PUBLIC HEARING

Professional Conduct Committee
Initial Hearing

2 to 4 December 2024

Name:	FIAZ, Mohammed
Registration number:	72288
Case number:	CAS-206444

General Dental Council:	David Collins, Counsel Instructed by JoJo Navarro-Schrank, Capsticks LLP
Registrant:	Not Present Represented by Stephen Brassington, Counsel Instructed by Charlotte Ellis, DWF LLP

Outcome:	Fitness to Practise Not Impaired. Case Concluded.

Committee members:	Aysha Ahmed-Kibria	(Chair, Dentist Member)
	Alastair Smith	(Lay Member)
	Tanya Viehoff	(Dental Care Professional Member)
Legal Adviser:	Lucia Whittle-Martin	
Committee Secretary:	Lola Bird	

FIAZ, Mohammed, a dentist, BDS Lond 1996 is summoned to appear before the Professional Conduct Committee on 2 December 2024 for an inquiry into the following charge:

The charge

"That, being a registered dentist (72288), whilst in practice as a dentist at the Practice (identified in Schedule 1 below*):

1. On or prior to 12 April 2022, you failed to adequately or at all ensure appropriate standards at the Practice in respect of:

(a) decontamination and/or infection control as set out in Schedule 2;

(b) emergency equipment and/or medicines as set out in Schedule 3;

(c) Covid transmission risks as set out in Schedule 4;

(d) fire safety as set out in Schedule 5;

(e) practice governance in that a principal or practice manager log was not completed and/or maintained.

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

Schedule 1

*Schedule 1 is a private document which cannot be disclosed.

Schedule 2

	Deficiencies in Practice infection control practice and/or procedures
i.	Practice cleaning schedules were not carried out and/or completed
ii.	No Opening Checklist addressing surface cleaning
iii.	Inadequate janitorial cleaning equipment

iv.	One or more treatment rooms had unsealed floors
v.	One or more sterilised instrument pouches were not dated
vi.	Inadequate testing, maintenance, and/or validation of the ultra-sonic bath autoclave
vii.	Staff did not wear appropriate PPE and/or adequately change the PPE they were wearing
viii.	Staff did not clean their hands adequately or at all during the decontamination process
ix.	The decontamination room was cluttered and/or dirty
x.	One or more instruments were not kept moist whilst awaiting decontamination
xi.	One or more instruments were not dried following decontamination
xii.	No or no adequate clean box for transporting of instruments
xiii.	No or no adequate infection prevention and control training

Schedule 3

	Deficiencies in emergency equipment/medicines practice and/or procedures
i.	Out of date first aid kit and/or without eye wash
ii.	No or no adequate checklists or logs to demonstrate staff checks on medical equipment
iii.	No or no adequate Basic Life Support Training

Not present emergency drugs:	
iv.	Glyceryl trinitrate spray
v.	Adrenaline injection
Out of date emergency drugs:	
vi.	Oral glucose
vii.	Midazolam
Missing emergency equipment:	
viii.	Pocket mask with oxygen port
Out of date emergency equipment:	
ix.	Oropharyngeal airways
x.	Self-inflating bag with reservoir (adult)
xi.	Clear face mask for self-inflating bag;
xii.	Oxygen face mask with reservoir and tubing;
xiii.	External defibrillator pads (adult and child);
xiv.	Portable oxygen cylinder
Faulty emergency equipment:	
xv.	Defibrillator battery
Incorrectly stored and/or maintained emergency medicines:	
xvi.	Glucagon

Schedule 4 (as amended)

	Deficiencies in mitigating Covid transmission risks
i.	One or more staff members and/or service users did not wear face masks
ii.	No or no adequate signage to clean and/or sanitise hands
iii.	WITHDRAWN.

Schedule 5 (as amended)

	Deficiencies in fire safety and/or procedure
i.	WITHDRAWN.
ii.	Undated fire door check log
iii.	Out of date fire extinguisher monthly checks
iv.	Out of date fire drill checks
v.	Out of date monthly smoke detector log
vi.	Out of date smoke detector battery check

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

2. The hearing commenced on 2 December 2024 and is being conducted remotely by Microsoft Teams video-link.

3. Mr Fiaz is not present at these proceedings, but is represented by Mr Stephen Brassington, Counsel. The Case Presenter for the GDC is Mr David Collins, Counsel.

Admissions to the charge – 2 December 2024

4. At the outset of the hearing, Mr Brassington told the Committee that Mr Fiaz admitted all the factual allegations at heads of charge 1(a), 1(b), 1(c), 1(d) and 1(e), with the exception of the particulars that were detailed at Schedule 4 (iii) and Schedule 5 (i).

Decision on application to amend the charge – 3 December 2024

5. Prior to considering the admissions made on behalf of Mr Fiaz, the Committee determined an application made by Mr Collins to amend the charge under Rule 18 of the *GDC (Fitness to Practise) Rules Order of Council 2006* ('the Rules').

