post. Whilst the Committee noted your evidence regarding your attempts to keep in contact the best you could, the documentary evidence provided indicates that you did not commence engagement with the GDC until 25 March 2024. In the Committee's view, you had numerous opportunities over the period in question to engage with the GDC's investigation, but failed to do so, even though you could have easily communicated from Germany. The Committee noted that you still maintained access to your email account.

42. Finally, the Committee had regard to your failure to maintain a correct and up to date registered address from at least April 2021 to 4 March 2025. It took into account your evidence that receiving correspondence from the GDC was made easier by your friend, who was able to forward all your post. However, this is not what the GDC requires. As a registrant you should have been aware of your obligation. The GDC must hold current and up to date details for its registrants to allow it to keep in contact with them, including in relation to any concerns. You failed to adhere to this basic and fundamental requirement. It is not difficult to change your registered address, yet you neglected do so over a lengthy period. The Committee was satisfied that this was a serious breach of the expected standards.

43. It was the decision of the Committee that the facts admitted and found proved, both individually and cumulatively, amount to misconduct.

44. The Committee now invites submissions and any further evidence in relation to the issue of current impairment.

Summary of parties' submissions and evidence in relation to impairment – 3 April 2025

45. In relation to the issue of impairment, Ms Priory submitted that it is the GDC's position that your fitness to practise is currently impaired on both the grounds of public protection and the wider public interest.

46. With regard to public protection, it was Ms Priory's submission that, given your failure to engage from the onset of a patient complaint, throughout the involvement of DCS, and also with the



GDC's investigation, the Committee could infer two broad things. The first, Ms Priory submitted, is that you have an underlying attitudinal issue towards compliance with the GDC. She submitted that the Committee may take the view that such an issue is difficult to remediate. Secondly, Ms Priory submitted, that there may be a risk of repetition, given the length of time over which the issues with your engagement continued, including in respect of the requests for evidence of your indemnity and an up to date address. Ms Priory submitted that the Committee may consider that your sporadic communication with the GDC suggested that you knew what the concerns were, but you chose not to engage.

47. Ms Priory submitted that it is positive that you have engaged with the hearing this week to the best of your ability. However, she also asked the Committee to take into account the delay in starting these proceedings, with the first two days of the hearing adjourned to allow you to find documentation in relation to your indemnity. She submitted that this demonstrated that you had not really considered or engaged with the GDC's case before Monday, 31 March 2025. Ms Priory submitted that the Committee could infer that you have not taken your professional obligations seriously since 2021, which is when the matters in this case first arose. She submitted that in the circumstances, it could not be said that the risk of repetition has been addressed.

48. In relation to the wider public interest, Ms Priory submitted that co-operation with the GDC is fundamental for anyone who wishes to hold registration. She submitted that if a finding of impairment is not made in this case on public interest grounds, especially given your late engagement, the reputation of the dental professional will be brought into disrepute.

49. You gave further oral evidence to the Committee under Affirmation. Part of your evidence was heard in private session in accordance with Rule 53 of the *GDC (Fitness to Practise) Rules Order of Council 2006*, as it related to your private and family life.

50. You stated that it was a fact that you did not respond *"perfectly"* to the GDC, but you said that you had made some efforts. You explained that your *"miscommunication"* with the GDC began when you moved back to Germany in 2021. You told the Committee that you had to work long hours on your initial arrival there, to complete further vocational training, as the vocational training that you completed in the UK was not recognised. You also said that you had to learn a lot to reintegrate yourself back into German society.

51. You referred to your personal circumstances around that time. [PRIVATE]. You said that you were providing this Committee with this information as an explanation of what your personal circumstances were, and not to excuse your misconduct.

52. You told the Committee that you had tried to communicate effectively with the patient concerned in this case, but you no longer had access to their records. You said you had informed the patient of this. You stated that you understand the need to put patients' interests first, and that when you were in the UK you had a lot of assistance with certain matters, including matters of your indemnity. You referred the Committee to some of the evidence you provided in relation to your past communications with the GDC. You accepted that when you moved to Germany your communication with the GDC, and the patient became *"really bad"*. You stated that this was not intentional.



53. You stated that your current personal circumstances are a lot better and that you are willing to co-operate with the GDC as you should do. You referred the Committee to the GDC Standards, which you stated you had now read.

