PRIVATE HEARING

Professional Conduct Committee
Review Hearing

3 - 4 February 2026

Name:	BIJLANI, Monica
Registration number:	67109
Case number:	CAS-191659-Z0D7N4

General Dental Council:	Mr Andrew Molloy, Counsel Instructed by Jalpa Patel, IHLPS
Registrant:	Present Represented by Louise Hartley, Counsel

Outcome:	Suspension revoked and conditions imposed (with a review)
Duration:	12 months
Immediate order:	Immediate conditions of practice order

Committee members:	Jill Crawford (Lay) (Chair) James Ashworth-Holland (Dentist) Soheila Asabi (Dental Care Professional)
Legal Adviser:	Barrie Searle
Committee Secretary:	Andrew Keeling

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

Miss Bijlani,

1. This was a review hearing before the Professional Conduct Committee (PCC) in accordance with Section 27C of the Dentists Act 1984 (as amended) ('the Act'). The purpose of this hearing was for this PCC to review your case and determine what action to take in relation to your registration.

2. You were present at the hearing and represented by Miss Louise Hartley, Counsel. Mr Andrew Molloy, Counsel appeared on behalf of the General Dental Council (GDC). The hearing was held remotely on Microsoft Teams.

Application for Hearing to be held in Private

3. At the beginning of the hearing, Mr Molloy made an application for the hearing to take place entirely in private pursuant to Rule 53(1) and (2) of the GDC (Fitness to Practise) Rules 2006 (the Rules). Mr Molloy submitted that the reason for the application was because there would be significant references at this hearing to your health.

4. Miss Hartley supported this application. [PRIVATE]. She submitted that it would be more practical for the entire hearing to be in private rather than going in and out of private session, which would be cumbersome and could cause difficulties. Furthermore, you were under the impression that the hearing would be in private as that was the approach taken by the PCC when it met to review your case on 21 January 2026 and was subsequently adjourned.

5. The Committee heard and accepted the advice of the Legal Adviser as to the provisions of the Rules and the approach it should take to its decision.

6. The Committee bore in mind that, as a starting point, hearings should be conducted in public session as there is a clear public interest in the transparency of regulatory proceedings. However, the Committee noted that this needed to be balanced with the need to protect your private life, including matters relating to your health. The Committee also noted that there were some elements of this case, such as the clinical failings, which could be heard in public session. However, it considered that it would be more efficient and practical to conduct the whole hearing in private. It also considered that a suitably redacted determination would be produced, which would include the Committee's reasons for its decision without disclosing any matters regarding your health, and that this would satisfy the public interest for transparency.

7. The Committee therefore acceded to the application and determined that the whole hearing should be conducted in private.

Background

8. The PCC first considered your case at a hearing in June 2021. That PCC found proved allegations of *'multiple and serious clinical failings'* in relation to the standard of care you provided to a number of patients. In addition, the PCC found proved allegations regarding inappropriate comments made to Patient 2 and/or their partner during a consultation on 17 October 2017.

9. That PCC determined that the facts found proved amounted to misconduct. It took the view that although you had shown some insight, that insight was not sufficient. The PCC considered that you continued to pose a risk to patients. It determined that your fitness to practice was impaired. The PCC also determined that a finding of impairment was required in the public interest. It directed that your registration be suspended for a period of 12 months, with a review hearing to take place prior to the expiry of the period of suspension.

10. You appealed against the PCC's direction of suspension but subsequently withdrew your appeal. The substantive direction of suspension therefore came into effect on 7 February 2022.

11. The PCC first reviewed the order on 25 January 2023. You were present at that hearing and were legally represented. That PCC determined that your fitness to practice remained impaired given your continued lack of insight and the limited evidence of any remediation. The PCC determined that a finding of impairment was no longer required in the public interest for the purposes of declaring and upholding proper professional standards of conduct and behaviour and maintaining trust and confidence in the profession. The PCC directed that your registration be suspended for a further period of 12 months, with a review hearing to take place prior to the expiry of the period of suspension. It considered that 12 months would provide you with an opportunity to develop your insight and provide evidence that you understood the impact that your failings would have had on patients.

