

HEARING PART HELD IN PRIVATE**Professional Conduct Committee
Initial Hearing****31 March 2025 – 2 April 2025****Name:** ULLATHORNE, Andrew Robert**Registration number:** 77940**Case number:** CAS-203089-P1N0P3

General Dental Council: Christopher Hamlet, Counsel
Instructed by IHLPS**Registrant:** Not Present
Unrepresented

Fitness to practise: Impaired by reason misconduct and adverse health condition**Outcome:** Erased**Immediate order:** Immediate suspension order

Committee members: Susan Stevens (Dentist) (Chair)
Julie Byrom (DCP)
James Hurden (Lay)**Legal adviser:** Alan Gogarty**Committee Secretary:** Jenny Hazell

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.

Charge

“That being a registered Dentist:

1. You have an adverse physical condition, specified at Schedule 1¹.
2. Between 26 August 2021 and 28 March 2023, you:
 - a) failed to respond to correspondence from the GDC in respect of its investigation;
 - b) failed to register an effective address for correspondence with the GDC.
3. Between 3 October 2016 and 27 July 2018, you made claims from the NHS for long term sickness whilst continuing to submit claims for work conducted.
4. Your conduct at 3, above, was:
 - a) Misleading;
 - b) Dishonest

AND that, by reasons of the facts alleged, your fitness to practise is impaired by reason of your misconduct and/or health condition.”

¹ Schedule 1 is a private document that cannot be disclosed.

1. This is a Professional Conduct Committee hearing in respect of a case brought against Mr Ullathorne by the General Dental Council (GDC).
2. The hearing commenced on 31 March 2025, and is being conducted remotely by Microsoft Teams video-link.
3. Mr Ullathorne is neither present nor represented at the hearing. The Case Presenter for the GDC is Mr Hamlet, Counsel.

Application to proceed with the hearing in the absence of the registrant - 31 March 2025

4. At the outset, Mr Hamlet made an application pursuant to Rule 54 of the GDC (Fitness to Practise) Rules Order of Council 2006 ('the Rules'), to proceed with the hearing notwithstanding Mr Ullathorne's absence.
5. The Committee took account of Mr Hamlet's submissions in respect of the application, as well as the information contained in the GDC's Hearing bundle. The Committee has accepted the advice of the Legal Adviser on the issues of service and proceeding in the absence of a registrant.

Decision on service – 31 March 2025

6. The Committee first considered whether the Notice of Hearing (the Notice) had been served on Mr Ullathorne in accordance with Rules 13 and 65 and Section 50A(2) of the Dentists Act 1984 (as amended) ('the Act').
7. The Committee had sight of the Notice of Hearing dated 20 February 2025 ('the notice'), which was sent to Mr Ullathorne's registered address by Special Delivery on 20 February 2025.
8. The Committee was satisfied that the address shown on the Notice is the same address as that shown in the bundle as being Mr Ullathorne's registered address with the GDC. The Royal Mail 'Track and Trace' receipt confirmed that the Notice was delivered to Mr Ullathorne's registered address and was signed for in the name of 'CRIFT SHIF' on 21 February 2025.
9. In light of the information before it, the Committee considered that the Notice sent to Mr Ullathorne on 20 February 2025 complied with the 28-day notice period required by the Rules. Further, the Notice contained all the required particulars, including the date and time of the hearing, confirmation that it would be held remotely by Microsoft Teams, and that the Committee had the power to proceed with the hearing in the absence of Mr Ullathorne.
10. In addition, the Committee noted that the Notice was sent to Mr Ullathorne's nominated registered email address on 20 February 2025.
11. On the basis of all the information provided, the Committee was satisfied that the Notice had been served on Mr Ullathorne in accordance with the Rules and the Act.

Decision on whether to proceed with the hearing in the absence of the registrant

12. The Committee next considered whether to exercise its discretion under Rule 54 to proceed with the hearing in the absence of Mr Ullathorne. It took into account the factors to be considered in

reaching its decision, as set out in the case of *R v Jones* [2003] 1 AC 1HL, and as affirmed in the regulatory case of *General Medical Council v Adeogba* [2016] EWCA Civ 162.

13. The Committee bore in mind the need to be fair to Mr Ullathorne as well as the GDC and the public interest in the expeditious disposal of this case.

