

IN PART PRIVATE HEARING**Professional Conduct Committee
Initial Hearing****26-27 March 2025****Name:** Mohamed, El-Hussein**Registration number:** 287276**Case number:** CAS- 208544-J0W3Z7

General Dental Council: Ms Sian Priory, counsel.
Instructed by Amy Jones, IHLPS**Registrant:** Present
Represented by Ms Julia Furley, counsel.
Instructed by Katherine Hughes, JFH Law.

Fitness to practise: Impaired by reason of misconduct**Outcome:** Fitness to Practise Impaired. Reprimand Issued

Committee members: Rhona Stevens (Chair, Dentist member)
Tanya Viehoff (Dental Care Professional member)
Tara Wilmott (Lay member)**Legal adviser:** Tanveer Rakhim**Committee Secretary:** Jamie Barge

The charge

“That being registered as a dentist:

1. As amended – On dates between 27 January 2020 and 7 March 2020;
 - a. You failed to hold appropriate indemnity insurance;
 - b. You practised as a dentist absent appropriate indemnity insurance.
2. Your conduct at Charge 1 was;
 - a. Dishonest and/or
 - b. Misleading
3. Your conduct at Charge 1.a. and/or 1.b. lacked integrity.

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

MOHAMED, El-Hussei

Registration Number: 287276

Mr Mohamed

1. This is an initial Professional Conduct Committee (PCC) hearing, pursuant to Section 27B of the Dentists Act 1984 (as amended) ('the Act').
2. The members of the Committee, as well as the Committee Secretary, conducted the hearing in person for the two days, 26 and 27 March 2025. The Legal Adviser attended the whole hearing remotely via Microsoft Teams in line with current General Dental Council (GDC) practice.
3. You were present at the hearing and were represented by Ms Julia Furley, Counsel.
4. Ms Sian Priory, Counsel, appeared remotely as case presenter on behalf of the GDC.

Preliminary matters - Amendment to the charge under Rule 18

5. The Committee next acceded to an application, made by Ms Priory under Rule 18 of the Rules, to amend to head of charge 1. Her submission was that the amendment proposed was due to an administrative error and applied to amend head of charge 1 to now read '*On dates between 27 January 2020 and 7 March 2020*'.
6. No objection was made by your defence Counsel.
7. The Committee accepted the advice of the Legal Adviser. In granting the application, it had regard to the merits of the case and the fairness of the proceedings, and it was content that the proposed amendment could be made without causing injustice to you. The Committee was satisfied that the suggested amendment was to correct a date inaccuracy. It accepted that the amendment did not change the substance of the heads of charge against you.
8. The head of charge was amended accordingly.

Background

9. In Ms Priory's opening note to the Committee, she outlined the background to the matters against you. The GDC whilst conducting a separate investigation into a separate clinical complaint, which involved clinical and conduct concerns regarding an unrelated registrant. The patient stated that the Dentist provided a treatment plan to them in November 2019 but then left the Practice. The Registrant then extracted six teeth in preparation for dentures, but dentures were not provided, and the business went into administration in March 2020.
10. On 15 June 2023, the GDC wrote to the Practice requesting patient records so that clinical advice could be obtained in relation to the separate clinical case. The GDC requested confirmation from the Practice that they had identified the correct dentist (as the patient had seen two dentists on the same day). It was confirmed that you had worked at the practice, but, was no longer working there.

11. On 12 April 2023, during the GDC's investigation, your representatives sent copies of your indemnity certificates to the GDC. The certificates provided cover between 9 June 2020 and 8 June 2023. In the covering letter, it was stated that you did not hold indemnity cover between January and June 2020. They said that you were trying to arrange retrospective cover. In an email submitted by your representatives on 17 April 2023 it was stated that you did not start practising until 27 January 2020.

12. On 28 September 2023 the GDC asked your representatives whether they could provide retrospective indemnity cover. On 11 October 2023 the GDC emailed your representatives requesting information about retrospective cover. There was no reply to this email.