12. The PCC reviewed the order on 2 February 2024. You were present at that hearing and were legally represented. That PCC determined that your fitness to practise remained impaired by reason of misconduct. It considered that you had provided no information to suggest that you had developed any insight into your misconduct or any evidence to suggest that you had embedded the necessary changes into your practice by way of remediation. The PCC considered that the same risk of harm to the public remained.

13. The PCC directed that your registration be suspended for a further period of 12 months. It indicated that the future reviewing Committee may be assisted by evidence of targeted and focused CPD addressing the concerns identified by the initial PCC,

including appropriate refresher training, formalised documentation of discussions with a mentor, and further developed insight and reflection focusing on the impact on patients.

14. The PCC most recently reviewed the order on 31 January 2025. You were not present at the hearing, but you were legally represented. That PCC determined that your fitness to practise remained impaired by reason of misconduct. It considered that you had provided no information to suggest that you had developed any insight relating to your multiple and serious clinical failings or any evidence to suggest that you had embedded the necessary changes into your practice by way of remediation. That PCC considered that the same risk of harm to the public remained.

15. The PCC directed that your registration be suspended for a further period of 12 months. It indicated that the future reviewing Committee may be assisted by evidence of targeted and focused CPD addressing the concerns identified by the initial PCC, including appropriate refresher training, formalised documentation of discussions with a mentor, and further developed insight and reflection focusing on the impact on patients.

16. [PRIVATE].

17. This is the fourth review hearing of the suspension order.

Today's Review

18. It was the role of the Committee today to undertake a comprehensive review of this case. In so doing, the Committee had careful regard to all the documentary evidence before it, and it took account of the submissions made by both parties and your oral evidence. The Committee had regard to the GDC's Guidance, *'Fitness to Practise: Guidance for the Practice Committees*' (effective from 6 January 2026) (*"the Guidance")*.

GDC Submissions

19. Mr Molloy submitted that the same risks of harm to the public remained as identified at the PCC initial hearing and subsequent review hearings. He submitted that you had shown some evidence of insight in your witness statement, dated 13 January 2026, however, there was limited evidence of targeted Continuing Professional Development (CPD) evidence in respect of the concerns identified. He also submitted that there was limited evidence that you had reflected on your CPD learning and how you would apply this to your future practice. Furthermore, he submitted that there was limited evidence about how you have kept your knowledge and skills up-to-date since 2021. Therefore, he submitted that your fitness to practise remains impaired by reason of misconduct.

20. In respect of sanction, Mr Molloy submitted that conditions would not adequately protect the public and would neither be practicable nor workable owing to the seriousness of your misconduct and the lack of remediation. However, he submitted that you are clearly trying to remediate the concerns and, therefore, it would be disproportionate to indefinitely suspend your registration. Accordingly, he invited the Committee to continue the suspension of your registration for a period of nine to twelve months.

Oral Evidence

21. You gave oral evidence at this hearing and answered questions from Miss Hartley, Mr Molloy and the Committee. You explained how you have kept your knowledge and skills up-to-date by undertaking CPD courses and attending webinars. To prevent de-skilling, you explained that you regularly practise on mannequins and study models. You also regularly observed other dentists in the UK and USA, which included observing their treatments and interactions with patients. You explained that you are currently being mentored by two of your colleagues, who are well-known to you, and who are focusing on the areas of concerns identified at the initial PCC.

22. You also explained your new approach to obtaining informed consent from patients and what you have learnt following the findings against you. You explained that you are aware that you should work slower, and you have learnt that it is good practice to ask the patient to repeat back to you what you have told them to see whether they have properly understood. In respect of treatment planning, you described how you would practise in future by working systematically and by not cutting corners. In respect of the proposed conditions submitted on your behalf, you explained that the proposed requirements regarding auditing every three months and supervision would give the GDC and patients assurance that you would be practising safely.

23. [PRIVATE.]