14. The Committee was satisfied that all reasonable efforts had been made by the GDC to notify Mr Ullathorne of this hearing. The Notice was delivered to Mr Ullathorne's registered address on 21 February 2025. No response has been received from Mr Ullathorne as to whether he would be attending the hearing and/or be legally represented.

15. The Committee has borne in mind the absence of any response from Mr Ullathorne in relation to this hearing, which is consistent with his indication to the GDC by email on 28 April 2023 that he had "*absolutely no intention of returning to dentistry in any form in the future*" and seeing "*..no advantage in myself or for that matter the GDC continuing any further with the process...*". The Committee notes from the correspondence contained in the GDC's bundle that Mr Ullathorne proceeded thereafter to make an application for Voluntary Removal.

16. In these circumstances, the Committee has concluded that Mr Ullathorne has no intention of engaging with this process. The Committee has noted that there has been no request for an adjournment from, or on behalf of, Mr Ullathorne. Indeed, there is no information before it to suggest that adjourning this hearing would secure Mr Ullathorne's attendance on a future date given his indication that he has no intention of returning to dentistry. The Committee is satisfied that Mr Ullathorne's absence is voluntary and concluded that an adjournment would serve no meaningful purpose.

17. The Committee considers that the allegations in this case, which include dishonesty as well as an alleged health impairment, are serious. In the Committee's view, both give rise to substantive potential risks to the public and public confidence which ought to be determined without undue delay. It notes that there are several GDC witnesses in this case and has borne in mind the potential inconvenience to those witnesses should the hearing not proceed within the time allowed.

18. In all the circumstances, the Committee has determined that it was fair and in the public interest to proceed with the hearing in the absence of Mr Ullathorne.

Application for the hearing to be held partly in private – 31 March 2025

19. Thereafter Mr Hamlet made an application under Rule 53(2) that part of the hearing be heard in private since some of the matters in this case concern the health of Mr Ullathorne. He submitted that the matters relating to Mr Ullathorne's health (specified at Charge 1) should be dealt with in private so as to protect Mr Ullathorne's private life. The other matters in this case, as set out at Charges 2 to 4, concern Mr Ullathorne's conduct, and can be considered in public.

20. The Committee has accepted the advice of the Legal Adviser.

21. The Committee has borne in mind that, as a starting point, hearings should be conducted in public session. However, given that this case concerns matters partly relating to Mr Ullathorne's health, the Committee is satisfied that Mr Ullathorne's personal interests outweighed the public interest in this case. It has therefore determined to move into private session when reference is made to Mr Ullathorne's health. Accordingly, it acceded to the GDC's request under Rule 53(2).

Case background

22. Mr Hamlet outlined the background to Mr Ullathorne's case. Concerns relating to Mr Ullathorne were brought to the attention of the GDC in November 2020, following the closure of his practice (the Practice).

23. Thereafter the GDC carried out an investigation which drew into focus three issues of concern about Mr Ullathorne's practice:

- i. He was failing to respond to the GDC correspondence (Charge 2a));
- ii. He had failed to maintain an effective address (Charge 2b)) and
- iii. He had made claims for sickness leave from the NHS whilst submitting claims for dental work conducted (Charge 3).

24. The GDC case is that his conduct at 23(iii) was misleading(Charge 4a)) and dishonest (Charge 4b)).

25. In addition, when Mr Ullathorne did respond to GDC correspondence, in April 2023, he drew attention to a health matter [Private]

26. [Private:]

27. The nature of the health impairment is set out in Schedule 1 of Charge 1.

Evidence

28. The Committee received documentary and oral evidence from the following witnesses on behalf of the GDC: Witness 1, NHS Business Service Authority (NHSBSA); Witness 2, Greater Manchester NHS and Witness 3, GDC In-House Presentation Service. Witnesses 1 and 2 answered questions put to them by the Committee. Witness 3 also attended the hearing and confirmed that the dates set out in paragraphs 6 and 7 of her statement dated 9 December 2024 should read "27 March 2023" and not "27 March 2024". The Committee had no questions for Witness 3.

29. The Committee also received an expert report dated 27 November 2024 from the Health Expert instructed in this case. The Committee was given the opportunity to hear oral evidence from this witness but decided that this was not necessary since it had no questions for this witness.

