

PUBLIC HEARING**Interim Order Committee
Initial Hearing****13 November 2023****Name:** HEBEISH, Rafik**Registration number:** 84006**Cas number:** CAS- 205017

General Dental Council: Tom Stevens, counsel/Case Presenter.
Instructed by Rosie Geddes IHLPS.**Registrant:** Present and represented by Ben Rich, counsel.
Instructed by Lauren Griffiths MDDUS

Outcome: Interim conditions of practice**Duration:** 15 months

Committee members: David Wood (Chair and Lay member)
Chantelle Moodie (DCP member)
Hall Graham (Dentist member)**Legal adviser:** Angus MacPherson**Committee Secretary:** Gurjeet Dhuper

The role of the Interim Orders Committee (IOC) is to undertake a risk assessment based on the information before it. Its role is to assess the nature and substance of any risk to the public in all the circumstances of the case and to consider whether it is necessary for the protection of the public, is otherwise in the public interest, or is in the registrant's own interests to impose an interim order on their registration. It is not the role of the IOC to make findings of fact in relation to any charge. That is the role of a differently constituted committee at a later stage in the process.

1. This is an IOC hearing which was conducted remotely via Microsoft Teams in line with current GDC practice. You are present at this hearing and are represented by Mr Ben Rich (Counsel). Mr Tom Stevens (Counsel) appears on behalf of the GDC.

Background and submissions

2. Mr Stevens outlined the background to the matters before the Committee as set out in the notice of hearing letter dated:

"On 20 September 2023, the Council's Casework Team referred a new case to the initial assessment team for their consideration following a complaint made to us arising from concerns surrounding your treatment to several patients. Alongside others, the concerns relate to the pre-treatment assessment, consent, and actual treatment of patients in relation to implant treatment, and include inappropriate treatment planning, failing to obtain informed consent, a high rate of failed implants, and failing to diagnose the reason for failure. The Council has obtained a report from a Clinical Dental Advisor ("CDA") who has identified serious deficiencies in your standard of clinical care, record keeping and conduct. The CDA has advised that you appear to be undertaking procedures which are outside of your competency and as a result, patients are frequently having implants fail. It is averred that as you are not appropriately diagnosing the reason for these failures, you are placing further implants which are destined to have a poor prognosis. The CDA has commented that whilst you do provide a consent form, informed consent has not been obtained due to the large number of risks, benefits and alternatives to treatment not being discussed appropriately. As such, patients are often unaware of the risks of treatment, particularly those who have pre-existing periodontal disease. This is a theme that the CDA has identified in several cases.

The CDA has also identified that a number of these patients have questionable mental capacity to consent to the treatment, and one patient received invasive treatment that was unnecessary and very costly.

An additional concern has been raised by the CDA that the debits and credits in the records do not balance and it appears some of the records may have been amended before being provided to the Council. When considering these factors together, you appear to exhibit a pattern of poor behaviour over a significant period of time.

The CDA's concluding view was that the standard of clinical care was significantly below the expected level."

3. Mr Stevens made an application on behalf of the GDC for an interim conditions of practice order to be imposed on your registration for a period of 15 months and referred to a set of draft conditions proposed by the GDC.