24. In answer to questions from Mr Molloy, you explained that not all of your CPD certificates had been included in the bundle of evidence you provided. However, you explained that you compiled this bundle yourself as you did not have the benefit of legal representation at the time. However, you confirmed the courses that you had undertaken. Furthermore, you accepted that there was no evidence to show that you have been practising on mannequins to prevent de-skilling. However, you hoped that the Committee would accept your oral evidence on this matter.

25. In answer to questions from the Committee, you stated that you are currently practising facial aesthetics, which you enjoy as you are interacting with patients and receiving good reviews. If a conditions of practice order were imposed on your registration at this hearing, you explained that you would like to continue working at your practice with

another dentist on-site. You explained that you prefer the supervision level to be one of general supervision (meeting a supervisor every two weeks, who may not work at the same site). When asked your views on close supervision (a supervisor on site at all times), you said that you thought you could make this work and would be willing to do so in order to return to dentistry. You stated that you considered, in effect, that direct supervision would be disproportionately restrictive.

Miss Hartley's Submissions

26. Miss Hartley invited the Committee to replace the order of suspension with a conditions of practice order. She submitted that you have shown substantial insight and reflection into your misconduct and provided remediation evidence to show that there would be no risk of repetition. In respect of your CPD evidence, she submitted that you carefully described during your oral evidence the courses you had undertaken and what you had learnt from those courses. She invited the Committee to conclude that your CPD evidence was extensive, appropriate and demonstrated your commitment to learn from past mistakes. She also referred the Committee to the evidence from your two mentors. She submitted that there were positive comments from both of your mentors and, if your suspension were to be replaced with conditions, this would allow you to develop your relationship with both mentors.

27. In respect of your reflections, Miss Hartley submitted that this was well-developed and detailed. She referred the Committee to your witness statement, your written reflections document and your oral evidence. [PRIVATE].

Decision on Current Impairment

28. In making its decision, the Committee first sought to determine whether your fitness to practise was currently impaired by reason of your misconduct. It exercised its independent judgement and was not bound by the decision of the previous committee. It balanced your interests with those of the public and bore in mind that its primary duty is to protect the public, including maintaining public confidence in the profession and declaring and upholding proper standards and behaviour.

29. The Committee heard and accepted the advice from the Legal Adviser. The Legal Adviser referred the Committee to the relevant paragraphs in the GDC's Guidance in respect of resumed hearings, particularly the matters of impairment, insight and remediation. The Legal Adviser also reminded the Committee that it should keep at the forefront of its mind the GDC's over-arching objective.

30. The Committee was mindful that there was a persuasive burden on you to demonstrate that you had fully remediated the concerns regarding your fitness to practise. The Committee carefully considered the remediation evidence you had provided for this

hearing. It first considered the matters of insight and reflection. The Committee noted from your reflection document and witness statement that you acknowledged your misconduct and apologised. In respect of your oral evidence, the Committee found it to be genuine and credible on these matters. It noted that you took responsibility for your failings and accepted the initial PCC's findings that you had acted in a way that was not in the patients' best interests. You explained how you had reflected on your misconduct and concluded that you would now take your time when practising in future to ensure that you would not be overwhelmed with work.

31. The Committee next went on to consider your CPD evidence. In respect of documentary CPD evidence, the Committee considered this to be insufficient and unsatisfactory. For example, the Committee noted that you had provided screenshots of seminars you had attended rather than the certificates. You had also admitted that there were some courses you had undertaken for which you had not provided the relevant certificates. Furthermore, the Committee has not seen any written reflections to show your learning from the courses you had undertaken. Nonetheless, the Committee also took into consideration your oral evidence. It was assisted and found it useful that Miss Hartley methodically took you through the CPD courses you had undertaken. You also explained what you had learnt from those courses, how you would apply this in practice, how this relates to the issues in this case and how this has enabled you to keep your knowledge and skills up-to-date. It was clear to the Committee, therefore, that you had made suitable efforts in undertaking relevant CPD courses, albeit this was not evidenced in the documents provided.