30. The Committee has considered all the evidence presented to it, both documentary and oral. It has borne in mind that Mr Ullathorne has provided no response to the allegations against him.

31. The Committee has taken account of the submissions made by Mr Hamlet on behalf of the GDC. The Committee has accepted the advice of the Legal Adviser.

32. The Committee has borne in mind that the burden of proof rests with the GDC, and that the standard of proof is the civil standard, that is, whether the factual allegation is proved on the balance of probabilities. Mr Ullathorne need not prove anything.

33. In respect of the allegation of dishonesty, the Committee has applied the legal test for dishonesty, as set out in the case of *Ivey v Genting Casinos (UK) Ltd t/a Crockfords* [2017] UKSC

Findings of fact – 1 April 2025

34. The Committee has made the following findings:

1	<p><i>You have an adverse physical condition, specified at Schedule 1.</i></p> <p>Found proved</p> <p>[Private]</p> <p>Accordingly, it has accepted the medical expert evidence and finds this charge proved.</p>
2.a)	<p><i>Between 26 August 2021 and 28 March 2023, you Failed to respond to correspondence from the GDC in respect of its investigation</i></p> <p>Found proved</p> <p>Standard 9.4 of the GDC's Standards for the Dental Team states: "<i>you must co-operate with any relevant formal or informal inquiry</i>". The Committee is satisfied that as a registered dentist, Mr Ullathorne was under a clear obligation to comply with the GDC's standards.</p> <p>The Committee has borne in mind Witness 3's evidence of the attempts by the GDC's Casework Team, between 26 August 2021 to 17 February 2023, to contact Mr Ullathorne by way both of details he supplied to the GDC and those held by third parties. Witness 3 explained that no response was received from Mr Ullathorne.</p> <p>Witness 3's evidence was that on 27 March 2023, the GDC sent a copy of the Notice of Hearing in relation to an interim Orders Committee (IOC) hearing scheduled for 13 April 2023 to Mr Ullathorne's registered postal address and to a postal address [Private]. Mr Ullathorne telephoned the GDC on 28 March 2023, acknowledging receipt of the Notice.</p> <p>The Committee found Witness 3's evidence to be reliable and consistent with the documentary evidence provided as part of her statement.</p> <p>There is no evidence before the Committee that Mr Ullathorne responded to the GDC's enquiries between 26 August 2021 and 28 March 2023, despite repeated requests for him to do so during that time. It has borne in mind that the service of Notice of a forthcoming IOC hearing scheduled for 13 April 2023 was sent to two addresses resulting in Mr Ullathorne calling the GDC on 28 March 2023, acknowledging receipt.</p> <p>However, the Committee has borne in mind that later, when Mr Ullathorne was making enquiry into the possibility of Voluntary Removal, he used the same email address as that used by the GDC when attempting to contact him over the previous two years.</p> <p>The Committee has concluded that there is sufficient evidence, on the balance of probabilities, that Mr Ullathorne was in receipt of prior communications from the GDC but he chose not to respond to it</p> <p>Accordingly, it finds this charge proved.</p>
2.b)	<p><i>Failed to register an effective address for correspondence with the GDC</i></p> <p>Found proved</p>