13. The GDC alleges that between 27 January 2020 and 7 March 2020 you failed to hold appropriate indemnity insurance and practised as a dentist without appropriate indemnity insurance.

14. It is alleged that your conduct in this respect was misleading, dishonest and lacked integrity.

Admissions

15. You admitted all of the heads of the charge: 1a, 1b, 2a, 2b and 3. The Committee noted your admissions. It noted Ms Furley's submissions that having admitted dishonesty at head of charge 2(a), you would admit head of charge 3 but that your admissions would fall out of the same facts.

Evidence

16. The written evidence provided by the GDC including various witness statements. The Committee received the following witness statements, along with associated exhibits:

- A written statement from Sadaf Rasul, GDC Caseworker dated 13 April 2025.
- A written statement from Rohima Uddin, GDC Operations Officer dated 9 January 2025.

17. In respect of your defence team, the Committee were provided with a defence bundle containing your Professional Development plan (PDP), a work reference and a number of Continuing Professional Development (CPD) certificates. You also provided to the Committee your written statement dated 25 March 2025 and also a written statement from Witness 1, your current employer dated 12 March 2025.

The Committee's finding on the alleged facts – 26 March 2025

18. The Committee's findings based on your admissions are as follows:

1.	<i>On dates between 27 January 2020 and 7 March 2020;</i>
1.(a)	<i>You failed to hold appropriate indemnity insurance;</i> Admitted and found proved.
1.(b)	<i>You practised as a dentist absent appropriate indemnity insurance.</i> Admitted and found proved.

2.	<i>Your conduct at Charge 1 was;</i>
2.(a).	Dishonest and/or Admitted and found proved.
2.(b).	<i>Misleading</i> Admitted and found proved.
3.	<i>Your conduct at Charge 1.a. and/or 1.b. lacked integrity.</i> Admitted and found proved.

19. We now move to Stage 2.

Stage two

20. Having announced its decision on the facts, in accordance with Rule 20 of the Rules, the Committee heard submissions in relation to the matters of misconduct, impairment and sanction from Ms Priory on behalf of the GDC and also from Ms Furley on your behalf. The Committee accepted the advice of the Legal Adviser.

21. The Committee reminded itself that its decisions on misconduct, impairment and sanction are matters for its own independent judgement. There is no burden or standard of proof at this stage of the proceedings. It had regard to its duty to protect the public, to declare and uphold proper standards of conduct and performance, and to maintain public confidence in the dental profession. Where applicable, the Committee took into consideration the GDC's 'Standards for the Dental Team' (September 2013) ('the Standards') and the 'Guidance for the Practice Committees, including Indicative Sanctions Guidance' (October 2016, revised December 2020) ('the Guidance'). The Committee also had regard to relevant case law including *PSA v NMC* and *SM 2017 CSH 29*, *Yeong v GMC* 2009 EWHC 1923.

22. You gave oral evidence where you stated that having appropriate indemnity insurance is a legal requirement and that it is your duty as a dental professional to ensure the protection of all of your patients. You stated that when you started working at the Practice, your intention was always to get insurance, but you accept that you made a conscious decision not to get this as it was too expensive. You stated you should not have started working until you had done this. You gave a number of factors that contributed to your dishonest conduct, including having very little money to pay for insurance due to being a refugee and on universal credit. In addition, having to leave your country, Libya during conflict, personal family issues, as well as working in a difficult working environment during the global pandemic. You stated that in your home country and in your previous roles, indemnity insurance has always been provided by your employers or institution. You accepted that your conduct was both misleading and dishonest. You were apologetic and shameful for your conduct.

23. Witness 1, your current employer, also gave evidence and confirmed she has no concerns regarding your conduct and clinical practice. She confirmed that you have current indemnity insurance and stated that she is confident that you would never make that poor judgement again.

She further indicated that the practice would provide you with whatever support you might need following the outcome of this hearing.