32. [PRIVATE]

33. In respect of the evidence from your mentors, the Committee noted the positive information provided. In particular, in one letter, it noted that you had, '*attended multiple educational programmes and engaged in detailed discussions, regarding prior determinations, regulatory findings, and areas of professional deficiency identified by the Committee'.*

34. Taking all of this into consideration, the Committee determined that there was evidence that you had reflected extensively on your misconduct and shown insight into the reasons why it had taken place and how you would mitigate the risk of repetition. There was also evidence that you had undertaken sufficient CPD courses to keep your knowledge and skills up-to-date, albeit this was not satisfactorily documented. However, the Committee was mindful of the serious nature of your misconduct, which included significant clinical and behavioural failings. It also considered that you have not practised since June 2021 and, therefore, there would be an element of de-skilling, which would be difficult for you to sufficiently address due to your prolonged period out of practice. [PRIVATE]. The Committee, therefore, determined that there was a risk of

repetition of your misconduct which would place patients at risk of harm if no restrictions were placed on your registration.

35. Accordingly, the Committee determined that your fitness to practise remained currently impaired by reason of misconduct on the grounds of public protection.

36. Furthermore, the Committee determined that a finding of current impairment was required in the public interest. The Committee was of the view that owing to the seriousness of your misconduct, which includes clinical and attitudinal issues, and as you still pose a risk to patient safety for the reasons identified above, public confidence in the profession would be undermined if such a finding were not made.

Decision on Sanction

37. The Committee next considered what sanction to impose on your registration.

38. The Committee has found that your fitness to practise remains impaired. In these circumstances, the Committee concluded that revoking the current suspension order would not be appropriate or sufficient for the protection of the public.

39. The Committee then considered whether to revoke the suspension order and replace it with a direction for conditional registration. It noted your willingness and eagerness to comply with a conditions of practice order. You have also provided the Committee with a set of proposed conditions. The Committee considered that you have sufficiently reflected on your misconduct and taken significant steps to remediate the issues in your case through CPD, mentoring and efforts to maintain your clinical skills. The Committee considered that to impose conditions would allow you to embed your learning into your clinical practice and avoid further de-skilling. Furthermore, the Committee considered that to impose a further period of suspension would be disproportionate and unnecessarily punitive in light of the positive steps you have undertaken regarding remediation, insight and reflection.

40. The Committee considered that workable conditions could be formulated which would be sufficient to protect the public, satisfy the public interest considerations, and allow you to return to practise in a controlled and safe manner. The Committee considered the conditions you have proposed, which included supervision of your practice. However, the Committee considered that close supervision of your practice is necessary to mitigate the risks to the public, bearing in mind the amount of time you have not practised, the serious nature of your clinical failings and [PRIVATE]. The Committee noted that the workplace supervisor would have to be approved by the GDC, but considered that it would not be appropriate for the workplace supervisor to be an employee of yours or an associate dentist at your practice given the potential conflict of interest. The Committee also considered that you should not be permitted to

undertake locum work, which would be incompatible with close supervision.The Committee also considered that the reporting and auditing requirements should include implant treatment as this is the clinical area from which much of your misconduct arose and the area that you previously focused much of your practice. With these amendments, the Committee considered that the conditions proposed by you were appropriate and proportionate to address the concerns in this case.

41. The Committee therefore determined to terminate the suspension and impose conditions on your registration for a period of 12 months pursuant to section 27C (5) of the Dentists Act 1984, as amended, with a review hearing before the expiry of the order. It considered that a 12-month duration is proportionate and would give you an opportunity to demonstrate at the next review hearing that the concerns have been fully remediated and embedded in your practice

42. The conditions as they will appear against your name in the Dentists Register are as follows:

1. *You must provide the GDC, within seven days, the contact details and arrangements for any appointment you accept or are currently undertaking which requires GDC registration, and allow the GDC to exchange information with your employer or any contracting body for which you provide dental services.*

2. *From the date that these conditions take effect, you must inform the GDC within seven days of being notified of:*

    a. *any formal disciplinary action taken against you*
    b. *any regulatory or enforcement action taken against you or a practice for which you are the registered provider*
    c. *any patient complaint received about your clinical practice or conduct at work.*