	<p>The Committee is satisfied that as a registered dentist, Mr Ullathorne is required to register an effective address for correspondence with the GDC. It is implicit within the GDC's regulatory framework that a dentist is required to register an effective address for correspondence.</p> <p>Witness 3 provided evidence of the steps taken by GDC during the course of its investigation to contact Mr Ullathorne through other contact details provided by third parties. [Private]</p> <p>Witness 3 set out in her statement that on 27 March 2023 a copy of the Notice of Hearing for an IOC hearing scheduled to be heard on 13 April 2023 was sent to Mr Ullathorne's registered postal address and to a postal address referred to in his [Private].</p> <p>The Committee has had regard to a telephone attendance note dated 28 March 2023 between a GDC FTP Lawyer and Mr Ullathorne. The note records that Mr Ullathorne acknowledged receipt of the Notice but said that he was not registered and had not been for over two years. In response to a question from the GDC's FTP lawyer as to whether he was aware that he was being investigated, Mr Ullathorne stated that he was "<i>only made aware by the letter he received today.</i>" He was asked if the details were not up to date, to confirm how the letter reached him. The note further records that Mr Ullathorne said it was sent to his home address (which was not his registered address).</p> <p>In light of the evidence of Witness 3 and the documentary evidence showing a record of the attempts made by the GDC to contact Mr Ullathorne, the Committee has concluded that the registered address provided by him was not effective. Indeed, the telephone note indicates that Mr Ullathorne himself accepts that the registered address he provided to the GDC was no longer current.</p> <p>Accordingly, the Committee finds this charge proved.</p>
3	<p><i>Between 3 October 2016 and 27 July 2018, you made claims from the NHS for long term sickness whilst continuing to submit claims for work conducted.</i></p> <p>Found proved</p> <p>In reaching its decision, the Committee has accepted the evidence of Witnesses 1 and 2.</p> <p>Witness 1 explained that his teams were responsible for processing claims, known as FP17s, and applications for contractual payments. He also confirmed that the teams were responsible for processing monthly payments for providers and processing applications under the Statement of Financial Entitlement, covering sickness leave.</p> <p>Witness 1 provided evidence, based on statistical information contained in the NHS Business Service Authority's system, of the start date, end dates and payment for the period from 3 October 2016 until 27 July 2018 when Mr Ullathorne was in receipt of long-term sickness payments. This amount to 362 days and totalled £88,818.71.</p> <p>Witness 1's evidence was that Mr Ullathorne had been assessed by a GP that Mr Ullathorne was unfit for work in October 2016, November 2016, January 2017, February 2017, January 2018, March 2018, April 2018, May 2018, July 2018 and September 2018. He exhibited copies of Statements of Fitness for Work for the relevant period in question as part of his evidence.</p>

	<p>Witness 1 set out in his witness statement the amount of money Mr Ullathorne received against his NHS contract during the period when he was claiming long term sickness.</p> <p>Witness 2's witness statement set out the periods when Mr Ullathorne was in receipt of long term sickness payments. This covered the period from 3 October 2016 to 26 March 2017; 22 January 2018 to 4 March 2018 and 16 April 2018 until 27 July 2018.</p> <p>Witness 2 exhibited a copy of the Clinical Adviser's Case Assessment Report dated 13 December 2018 for Mr Ullathorne which provided a summary of his long-term sickness pay between 10/2016 and 11/2018 and details of the FP17 submissions, reflecting Mr Ullathorne's clinical activity. She confirmed that she was aware that Mr Ullathorne was in receipt of long term sickness payments for the period October 2016 – July 2018, he having submitted Fit notes directly to the NHS Business Authority.</p> <p>In response to questions put to Witness 1 by the Committee, he confirmed that only the person with the relevant performer number could enter the details on the FP17s and no one else. Likewise, Witness 2 confirmed that this was the case and explained that the systems were subject to close scrutiny. Witness 2 also explained, in response to questions put to her by the Committee, that even if the treatment of a patient had been shared between two treating dentists, only one of the dentists could submit the claim. Witness 2 also explained in response to Committee questions that the 39 claims made by Mr Ullathorne had start dates and completion dates that fell entirely within periods of his sickness. The Committee therefore determined that the possibility that Mr Ullathorne might have shared the treatment with another treating dentist, such as locum, was highly unlikely.</p> <p>Taking all these factors into account, the Committee finds this charge proved.</p>
4.a	<p><i>Your conduct at 3, above, was:</i> <i>Misleading</i> Found proved</p> <p>In reaching its decision, the Committee considers that Mr Ullathorne's conduct in making claims to the NHS for long term sick pay while continuing to submit claims for work conducted was misleading. The NHSBSA was misled into believing that work being done on this contract by Mr Ullathorne.</p>
4.b	<p><i>Dishonest</i> Found proved</p> <p>The Committee has first considered Mr Ullathorne's state of mind at the time when he submitted the claim. It is satisfied that Mr Ullathorne knew that he had been signed off sick from work given that he had submitted multiple certificates to the NHSBSA.</p> <p>The Committee has concluded that Mr Ullathorne knowingly submitted 39 FP17s between 3 October 2016 and 27 July 2018 in which he stated that he had performed UDAs when he knew that he was on sick leave. In the Committee's view, this was not a one-off accidental error over a short period of time but continued on multiple occasions over a long period of time.</p> <p>Before drawing this inference, the Committee has considered whether it could safely exclude as less likely any other explanations, for example the submissions of claims</p>

by a locum. The Committee considered the response of Witness 2 to questions asked by the Committee on this exact point. It was content that it could rule out as less likely that a locum submitted the claims.