24. Ms Priory first addressed the Committee on the matter of misconduct. She submitted that your actions had breached Standards 1.3, 1.8 and 9.1. She submitted that it is a statutory requirement for all Registrants to have appropriate indemnity insurance in place, to make sure any patients can make a claim and seek any compensation. Ms Priory submitted that you deliberately practised without appropriate indemnity cover, knowingly risking public confidence in the profession. She submitted that these failings fell short of the standards expected of a registrant and what is proper in the circumstances. Ms Priory submitted that this potentially brings the profession into disrepute. She therefore submitted that your failings amounted to serious professional misconduct.
25. In relation to the matter of current impairment, Ms Priory reminded the Committee of the GDC's purpose to uphold public confidence in the profession. She submitted that indemnity cover is a prerequisite to practising and failing to maintain it is serious. Ms Priory submitted that the public would be entitled to expect that a registrant is covered. Ms Priory submitted that your dishonest conduct represents an attitudinal failing. She submitted that the public also knowing you made false declarations to your regulatory body would be concerned if registrants faced no consequences for practising without this cover. She submitted that the public would expect the GDC to take action in the circumstances. Ms Priory invited the Committee to consider the context in which these failings came to light. Were it not for the GDC investigation, they would not have come to light. She submitted that a finding of impairment is required to maintain public confidence in the profession and in the GDC as its regulator.
26. Lastly, Ms Priory addressed the Committee on the matter of sanction. She submitted if the Committee find that your fitness to practise is impaired on public interest grounds only, then a period of suspension of 6 months with a review is the appropriate and proportionate sanction.
27. Ms Furley submitted that you do not oppose the issue of misconduct.
28. In respect of impairment, Ms Furley submitted that your conduct was out of character, and there have been no complaints or issues prior to this or since. She submitted that references from colleagues demonstrate that you have continued to practice in a way that upholds the reputation of the profession. Ms Furley submitted that based on the information provided by you and colleagues there is no suggestion that you are anything other than a highly competent and caring dentist. She submitted that there is a very low risk that you will act in a similar manner. She submitted that you are a deeply regretful man and have undertaken a significant amount of remediation. Since 2023, when these matters came to light you have taken these matters very seriously and made admissions to all of the charges against you.
29. Ms Furley stated that you have reflected upon these charges, expressed acceptance and gave good explanations as to the very extraordinary circumstances which led to your dishonest conduct. You have demonstrated insight and remorse. You have accepted that practising without appropriate insurance should not have happened and taken steps to make sure this never happens again. Ms Furley submitted that you have taken significant steps to remediate your failings which would reassure public confidence in the profession. She submitted that you work in a supportive practice and your employer has confirmed they have no concerns with your conduct. They hold you in high regard, valuing your honesty and integrity. Ms Furley submitted that you

have remedied your failures and given that this is such an extraordinary case, that your fitness to practise is not impaired.

30. Ms Furley submitted that if the Committee were minded to consider otherwise, that the most appropriate and proportionate sanction is one of a reprimand to reflect the seriousness and circumstances of this case. She submitted that this relates to dishonest conduct whilst working two days a week over a five week period. She submitted that a period of suspension would be disproportionate and have a devastating impact on you and your family.

Decision and reasons on misconduct

31. The Committee first considered whether the facts found proved by admission amount to misconduct. It noted that the issue of misconduct is not in dispute between the parties. The Committee found that your actions had breached the following Standards;

- 1.3 *You must be honest and act with integrity.*
- 1.8 *You must have appropriate arrangements in place for patients to seek compensation if they have suffered harm.*
- 9.1 *Ensure that your conduct, both at work and in your personal life, justifies patients' trust in you and the public' trust in the dental profession.*

These require practitioners to have appropriate arrangements in place so that patients can claim any compensation to which they may be entitled and require practitioners to carry out tasks or treatments only if they are indemnified.