54. Ms Priory confirmed that she had no further submissions to make following your evidence.

55. You made brief submissions stating that you were sorry for the whole situation. You apologised again to the patient and said that you had learn a lot in the last few days. You submitted that you are now in a better position to engage, and that you hoped the Committee could see that you were making an effort.

Decision on impairment – 3 April 2025

56. The Committee considered whether your fitness to practise is currently impaired by reason of your misconduct. It took account of all the evidence before it, including the further evidence provided by you at this juncture. That further evidence comprised evidence of your previous correspondence with the GDC about other matters, as detailed in a number of screenshots, evidence of enquires that you had made with the Dental Defence Union in 2021 regarding indemnity, and evidence of your Continuing Professional Development (CPD). The Committee also had regard to your further oral evidence.

57. The Committee took account of the submissions made by Ms Priory on behalf of the GDC.

58. The Committee accepted the advice of the Legal Adviser. It noted that its decision was for its independent judgement. The Committee had regard to the over-arching objective of the GDC, which is: the protection, promotion and maintenance of the health, safety, and well-being of the public; the promotion and maintenance of public confidence in the dental profession; and the promotion and maintenance of proper professional standards and conduct for the members of the dental profession.

59. The Committee had regard to the test endorsed in *CHRE v NMC and Grant* [2011] EWHC 927 (Admin), and in particular, Dame Janet Smith's formulation:

"Do our findings of fact in respect of the doctor's misconduct, deficient professional performance, adverse health, conviction, caution or determination show that his/her

fitness to practise is impaired in the sense that s/he:

а. ...

- b. has in the past brought and/or is liable in the future to bring the medical profession into disrepute; and/or
- c. has in the past breached and/or is liable in the future to breach one of the



fundamental tenets of the medical profession; and/or

d. ...

60. The Committee considered that sub-paragraphs (b) and (c) are engaged in this case with regard to the dental profession.

61. Your misconduct is of a serious nature, involving your lack of meaningful engagement over a sustained period of time with a patient complaint and an investigation conducted by the GDC. There is also your repeated failure to have professional indemnity in place. In considering these matters, the Committee acknowledged your difficult personal circumstances around the time, particularly in relation to your failings in communication. However, in its view, these circumstances did not excuse your conduct, most of which was behaviour that was prolonged over a significant period of time. The Committee noted that you accepted yourself that your personal circumstances were not an excuse.

62. It was the view of the Committee that the behaviour that led to your misconduct, although serious, is capable of being remedied. In considering whether it has in fact been remedied, it considered what steps you have taken to address your shortcomings.

63. The Committee took into account that you have engaged with the hearing this week, and in doing so, you have shown remorse for your misconduct and offered repeated apologies to the GDC and to the patient concerned. The Committee also considered that you have demonstrated developing insight into your past wrongdoing. It noted from your oral evidence that you are aware of what you should have done and what you might do differently if faced with similar circumstances in the future. This indicated to the Committee an element of self-reflection.

64. However, the Committee took into account that engagement is very recent. It also considered that it had not heard or received sufficiently detailed evidence from you to reassure it that your understanding into what went wrong in the past in terms of your engagement with the patient complaint, your engagement with your regulatory body and your ensuring that you had appropriate indemnity cover. The Committee considered your insight to be in the very early stages and was not reassured that it has been embedded into your behaviour.

65. The Committee found that the limitations around your insight were further demonstrated by the lack of any evidence of meaningful remediation. It noted that the CPD certificates that you have provided are in relation to generic CPD and that the latest certificate is dated 2021. The Committee has received no evidence of CPD targeted to the issues in this case, such as any learning on complaints handling, communication skills, and professional obligations around indemnity. There is also nothing before the Committee to indicate what you current working practices are in relation to communication and your organisational skills, including in relation to keeping up to date and responding to correspondence and any patient complaints. Also, given the sustained and prolonged nature of your misconduct, the Committee would have expected to see more detailed evidence of your self-reflection on all the events.



66. In all the circumstances, given the very early stage of your insight and the absence of any targeted remediation, the Committee was not satisfied that you fully appreciate the gravity of your misconduct. It therefore concluded that there is a risk of repetition which could give rise to a risk of harm. Co-operation with your regulatory body and having appropriate indemnity in place are fundamental to safeguarding the public. Accordingly, the Committee determined that a finding of current impairment is necessary in this case for the protection of the public.