The Committee considered that ordinary decent people, appraised of the facts in this case, would conclude that Mr Ullathorne's conduct in submitting claims for dental work while receiving sick pay was clearly dishonest.

35. The hearing moves to Stage Two.

Stage 2 of the Hearing – 2 April 2025

36. Following the handing down of the Committee's findings of fact on 1 April 2025, the hearing proceeded to stage two; that is to say, health, misconduct, current impairment and sanction.

37. The Committee has considered all the evidence presented to it, both oral and documentary. It has taken into account the submissions made by Mr Hamlet on behalf of the GDC in accordance with Rule 20(1)(a). 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 concerning its powers and the principles to which it should have regard.

Fitness to practise history

38. Mr Hamlet confirmed that Mr Ullathorne has no fitness to practise history. He advised that Mr Ullathorne is currently subject to an interim order of suspension which is due to expire on 17 July 2025.

Summary of submissions

39. Mr Hamlet submitted that each of the Committee's factual findings (save for the finding regarding Mr Ullathorne's health), including a finding of dishonesty, in and of themselves amount to misconduct. In respect of a finding of impairment, Mr Hamlet invited the Committee to consider the serious nature of the findings against Mr Ullathorne, including a finding of dishonesty, as well as the absence of any evidence of any steps he has taken to address the matters identified in this case, or any evidence of remorse. In short, Mr Hamlet submitted that the risk of repetition of the dishonest conduct remains and that a finding of current impairment is necessary for the protection of the public and is also required in the wider public interest.

40. Turning to health matters, Mr Hamlet made the point that the Committee was not required to determine a precise diagnosis, but to draw upon the expert evidence available as to whether an impairment currently exists. [Private].

41. Mr Hamlet submitted that the appropriate and proportionate sanction in this case is to direct that Mr Ullathorne's name be erased from the register. In support of that submission, Mr Hamlet highlighted the serious nature of the dishonesty in this case, which, he said, took place over a lengthy period and was motivated by personal gain. He also submitted that the absence of any evidence of insight or reflection as well as Mr Ullathorne's lack of engagement in these proceedings were relevant factors in support of the GDC's submissions on the sanction of erasure.

Misconduct

42. The Committee first considered whether the facts found proved (save in relation to the health matter) constitute misconduct. In so doing, the Committee has exercised its own independent judgement.

43. The Committee found proved that between 26 August 2021 and 28 March 2023, Mr Ullathorne failed to respond to correspondence from the GDC in respect of its investigation and that he failed to register an effective address for correspondence during that time.

44. The Committee takes a serious view of Mr Ullathorne's conduct in relation to his failure to respond to GDC correspondence and his failure to maintain an effective address. In the Committee's judgement, registering an effective address for correspondence with the GDC and co-operating with the regulator as part of its investigations are basic and fundamental requirements of being a registered dentist. It has borne in mind that this failure took place over a protracted period of time, during which time Mr Ullathorne was in receipt of communications from the GDC but he chose not to respond to it. This was a clear breach of Standard 9.4 of the GDC's Standards for the Dental Team which states: "*you must co-operate with any relevant formal or informal inquiry*".

45. The Committee also takes a serious view of Mr Ullathorne's misleading and dishonest conduct in that between 3 October 2016 and 27 July 2018, he knowingly submitted claims for work conducted when he knew that he was on long term sickness. This was not a one-off accidental error but continued on multiple occasions over a long period of time. It considers that Mr Ullathorne's dishonest conduct, which occurred within the course of his professional practice, can properly be regarded as "deplorable" by fellow practitioners and which prejudices the reputation of the dental profession.

46. The Committee considers that Mr Ullathorne has breached one of the fundamental tenets of the profession, namely Standard 1.3 of the GDC's Standards for the Dental Team which states: "*you must be honest and act with integrity*".

47. Accordingly, the Committee has concluded that the facts found proved (save in relation to Mr Ullathorne's health) are sufficiently serious to amount to misconduct.