6. Mr Collins' application was to withdraw the disputed particulars from Schedule 4 (iii) and Schedule 5 (i). He submitted that sufficient admissions had been made for this case to proceed for the protection of the public and in the wider public interest.

7. Mr Brassington made no observations in relation to the application.

8. Having heard from both parties and having accepted the advice of the Legal Adviser in relation to its discretion under Rule 18 to amend the charge at any stage before making its findings of fact, the Committee acceded to Mr Collins' application. The Committee had regard to the merits of the case and the fairness of the proceedings, and it was satisfied that the proposed withdrawals could be made without injustice.

FINDINGS OF FACT – 3 December 2024

9. The effect of the withdrawal of the particulars from Schedule 4 (iii) and Schedule 5 (i) was that Mr Fiaz fully admitted all the factual matters set out in the charge, as amended.

10. In considering Mr Fiaz's admissions, the Committee had regard to the *'Guidance on admissions made at the preliminary stage of fitness to practise hearings'* (issued in October 2022).

11. The Committee noted paragraph 2.9 of the guidance on admissions which states, *"Whilst Rule 57(4) states that it shall be for the GDC to "prove any fact alleged in the notification of hearing", that requirement must be taken to exclude facts that are admitted pursuant to Rule 17(4) and, in effect, the GDC discharges the obligation to "prove" an alleged fact by reliance on the registrant's formal admission of its truth at the preliminary stage".*

12. The Committee was satisfied that the admissions made on Mr Fiaz's behalf were clear and unequivocal, and it was content to accept them. Accordingly, the Committee announced the factual allegations at heads of charge: 1(a), 1(b), 1(c) (in relation to Schedule 4 as amended), 1(d) (in relation to Schedule 5 as amended) and 1(e), as 'admitted and found proved'.

13. That concluded the factual inquiry at Stage One of the proceedings.

Background to the facts found proved

14. Before proceeding to make his submissions in respect of the matters to be considered at Stage Two of the hearing, Mr Collins outlined the background to the factual matters admitted and found proved.

15. Mr Collins told the Committee that, at the material time, Mr Fiaz was the Practice Principal and registered provider at the dental practice concerned ('the Practice').

16. On 12 April 2022, the Care Quality Commission (CQC) conducted an unannounced inspection of the Practice. Mr Collins referred the Committee to the witness statement dated 26 November 2024, from Witness 1, an Oral Health Inspector for the CQC, who was one of the two inspectors that visited the Practice on 12 April 2022. In her witness statement, which was agreed by both parties, Witness 1 sets out that extensive concerns were identified at the Practice. Mr Collins also drew the Committee's attention to the copy of the CQC inspection report in respect of the 12 April 2022 visit.

17. In light of the concerns, Mr Fiaz was notified under Section 31 of the Health and Social Care Act 2008, that his CQC registration was suspended from 14 April 2022 for a period of two months until 13 June 2022.

18. On 27 April 2022, an early follow-up inspection of the Practice was undertaken by the CQC. During that inspection, it was noted that there was evidence that Mr Fiaz had addressed many of the issues previously identified. A copy of the CQC inspection report in respect of the 27 April 2022 visit was also before the Committee. Mr Collins noted that, whilst some governance concerns remained outstanding at that time, the CQC considered that Mr Fiaz had addressed all the safety concerns, and the Practice was permitted to re-open on that day, 27 April 2022. The CQC issued a warning notice, and a further follow-up visit was arranged for 20 July 2022.

19. Following the CQC inspection on 20 July 2022, it was deemed that the Practice was no longer in breach of the Health and Social Care Act 2008. The Practice has remained open since the end of April 2022.

20. Mr Collins told the Committee that the concerns raised by the CQC were referred to the GDC. He highlighted that Mr Fiaz's observations made to the GDC's Case Examiners in January 2024, in respect of the then allegations, included wide-ranging admissions.

21. As part of its investigation, the GDC obtained an expert report from Mr Conor Mulcahy who opined that, as the registered provider, Mr Fiaz had a legal obligation to ensure that the Practice complied with the requirements of the Health and Social Care Act 2008. Mr Mulcahy's report, dated 17 September 2024, was agreed by both parties.

22. Mr Collins drew the Committee's attention to Mr Mulcahy's expert opinion given in his report, regarding the concerns identified by the CQC at the Practice. Mr Collins highlighted those matters that Mr Mulcahy considered fell far below the standard expected, both individually and collectively. Mr Collins told the Committee that Mr Mulcahy's criticisms had formed the basis of the allegations set out in the charge against Mr Fiaz, which have all been admitted.