67. The Committee also determined that a finding of current impairment is in the wider public interest. It considered that a reasonable and fully informed member of the public would be shocked, if such a finding were not made, given your serious breaches of fundamental GDC Standards. It was the judgement of the Committee that public confidence in the dental profession would be undermined if current impairment were not found. It also considered the need to maintain and uphold proper professional standards of conduct and behaviour.

68. In all the circumstances, the Committee determined that your fitness to practise is currently impaired by reason of your misconduct.

69. The Committee now invites submissions from both parties on the issue of sanction.

Summary of parties' submissions in relation to sanction – 4 April 2025

70. Ms Priory submitted that the GDC was seeking a 12-month suspension order with a review. She submitted that your engagement this week has been a good start, but that it is insufficient to reassure the Committee that you can return to practice in the UK without any restriction. It was Ms Priory's submission that there are no workable conditions that can be imposed on your registration to address the identified failings in this case. Further, she submitted that the Committee could not be satisfied of your ability and willingness to comply with conditional registration.

71. You told the Committee that you had read its decisions to date, and that you considered the hearing process had been fair. You thanked those involved for taking the time to ensure that you could respond to the allegations.

72. You submitted that you had initially thought that it would be fair to allow you the opportunity to return to unrestricted practice in the UK. You stated, however, that on reflection, you considered that it would be in your own interests for you to take some time to further educate yourself and to improve your skills in dealing with patient complaints, in communication, including your communication with the GDC, and in relation to the issue of indemnity. You invited the Committee to consider a shorter period of suspension which, you said, would enable you to discuss matters with the GDC earlier.

Decision on sanction – 4 April 2025

73. The Committee took account of the submissions made by both parties. It accepted the advice of the Legal Adviser. The Committee considered the issue of sanction in light of its decisions on misconduct and impairment.



74. In considering what sanction, if any, to impose on your registration, the Committee bore in mind that the purpose of a sanction is not to be punitive, although it may have that effect, but to protect the public and uphold the wider public interest. The Committee had regard to the '*Guidance for the Practice Committees including Indication Sanction Guidance*' (October 2016; last revised December 2020) ('the Guidance'). The Committee applied the principle of proportionality, balancing the public interest with your own interests.

75. The Committee first considered what it identified as the mitigating and aggravating factors in this case. It took into account the following in mitigation:

- Your remorse and apologies.
- Your recognition of your failings and your acknowledgement that corrective steps are required.
- Your early developing insight (as shown during the hearing).
- 76. In terms of aggravating factors, the Committee identified the following:
 - Unwarranted risk of harm to a patient, in terms of the potential impact of your failure to address the complaint made on the patient's behalf, so that they could have a resolution. Also, in relation to your repeated failure to have professional indemnity in place.
 - Breach of trust in relation to the patient-dentist relationship on account of your failure to respond to the patient's complaint.
 - Misconduct sustained or repeated over a period of time.
 - Blatant or wilful disregard of the role of the GDC and the systems regulating the profession.

77. Taking all the above factors into account the Committee considered the available sanctions. It started with the least restrictive, as it is required to do.

78. The Committee noted that it was open to it to conclude this case without taking any action in respect of your registration. However, given the serious nature of your misconduct and the identified risk of repetition, the Committee concluded that taking no action would be inappropriate. Such a course would not serve to protect the public, nor would it satisfy the wider public interest.

79. The Committee reached the same conclusion in respect of a reprimand. It found that the factors for imposing a reprimand do not apply in this case. The matters that have led to your current impairment are serious and there is an identified risk of repetition. In the circumstances, the Committee decided that a reprimand would not be sufficient, appropriate or proportionate.

80. The Committee next considered whether to impose a conditions of practice order. It took into account that conditional registration might be applicable where there are discrete aspects of a registrant's clinical practice that are problematic. There are no clinical concerns in this case. The issues in this case relate to professional and attitudinal failings, and the Committee decided that it could not formulate any workable conditions to address such matters. Accordingly, it was not satisfied that a conditions of practice order would be appropriate and proportionate to protect the public or the wider public interest.



81. The Committee went on to consider whether to suspend your registration for a specified period up to a maximum of 12 months. In doing so, it had regard to paragraph 6.28 of the Guidance which sets out factors relevant to the sanction of suspension. In this case, the Committee was satisfied that the following factors apply:

- There is evidence of repetition of the behaviour.
- Insufficient insight and remediation and therefore poses a risk of repeating the behaviour.
- Patients' interests would be insufficiently protected by a lesser sanction.
- Public confidence in the profession would be insufficiently protected by a lesser sanction
- There is no evidence of harmful deep-seated personality or professional attitudinal problems (which might make erasure the appropriate order).