Current impairment - misconduct

48. The Committee next considered whether Mr Ullathorne's fitness to practise is currently impaired by reason of his misconduct. In doing so, the Committee has again exercised its own independent judgement.

49. Throughout its deliberations, the Committee has borne in mind that its overarching objective is to protect the public, which includes the protection of patients and the wider public, the maintenance of public confidence in the profession and in the regulatory process, and the declaring and upholding of proper standards of conduct and behaviour.

50. The Committee considers that the misconduct found proved, with particular reference to the dishonest conduct, is attitudinal in nature and therefore difficult to remediate. The Committee has borne in mind Mr Ullathorne's lack of engagement in these proceedings and the absence of any reflection or insight from him in relation to the matters that form the subject of the GDC's inquiry against him, or how he might act differently in the future.

51. The Committee therefore considers that Mr Ullathorne's dishonest misconduct is liable to be repeated. Its findings relate to a sustained period of dishonesty which involved repeated acts of submitting claims for work conducted when he knew he was on sick leave. The Committee concluded

that his actions were, more likely than not, financially motivated so as to prevent financial clawback by the NHS.

52. The Committee considers that a repeat of such conduct, which in its judgement cannot be said to be highly unlikely, might put the public at unwarranted risk of harm. Accordingly, the Committee finds that Mr Ullathorne's fitness to practise is currently impaired by reason of his misconduct. The Committee considers that the misleading and dishonest conduct to be the main feature of this finding, although it also considers that Mr Ullathorne's failure to maintain an effective registered address and respond to the GDC in relation to its investigation to be aggravating features.

53. The Committee considers that a finding of impairment on the grounds of misconduct is also required to maintain public confidence in the profession and to declare and uphold proper professional standards of conduct and behaviour. Mr Ullathorne's actions were liable to have brought the reputation of the profession into considerable disrepute. In the Committee's judgement the public's trust and confidence in the profession, and in the regulatory process, would be significantly undermined if a finding of impairment was not made given the nature of Mr Ullathorne's misconduct, and particularly his misleading and dishonest conduct.

54. Accordingly, the Committee finds that Mr Ullathorne's fitness to practise is currently impaired by reason of his misconduct.

Current impairment – health

55. The Committee next considered whether Mr Ullathorne fitness to practise is impaired by reason of his adverse physical health condition. [Private]

56. [Private]

57. In light of the expert medical evidence and taking into account Mr Ullathorne's own acceptance of his current health condition, as cited in his reasons for seeking Voluntary Removal from the Register dated 11 April 2023, the Committee has concluded that Mr Ullathorne's fitness to practise is impaired by reason of the adverse physical health condition, referred to in private.

Sanction

58. The Committee then determined what sanction, if any, is appropriate in light of the findings of misconduct and current impairment due to both health and misconduct. The Committee recognises that the purpose of a sanction is not to be punitive, although it may have such an effect, but is instead imposed to protect patients and safeguard the wider public interests mentioned above.

59. In reaching its decision the Committee has kept in mind 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 Mr Ullathorne's own interests.

60. The Committee notes from the GDC's bundle of documents that Mr Ullathorne submitted an application for Voluntary Removal from the Register dated 11 April 2023, but the Registrar decided to refuse the application. Mr Ullathorne was notified of the reasons for the Registrar's decision by letter dated 6 June 2023.

61. The Committee also notes from the GDC's bundle of documents Mr Ullathorne's indication to the GDC in April 2023 that he had "*no intention of returning to dentistry in any form in the future.*" The Committee has no recent information from Mr Ullathorne as to his current intentions, but reminded itself that it would be open to him to resume his practise of dentistry.

62. The Committee has considered the mitigating and aggravating factors present in this case. In respect of the mitigating factors that are present, the Committee notes that Mr Ullathorne has demonstrated limited insight into his health condition and its impact on his ability to practise as a dentist.

63. In terms of aggravating factors, the Committee has reminded itself that its findings include a finding of dishonest conduct, that Mr Ullathorne lacks insight into his misconduct, which was sustained over a sustained and protracted period of time.