32. The Committee had regard to the circumstances surrounding your failures. You stated in oral evidence to the Committee, that when you signed your GDC application form of 31 October 2019, it was clear to you that it was a legal requirement to have appropriate indemnity insurance when practising in the United Kingdom. You also stated to the Committee that having secured work as a dentist you sought indemnity. The quote you received as you were due to start was substantially more than you anticipated. Facing considerable family and financial challenges and being unaware that you could pay by instalments, you panicked and made a conscious decision not to get indemnity insurance at that time as it was too expensive. The Committee noted that practising with indemnity cover is a statutory requirement. You are required by your regulator to ensure indemnity cover is in place. Although there was no evidence of patient harm, the Committee is satisfied that a failure to maintain appropriate cover prevents patients from obtaining financial redress should they experience harm from a practitioner. You acknowledged that you were not honest with your employer in this regard.
33. Furthermore, your failure to ensure that you had appropriate indemnity insurance in place, has the potential of a risk of harm to patients who may not be able to make a claim if required. Your conduct was found to be misleading, dishonest and lacking integrity over a period of 5 weeks. The Committee is satisfied that members of the dental profession would consider your conduct to be deplorable. The Committee therefore concluded that your actions were deliberate and fell below the expectations of a registered professional and amounted to serious professional misconduct.

Decision and reasons on impairment

34. The Committee next considered whether your fitness to practise is currently impaired by reason of your 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; and the promotion and maintenance of proper professional standards and conduct for the members of the dental profession.
35. The Committee considered that your misconduct is capable of being remedied. It took into account that the failings in question are matters that can be addressed through remediation.
36. The Committee had regard to the evidence of remediation you have undertaken since you were aware of the issues highlighted in the GDC's investigation, along with your written and oral evidence. You have engaged fully in these proceedings, reflected and demonstrated appropriate remediation into your failings. You now understand your responsibility in relation to ensuring you have appropriate indemnity insurance as a dentist and the relevant standards expected as a dental professional. The Committee is satisfied that you have demonstrated an appropriate level of insight and remorse regarding this. The Committee further took into account your oral evidence. In the Committee's view, there is a strong indication that you have addressed the relevant concerns in this case.
37. The Committee is mindful that dishonesty might be more difficult for a registrant to remediate than for instance, discreet clinical shortcomings. However, it recognises the circumstances that led to your dishonest conduct. You have provided a number of targeted Continuing Professional Development (CPD) certificates in areas such as ethics and the meaning of having indemnity insurance. You have also provided positive testimonials, and a reflective statement. It also heard oral evidence from your current employer, who has no issues whatsoever with your practice. The Committee also received testimonials from colleagues who have worked with you, attesting to your good character.
38. The Committee notes that this was a short period, and that in March 2020 when changing employment you did not hide the fact of your lack of indemnity. You sought cover immediately when it was requested. In all the circumstances, the Committee therefore considers that you are unlikely to repeat your dishonest conduct. The Committee finds that there is no evidence that you pose a risk of harm to the public or of any deep seated attitudinal issues as suggested by the GDC. It therefore considers that impairment is not required on the grounds of public protection.
39. In terms of the wider public interest, the Committee considered that this fitness to practise process, which has involved an investigation by your regulatory body and this Professional Conduct Committee hearing, upholds professional standards and maintains public confidence in the dental profession.
40. The Committee considers notwithstanding the mitigation you have presented, that a finding of impairment is required to maintain public confidence in the profession and to declare and uphold proper professional standards of conduct and behaviour. The Committee took into account the background, the insight and genuine remorse you have demonstrated; however, the core of this case relates to dishonest conduct over a period of 5 weeks. The Committee's findings of dishonesty relate to a disregard and breach of a fundamental tenet of the profession, namely the need to act with honesty and integrity. The public have a right to expect that the standards set by

the GDC as the regulator are adhered to by all registered dental professionals. Having adequate indemnity insurance or arrangements in place is a fundamental requirement that must be complied with, given its importance in dental practice.

41. In the Committee's judgment 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 serious nature of the Committee's findings of your misleading and dishonest conduct over a short period of time.
42. For the reasons set out above, the Committee finds that your fitness to practise is currently impaired by reason of your misconduct.