4. Mr Stevens submitted that there is a large area of agreement between the parties in this case. There is no opposition to the imposition of an interim order, nor is there any challenge in general terms to the GDC's submission that the proportionate order would be interim conditions. However, Mr Stevens submitted that there is some divergence as to the precise terms that the conditions should take if the Committee reach that stage in its decision making. He referred the Committee to the GDC proposed set of conditions and those that have latterly been proposed on your behalf.
5. Mr Stevens submitted that there is a range of concerns raised about your clinical practice that cover the whole of treatment, starting with pre-treatment investigations and assessment, consent process, actual treatment provided and after care practice. In Mr Stevens' submission, there is a real risk of repeat conduct with associated risks to patients, were you able to practice unrestricted. Some of the concerns relate to basic and fundamental aspects of dentistry in relation to obtaining informed consent and providing treatment that is clinically justified.
6. Mr Rich on your behalf submitted that whilst you accept the statutory test is passed, this does not amount to an admission that the concerns are substantiated. You have issues with many of the specifics of these complaints but understand that the Committee today is not here to settle factual disputes.
7. Mr Rich addressed the Committee on the clinical advisor's report, context, '*reassuring factors*' and informed it that you have engaged seriously and decided to stop doing implants even though you were fully entitled to continue. He submitted that you have undertaken relevant CPD and are currently undertaking a postgraduate implant course. Mr Rich submitted that the clinical advisor's criticisms are based on concerns a year prior to that report and that there have been no further complaints received. He also referred the committee to positive testimonials provided on your behalf.
8. Mr Rich submitted that you are in agreement with the GDC that an order of conditions would be sufficient to manage the concerns raised in this case. However, he submitted that there are some differences from the GDC about the necessary scope of the conditions which the GDC has laid out in a neutral and fair manner. He referred the Committee to the proposed conditions as amended by the defence and submitted an appropriate, workable and proportionate course of action that the Committee should take.

Decision on interim order

9. The Committee has considered all the information before it. It heard submissions by Mr Stevens and by Mr Rich. It accepted the advice of the Legal Adviser.

10. The Committee has borne in mind that its purpose is to assess the nature and substance of any risk to the public in all the circumstances of this case and to consider whether it is necessary for the protection of the public, is otherwise in the public interest, or is in your own interests to impose an interim order on your registration. In its considerations, the Committee has applied the principle of proportionality, balancing the public interest with your own interests.
11. The Committee considered that there is cogent information before it, encompassing serious concerns which are alleged to have caused harm to patients. The Committee notes that the concerns the clinical advisor has identified in relation to a significant number of patients covering a significant period of time and concludes that "*the standard of clinical care was significantly below the expected level.*" In the Committee's view, there is currently a risk of harm to patients if you were to practise as a dentist without there being some restriction on your registration. It further considers that the public interest is engaged, given the serious nature of the allegations.
12. Accordingly, the Committee is satisfied that it is necessary for the protection of the public and is otherwise in the public interest that your registration be subject to an interim order in accordance with Section 32(4) of the Dentists Act 1984.
13. The Committee first considered whether it would be sufficient and proportionate to place an interim order of conditions on your registration. In so doing, the Committee has had regard to the nature of the allegations against you and whether the risk of harm to the public can be met by an interim order of conditions. Having regard to these factors, the Committee is satisfied that an interim order of conditions will address that risk and is a proportionate order. It is also satisfied that you would comply with conditions as indicated by Mr Rich on your behalf and that conditions are workable. The Committee therefore directs that your registration be subject to an interim order of conditions for a period of 15 months. It is satisfied that this length of time is necessary for the GDC to complete its investigations into the allegations against you.
14. The Committee considered the GDC draft conditions and the proposed amendments suggested by Mr Rich in detail. It considered that the concerns have to be seen as a global picture in the context of your dental career as a whole. The Committee was of the view that the suggestions made by Mr Rich in relation to the level of supervision and practising single-handedly to be proportionate in the circumstances of this case. A lower level of supervision would be sufficient to protect of the public.
15. The Committee agreed entirely with Mr Rich's proposed amendments to the draft conditions.

The following conditions are set out as they will appear against your name in the Register:

1. He must notify the GDC within 7 days of any post he accepts for which GDC registration is required and the Commissioning Body on whose Dental Performers List he is included.
2. If employed, he must provide contact details of his employer to the GDC within 7 days of

this determination and allow the GDC to exchange information with his employer or any contracting body for which he provides dental services.