82. The Committee noted that there are attitudinal concerns in this case on account of your failure to address a patient complaint, to engage meaningfully with your regulatory body over a sustained period of time, and your failings in relation to your indemnity. However, the Committee did not regard these as deep-seated attitudinal problems but the product of a lack of organisation and a poor understanding of the extent of your professional obligations. In reaching its conclusion, the Committee took into account that you have demonstrated remorse and that you have developed a level of insight to the extent that you understand that you were wrong to have neglected your professional obligations, and that there is a need to address your misconduct.

83. In deciding whether the suspension of your registration is appropriate and proportionate in all the circumstances, the Committee had regard to paragraph 6.34 of the Guidance which deals with erasure. This is because the Committee is required to consider the next available sanction. Whilst the Committee noted that there have been serious departures from relevant professional standards, it was not satisfied, looking at the circumstances of this case as it is now, that any of the other factors for erasure apply. Accordingly, the Committee decided that erasure would be disproportionate.

84. The Committee therefore determined that it is appropriate and proportionate to impose a suspension order on your registration for the protection of the public and to uphold the wider public interest. The suspension order is imposed for a period of 9 months. In deciding on this period, the Committee took into account the seriousness of your misconduct, the remorse you have shown, your developing insight, and that you are now engaging with the fitness to practise process. The Committee also considered that a period of 9 months' suspension would assist you to focus your attention on the significant amount of remediation that is needed for you to demonstrate your increased insight into the issues in this case, and what you have done by way of remediation.

85. Given that your insight is currently at a very early stage, and given the identified need for remediation, the Committee has also determined to direct a review. This means that a resumed hearing before the Professional Conduct Committee will be held shortly before the expiry of the 9-month period of suspension. That Committee will determine what further action to take in relation to your registration. You will be informed of the date and time of that hearing.

86. This Committee considered that it might be helpful for the reviewing Committee to receive the following from you:



- Evidence of your continued engagement with the GDC and this process, including that you have maintained a current and up to date registered address.
- If you have continued to practise outside of the UK, and if required, evidence of your professional indemnity/insurance.
- A written reflective piece in relation to all the issues in this case.
- Any evidence of relevant courses you have undertaken (e.g. Complaints Handling, Communication Skills, Administrative skills).
- Testimonials, including from professional colleagues.

87. Unless you exercise your right of appeal, your registration will be suspended for a period of 9 months, 28 days from the date that notice of this Committee's direction is served upon you.

88. The Committee now invites submissions from Ms Priory and from you, as to whether an immediate order of suspension should be imposed on your registration, pending the taking effect of the Committee's substantive direction for suspension.

Decision on an immediate order - 4 April 2025

89. Having determined to impose a substantive order of suspension in this case, the interim order currently in place on your registration is hereby revoked.

90. In considering whether to impose an immediate order of suspension on your registration, pending the taking effect of its substantive direction for suspension, the Committee took account of the submissions made by both parties. It accepted the advice of the Legal Adviser.

91. Ms Priory's submission was that such an order should be imposed in light of the risk factors identified by the Committee in its decisions, particularly those factors that place the public at risk.

92. You confirmed that you had no submissions to make in relation to an immediate order.

93. The Committee determined that the imposition of an immediate order of suspension on your registration is necessary for the protection of the public and is otherwise in the public interest.

94. The Committee has identified a risk of repetition in the case, given the very early stage of your insight and remediation into your misconduct, which was serious and sustained. In view of this identified risk, the Committee considered that it would be inconsistent not to impose an immediate order for the protection of the public. It took into account that in the absence of an immediate order you could potentially return to unrestricted practice in the UK during the appeal period, or for longer, in the event of an appeal.

95. The Committee was also satisfied that an immediate order is required in the wider public interest, given the gravity of the matters found proved. It considered that immediate action is necessary to maintain public confidence in the dental profession and the regulatory process, and to uphold proper professional standards of conduct and behaviour.

96. The effect of the foregoing substantive determination and this order is that your registration will be suspended to cover the appeal period. Unless you exercise your right of appeal, the



substantive direction for suspension for a period of 9 months will take effect 28 days from the date of deemed service.

97. Should you exercise your right of appeal, this immediate order will remain in place until the resolution of the appeal.

98. That concludes this determination.