64. The Committee has considered the range of sanctions available to it, starting with the least restrictive. In the light of its findings, the Committee considers that taking no action, or issuing a reprimand, would not be sufficient in the particular circumstances of this case. In the Committee's judgement public trust and confidence in the profession and in the regulatory process would be significantly undermined if no action were taken, or if a reprimand were issued. The Committee also considers that taking no action or issuing a reprimand would not adequately protect the public and would not be sufficient to declare and uphold proper professional standards of conduct and behaviour.

65. The Committee also considers that a direction of conditional registration would not be sufficient to meet the public protection and public interest considerations engaged in this case. The Committee considers that conditions could not be formulated to deal with the risks that it has identified, and in particular those that arise from Mr Ullathorne's dishonest conduct. The Committee also considers that, even if conditions could be formulated, a direction of conditional registration would not be sufficient to declare and uphold proper professional standards of conduct and behaviour because of the serious nature of Mr Ullathorne's misconduct.

66. The Committee then went on to consider whether a direction of suspended registration would represent an appropriate and proportionate outcome. After careful consideration the Committee has determined that suspension would not be sufficient to protect the public or meet the public interest considerations that it has identified above.

67. Mr Ullathorne's misconduct represents a serious departure from professional standards and is highly damaging to his fitness to practise. In the Committee's judgement, Mr Ullathorne's dishonest conduct was particularly serious, in that it was associated with his professional practice and it was sustained and repeated over a long period of time. Mr Ullathorne has provided no explanation for his conduct or any reflections on the matter. Notwithstanding Mr Ullathorne's indication that he has no intention of returning to practise dentistry, the Committee has borne in mind that it could be open to him to return to practise at a later date, should he choose to do so. The Committee considers that Mr Ullathorne poses an ongoing risk of significant harm to the public.

68. The Committee considers that its finding of dishonesty, together with Mr Ullathorne's lack of engagement in these proceedings, as well as a lack of reflection and insight, suggests a deep-seated professional attitudinal problem. It does not consider that a period of suspension will bring about the necessary rectification of Mr Ullathorne's conduct and behaviour. The Committee considers that a period of suspended registration would not be sufficient to protect the public or the wider public interest.

69. The Committee has therefore determined that the only appropriate and proportionate sanction to impose in the particular circumstances of this case is that of erasure. The Committee hereby directs that Mr Ullathorne's name be erased from the register.

70. In deciding on the necessary sanction in respect of Mr Ullathorne's adverse physical health condition, the Committee proceeded to assess the sanction required to meet the public interest and

public protection concerns it had identified in relation to the misconduct charges first. Once the Committee concluded this aspect of the process, it reviewed the sanction it had arrived at to ensure that its decision would adequately protect the public in light of the impairment resulting from the Mr Ullathorne's adverse physical health condition. In having directed Mr Ullathorne's erasure on the basis of the misconduct matters, the Committee was satisfied that the public is adequately protected in relation to the impairment arising from the adverse physical health condition.

Existing interim order

71. In accordance with Rule 21(3) of the Rules and section 27B (9) of the Dentists Act 1984 (as amended) the interim order of suspension in place on Mr Ullathorne's registration is hereby revoked.

72. The Committee now invites submissions on an immediate order.

Decision and reasons on immediate order – 2 April 2025

73. Mr Hamlet made an application for an immediate suspension order to be imposed on Mr Ullathorne's registration. He invited the Committee to impose such an order on the grounds of public protection and in the wider public interest. He submitted that this was a case where there was a risk to the public in light of the conduct and health matters were Mr Ullathorne to return to unrestricted practise during the appeal period. Further, Mr Hamlet submitted that an immediate suspension order is required to protect public confidence in the profession.

74. The Committee has accepted the advice of the Legal Adviser.

75. Due to the risk of repetition of the conduct matters, as well as the health concerns, as identified in its earlier findings, the Committee is satisfied that an immediate suspension order is necessary for the protection of the public and the wider public interest. To do otherwise would be incompatible with the Committee's earlier findings.

76. The Committee has therefore determined to make an immediate order of suspension.

77. The immediate suspension order will remain in place for at least 28 days from the date on which Mr Ullathorne is deemed to have been served with the Committee's decision. If an appeal is made, it will remain in place until the appeal has concluded. If no appeal is made, the substantive direction of erasure will replace the immediate suspension after 28 days.

78. The Committee's decision will be confirmed to Mr Ullathorne in writing, in accordance with the Act.

79. That concludes this determination.