3. He must inform the GDC within 7 days of any formal disciplinary proceedings taken against him, from the date of this determination.
4. He must inform the GDC within 7 days of any complaint made against him, from the date of this determination.
5. He must inform the GDC if he applies for dental employment outside the UK, within 7 days of such an application being made.
6. He must not work as a locum or undertake any out-of-hours work or on-call duties.
7. At any time he is employed, or providing dental services, which requires him to be registered with the GDC, he must place himself and remain under the supervision of a workplace supervisor nominated by him, and agreed by the GDC. The supervisor is to oversee his practice as it relates to the assessment of patients for possible implants, preparing for or placing implants and aftercare relating to implants.
8. The involvement of a workplace supervisor is only required for dental implant services. Non-implant services may be provided without a workplace supervisor in place.
9. He must not start or restart implant services until the workplace supervisor has been approved by the GDC.
10. He must allow his workplace supervisor to provide reports concerning implants to the GDC every three months and at least 14 days prior to any review. The reports will include details of the discussions and any action points resulting from the one-to-one meetings and cover (including but not limited to) the following areas of clinical practice as they relate to the assessment of patients for possible implants, preparing for or placing implants and aftercare relating to implants:
 - Record keeping
 - Consent
 - Pre-treatment assessment
 - Diagnosis and treatment of periodontal disease
 - Treatment planning
 - Risks and benefits of treatment

11. After assessing a patient as suitable for implants, and before the course of treatment is started, he must present the assessment, clinical rationale, consent process, treatment plan (including any pre-implant periodontal treatment) and proposed charges to his supervisor. He must not start the implant treatment unless his supervisor has considered and approved the matters set out in this condition.
12. After any implant is placed, he must present the case again to his supervisor and discuss the success or otherwise of the procedure, and plans for follow-up or aftercare. If the patient returns with issues related to an implant, the case must be presented again to the supervisor at the meeting following the return of the patient.
13. He must complete and submit a log of cases relating to the clinical areas set out in condition 10, approved by his workplace supervisor, to the GDC every three months and at least 14 days prior to any review hearing.
14. He must allow the GDC to exchange information with his Workplace Supervisor.
15. He must inform within 7 days the following parties that his registration is subject to the conditions, listed at 1 to 14 above, and provide evidence to the GDC that this has been done:
 - a. Any organisation or person employing or contracting with him to undertake dental work;
 - b. Any prospective employer (at the time of application);
 - c. The Commissioning Body or Health Board in whose Dental Performers List he is included or seeking inclusion (at the time of application);
 - d. Every member of the dental team and all employees at the practice(s) where he works. They must also be informed that they should contact the workplace supervisor immediately if they are concerned about his fitness to practise and/or his compliance with the conditions for the workplace supervisor to include within their report.
16. He must permit the GDC to disclose the conditions, listed at 1 to 15 above, to any person requesting information about his registration status.

supervision

Supervised

The registrant's day to day work must be supervised by a person who is registered with the GDC in their category of the register or above. The supervisor need not work at the same practice as the registrant, but must make themselves available to provide advice or assistance should they be required. The registrant's work must be reviewed at least once fortnightly by the supervisor via one to one meetings and case-based discussion. These fortnightly meetings must be focused on all areas of concern identified by the conditions/undertakings. These meetings should take place face to face however, as a minimum, at least one of the two meetings must be face to face per month.

****Single-handed dental practice**

A dentist operating as a sole practitioner without the support of other dentists is working single-handedly. If this is the case, the registrant may not be safe to practise without daily contact from a supervisor or without having the option of seeking assistance from a supervisor on site. In those circumstances it may be appropriate to deny a registrant the right to work single-handedly, for the protection of the public.

The order will take effect from today.

Unless there has been a material change of circumstances, the Committee will review the interim order on the papers at an administrative meeting within the next six months. The Committee will be invited by the GDC to confirm the order and you will be asked whether there are any written submissions to be put before the Committee on your behalf. You will then be notified of the outcome in writing following the decision of the Committee.

Alternatively, you are entitled to have the interim order reviewed at a hearing. This means that you will be able to attend and make representations, send a representative on your behalf or submit written representations about whether the order continues to be necessary. You must inform the GDC if you would like the interim order to be reviewed at a hearing.

Even if you do not request a hearing, where there has been a material change of circumstances that might mean that the order should be revoked, varied or replaced, the Committee will review the order at a hearing, which you and your representative will be invited to attend.

That concludes this determination.