3. *You must inform the GDC, within seven days of these conditions taking effect, if you are registered with any overseas regulator (or equivalent authority) or within seven days of making an application for registration with any overseas regulator or equivalent authority.*

4. *At any time you are employed to provide dental services which require you to be registered with the GDC, you must remain under the close supervision* of a workplace supervisor nominated by you and approved by the GDC. The workplace supervisor must be a GDC registered dentist.*

5. *You must not start/restart work until your proposed workplace supervisor has been approved by the GDC.*

6. *You must provide reports from your workplace supervisor to the GDC every three months and at least 14 days prior to any review hearing. The report must address:*

    - *Record keeping*
    - *Treatment planning*
    - *Informed consent*
    - *Radiographs*
    - *Implant Treatment*

7. *You must stop working immediately if your workplace supervisor directs you to do so, and you must inform the GDC within seven days of receiving this direction.*

8. *You must not carry out locum or out-of-hours work.*

9. *You must carry out an audit in the following areas of your practice:*

    - *Record keeping*
    - *Treatment planning*
    - *Informed consent*
    - *Radiographs*
    - *Implant Treatment*

    every three months. The audit must be checked and signed by your workplace supervisor.

10. *You must provide a copy of this audit to the GDC every three months and at least 14 days prior to any review hearing or, alternatively, provide a statement, which has been counter-signed by your workplace supervisor, confirming there have been no such cases.*

11. *You must inform the following parties that your registration is subject to the conditions listed at [1] to [10]:*

    - *Any organisation or person employing you or who has an arrangement with you to undertake dental work (within seven days).*
    - *Any professional regulatory body you are registered with (within seven days), or apply to be registered with (at the time of application).*
    - *Any prospective employer (at the time of application), or any organisation or person with whom you intend to enter into an arrangement to undertake dental work (at the time the arrangement is made).*

***Closely supervised**: the workplace supervisor must supervise the registrant's day-to-day work in a way prescribed in the relevant condition or undertaking. The workplace*

supervisor must always be on site and available when the registrant is working. Where the workplace supervisor is unavailable through illness or planned absence, the registrant must not work unless an approved alternative workplace supervisor is in place.

The workplace supervisor must review the registrant's work at least twice a week in one-to-one meetings using case-based discussions. These meetings must focus on all areas of concern identified by the conditions or undertakings. These meetings can be in person or via video conferencing.

43. The Committee now invites submissions on the question of an immediate order.

Decision on Immediate Order (4 February 2026)

44. The Committee has considered whether to make an immediate order on your registration in accordance with Section 30 of the Dentists Act 1984 (as amended).

45. Mr Molloy, on behalf of the GDC, submitted that such an order is necessary as it would be wholly inappropriate for you to practise unrestricted in light of the Committee's decision that your fitness to practise is impaired and the risks it has identified.

46. Miss Hartley, on your behalf, submitted that she did not oppose the imposition of an immediate order.

47. The Committee has considered the submissions made. It has accepted the advice of the Legal Adviser, who referred the Committee to the relevant section on Immediate Orders in the GDC's Guidance.

48. The Committee is satisfied that an immediate order of conditions is necessary for the protection of the public and is otherwise in the public interest. The Committee concluded that given the nature of its findings and its reasons for the substantive order of conditions in your case, it is necessary to direct that an immediate order of conditions be imposed on both of these grounds. The Committee considered that, given its findings, if an immediate order was not made in the circumstances, there would be a risk to public safety and public confidence in the profession would be undermined.

49. The effect of the foregoing determination and this order is that your registration will be subject to the aforementioned conditions immediately from the date on which notice is deemed to have been served upon you. Unless you exercise your right of appeal, the substantive direction for conditional registration as already announced, will take effect 28 days from the date of deemed service, and continue for a period of 12 months. In the event that you exercise your right of appeal, this immediate order will remain in place until resolution of the appeal.

50. That concludes this hearing.