Stage Two of the hearing – 3 to 4 December 2024

23. The Committee's task at this second stage of the hearing has been to determine whether the facts found proved against Mr Fiaz amount to misconduct, and if so, whether his fitness to practise is impaired by reason of that misconduct. The Committee took into account that if it found current impairment, it would need to determine what sanction, if any, to impose on Mr Fiaz's registration.

24. In reaching its decisions, the Committee considered all the evidence placed before it. This included the expert report prepared by Mr Mulcahy, as well as Mr Fiaz's witness statement provided in respect of this hearing, dated 28 November 2024. The Committee also received a 'Stage 2' bundle of documents submitted on Mr Fiaz's behalf which comprised an *'Infection control self-assessment audit'* in respect of the Practice dated 10 February 2024, evidence of Mr Fiaz's Continuing Professional Development (CPD) and a number of testimonials.

25. The Committee took account of the submissions made by Mr Collins and Mr Brassington in relation to misconduct, current impairment and sanction.

26. The Committee accepted the advice of the Legal Adviser. It bore in mind that its decisions were for its independent judgement. There is no burden or standard of proof at this stage of the proceedings.

Summary of the submissions made by the parties

27. In accordance with Rule 20(1)(a) of the Rules, Mr Collins confirmed that Mr Fiaz has no fitness to practise history before the GDC.

28. In addressing the Committee on the issue of misconduct, Mr Collins referred to relevant case law. He outlined that misconduct can be described as an act or omission which falls short of what would be proper in the circumstances. Mr Collins emphasised that any falling short must be serious, and that the standard of propriety may often be found by reference to the applicable professional standards. In this regard, he drew the Committee's attention to a number of the GDC's '*Standards for the Dental Team'* (effective from September 2013) which, he submitted, had been breached by Mr Fiaz.

29. Mr Collins highlighted Mr Mulcahy's opinion that there were serious and widespread failings on Mr Fiaz's part. It was Mr Collins' submission, based on Mr Mulcahy's expert evidence, that these failings fell far short of what was expected. Mr Collins invited the Committee to find that the facts admitted and found proved in this case amount to misconduct.

30. In relation to current impairment, Mr Collins told the Committee that the GDC made no express submission as to whether Mr Fiaz's fitness to practise is currently impaired. Mr Collins submitted that current impairment was a matter for the Committee's independent judgement. He stated that the GDC acknowledged the remedial steps taken by Mr Fiaz following the initial CQC inspection in April 2022, as well as the evidence of remediation contained within the material provided on his behalf at this hearing. Mr Collins stated that he did not invite the Committee to conclude that there is a risk of repetition. He submitted however, that the Committee should have regard to the wider public interest, and he referred it to the legal authority of *Council for Healthcare Regulatory Excellence v Nursing Midwifery Council and Grant* [2011] EWHC 927 Admin. Mr Collins asked the Committee to consider whether a finding of current impairment is required in the circumstances of Mr Fiaz's case, to uphold proper professional standards and public confidence in the dental profession.

31. Mr Collins submitted that if the Committee determined that Mr Fiaz's fitness to practise is currently impaired, it should consider the issue of a sanction. He referred the Committee to the *'Guidance for the Practice Committees including Indicative Sanctions Guidance'* (effective from October 2016; last revised in December 2020), in particular, the guidance in relation to issuing a reprimand.

32. Mr Brassington told the Committee that it was not disputed that there is misconduct in this case of a serious nature.

33. Mr Brassington submitted that it had been conceded by the GDC that repetition is unlikely. He submitted that he agreed that the Committee's focus should be on whether the wider public interest demands a finding of current impairment in the circumstances of this case. It was Mr Brassington's submission that such a finding is not necessary.

34. Mr Brassington asked the Committee to take into account Mr Fiaz's explanation that he let standards slip at the Practice, where he has been Principal for 21 years, having practised as a dentist for 27 years. Mr Brassington submitted that whilst not intended as excuse, it should be noted that the identified failings occurred in the context of the Covid-19 restrictions and Mr Fiaz stepping back from regular daily attendance at the Practice.

35. Mr Brassington submitted that Mr Fiaz fully accepts that the concerns raised by the CQC were his responsibility, for which he is regretful. Mr Brassington further submitted that once the failings were pointed out to him, Mr Fiaz's response was exemplary, resulting in the re-opening of the Practice within two weeks. Mr Brassington highlighted that the CQC report of July 2022 concluded that the Practice was safe and well-led. It was Mr Brassington's submission that Mr Fiaz's insight is complete, and he invited the Committee to consider his contrition as set out in his witness statement.

36. Mr Brassington urged the Committee to bear in mind that the case of *Grant* does not provide that current impairment must be found on wider public interest grounds. He submitted that it was a matter for the Committee's discretion. Mr Brassington asked the Committee to take into account a number of factors when reaching its decision, including Mr Fiaz's response to the concerns, his genuine remorse, that he has been subject to exhaustive investigations by the CQC and GDC, and that he has accepted misconduct.