Sanction

43. The Committee then determined what sanction, if any, is appropriate in light of the findings of facts, misconduct and impairment that it has made. The Committee recognises that the purpose of a sanction is not 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.
44. In reaching its decision the Committee has again taken into account the GDC's *Guidance for the Practice Committees, including Indicative Sanctions Guidance* (October 2016, updated December 2020). The Committee has applied the principle of proportionality, balancing the public interest with your own interests. The Committee has once more exercised its own independent judgment.
45. The Committee has paid careful regard to the mitigating and aggravating factors present in this case.
46. The mitigating factors in this case include:
- Evidence of good conduct following the incident in question, particularly your remedial action.
 - Evidence of good character as evidenced by positive testimonials, with no fitness to practise history.
 - 5 years has elapsed.
 - You have apologised and demonstrated remorse and insight into your conduct.
 - You have also made full admissions to facts which the Committee went on to find proved, including that your conduct was misleading, dishonest and lacked integrity.
 - You have engaged fully with these proceedings. You have accepted that the Committee's findings of fact amount to misconduct.
 - No patient harm arose from your conduct.
 - Evidence of steps you have taken to avoid repetition as set out above.
 - No suggestion that there has been a repeat of the facts that the Committee has found proved.
 - A single isolated event.

47. The aggravating factors in this case include:

- Dishonest conduct over 5 weeks.
- Your dishonest conduct was a breach of patients trust.
- Risk of financial harm to patients.

48. The Committee has considered the range of sanctions available to it, starting with the least serious. In the light of its findings, the Committee considers that it would be wholly inappropriate to conclude this case with no action. The seriousness of the Committee's findings, which involve dishonesty, means that some action must be taken. If the Committee were to take no action, public trust and confidence in the profession and in the regulatory process would be significantly undermined.

49. The Committee next considered whether to issue you with a reprimand. In doing so, it had regard to paragraph 6.9 of the ISG guidance which sets out the factors that indicate when issuing a reprimand would be suitable. The Committee was satisfied that the majority of the listed factors apply in this case, these being as follows:

- there is no evidence to suggest that the dental professional poses any danger to the public;
- the dental professional has shown insight into his/her failings;
- the dental professional has genuinely expressed remorse;
- there is evidence that the dental professional has taken rehabilitative/corrective steps;
- the dental professional has no previous fitness to practise history.

50. In deciding whether issuing a reprimand was the most appropriate and proportionate sanction in all the circumstances, the Committee considered whether a higher sanction would be suitable. In doing so, it discounted the imposition of conditions on your registration, given that there are no clinical concerns in this case. It took into account that conditions are designed to address discrete areas of a registrant's clinical practice and no concerns about your practice as a dentist have been raised.

51. The next sanction available to the Committee would have been a suspension order. It concluded, however, that the suspension of your registration would be wholly disproportionate. In reaching its conclusion it had regard to paragraph 6.28 of the ISG guidance which relate to suspension and was not satisfied that the relevant factors for such a sanction apply in this case.

52. In reaching this conclusion, the Committee does not in any way seek to minimise the importance of the duty of registered dental professionals to have appropriate indemnity insurance in place. Your failure was serious as you recognise by your admissions and the Committee gave careful consideration to the GDC's submission that your registration should be suspended. However, in the particular circumstances of this case, the Committee was persuaded by your sufficient levels of remediation and insight. The Committee applied the principle of proportionality by weighing the interests of the public with yours.

53. In all the circumstances, the Committee determined to issue you with a reprimand. The Committee was satisfied that you have fully remediated the concerns and there was no evidence

to suggest that you posed a risk to patients. You have no fitness to practise history, and you have also shown remorse for and insight into your misconduct, which occurred over 5 years ago. A reprimand will be publicly recorded as the outcome of the case against you. The fact that you have been issued with a reprimand and a copy of this public determination will appear alongside your name on the GDC register for a period of 12 months. A reprimand forms part of your fitness to practise history and is disclosable to prospective employers and prospective registrars in other jurisdictions.

54. That concludes this determination.