37. Mr Brassington invited the Committee to conclude that Mr Fiaz's fitness to practise is not currently impaired. Mr Brassington submitted that if the Committee did find current impairment, it should not impose a sanction higher than a reprimand.

Decision on misconduct

38. The Committee considered whether the facts found proved against Mr Fiaz 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. Having had regard to the GDC's *'Standards for the Dental Team'*, the Committee considered that the following GDC Standards are engaged in this case:

1.5 You must treat patients in a hygienic and safe environment.

1.9 You must find out about laws and regulations that affect your work and follow them.

6.6 You must demonstrate effective management and leadership skills if you manage a team.

7.1 You must provide good quality care based on current evidence and authoritative guidance.

9.1 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.

39. Mr Fiaz admitted, and the Committee found proved, that there were numerous and wide-ranging failings at the Practice in relation to decontamination, infection control, emergency equipment and medicines, mitigating Covid transmission risks in the context of the Covid-19 pandemic, fire safety and issues of governance.

40. It was the view of the Committee that there was a basic and fundamental failure by Mr Fiaz, as the registered provider at the Practice, to ensure the protection of patients and the safety of colleagues. The Committee took into account that Mr Fiaz's registration with the CQC was initially suspended due to the nature and extent of the concerns.

41. The Committee considered that the identified deficiencies were serious. In its opinion, Mr Fiaz's admitted conduct of failing to ensure appropriate standards at the Practice would be regarded as deplorable by fellow dental professionals. The Committee accepted the expert evidence of Mr Mulcahy that there were multiple and widespread failings at the Practice, for which Mr Fiaz was

ultimately responsible. For a period of time, the Practice was operating in breach of a number of relevant safety standards, as well as the GDC standards outlined above.

42. Having taken all the evidence into account, the Committee was satisfied that the facts found proved in this case, both individually and cumulatively, amount to misconduct. The Committee noted that Mr Fiaz accepts that misconduct is made out in this case.

Decision on current impairment

43. The Committee next considered whether Mr Fiaz's fitness to practise is currently impaired by reason of his misconduct. It 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.

44. The Committee took into account the submissions made on Mr Fiaz's behalf regarding the context in which the deficiencies occurred, including that since September 2021, Mr Fiaz had stepped back from attending the Practice on a daily basis, having employed two full time Associate Dentists. However, the Committee also took into account that some of the identified concerns were not isolated in nature but were issues that had persisted over a period of time, and that Mr Fiaz was still attending the Practice to work at weekends. In the Committee's view, many of the failings should have been apparent to him.

45. The Committee considered that the failings identified in this case, although serious, multiple and wide-ranging, are in relation to issues that are capable of being remedied. Furthermore, the Committee was satisfied that they have been remedied. It noted that Mr Fiaz took immediate action to address the concerns when they were brought to his attention, and that he did so within a short period of time. The Committee considered that this demonstrated a good level of insight. Mr Fiaz recognised where he had gone wrong and understood what he needed to do to rectify matters. The Committee had regard to Mr Fiaz's candid admission in his witness statement that he should have had more oversight of the Practice and his apology for *"allowing my own high standards to slip".*

46. In addition, the Committee considered the evidence of remediation provided at the hearing, including the evidence of Mr Fiaz's CPD and the Infection Control self-assessment audit for the Practice.

47. It was the view of the Committee, having considered the evidence of Mr Fiaz's remediation and demonstrated insight, that the risk of repetition is low. The Committee noted that the Practice has remained open since the end of April 2022, with no evidence of further safety concerns. Accordingly, the Committee did not consider that a finding of current impairment is necessary for the protection of the public.

48. The Committee carefully considered whether a finding of current impairment is required in the wider public interest. Mr Fiaz's failings breached fundamental tenets of the dental profession and, in the Committee's view, brought the profession into disrepute. Therefore, the wider public

interest is engaged in this case. However, the Committee did not consider that this was to the extent that a finding of impairment is necessary.

49. In reaching its conclusion, the Committee took into account the level of remediation undertaken by Mr Fiaz to quickly address the identified concerns, his demonstration of insight, his apology and his expressions of remorse. The Committee also took into account that it has been over two years since the matters in this case arose, and during that time Mr Fiaz has engaged with the CQC and this fitness to practise process. It was the judgement of the Committee, taking all these factors into account, that public confidence in the dental profession and the upholding of professional standards would not be undermined if a finding of impairment were not made in the circumstances of this case. The Committee was satisfied that its finding of misconduct, which is a serious outcome, is sufficient to satisfy the wider public interest.

50. The Committee determined that Mr Fiaz's fitness to practise is not currently impaired by reason of his misconduct.

51. That concludes this determination.