

PUBLIC RECORD

Date: 10/03/2022

Medical Practitioner's name: Dr Anthony OJO

GMC reference number: 6050894
Primary medical qualification: MD 2000 Katholieke Universiteit te Leuven

Type of case	Outcome on impairment
Misconduct	Not impaired

Summary of outcome
Order revoked

Tribunal/Legally Qualified Chair:

Legally Qualified Chair:	Ms Emma Boothroyd
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Review on the Papers

This case was reviewed on the papers, with the agreement of both parties, by a Legally Qualified Chair.

Overarching Objective

Throughout the decision making process the chair has borne in mind the statutory overarching objective as set out in s1 Medical Act 1983 (the 1983 Act) to protect, promote and maintain the health, safety and well-being of the public, to promote and maintain public confidence in the medical profession, and to promote and maintain proper professional standards and conduct for members of that profession.

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1. I have noted the background to Dr Ojo's case, which was first considered by a medical practitioners tribunal in March 2021. In May 2017, Dr Ojo engaged in a 111 telephone call with Patient A's mother regarding Patient A. Patient A was an 11 month old child. Dr Ojo was found to have failed to have provided appropriate clinical management of Patient A during the 111 call including safety netting and safeguarding advice. Patient A died of sepsis and opportunities to prevent his death were missed as a result of Dr Ojo's failings during that call. Further, Dr Ojo was found to have been dishonest in his record keeping in relation to the consultation with Patient A's mother and made false statements in his account to the coroner to cover up his clinical failings. These false representations were maintained in Dr Ojo's statements to the tribunal.

2. At the hearing the tribunal found Dr Ojo's fitness to practise was impaired by reason of his misconduct. The Tribunal considered that Dr Ojo had remediated his clinical failings, but his dishonesty had persisted up to the tribunal hearing and this had compounded his misconduct. The tribunal could identify no remediation or insight into Dr Ojo's dishonesty and determined that a finding of impairment was required to satisfy the overarching objective to promote and maintain public confidence in the medical profession and to promote and maintain proper professional standards and conduct for the members of the profession. That tribunal determined to suspend Dr Ojo's registration for a period of 12 months. It considered that this was a finely balanced decision but on balance Dr Ojo's conduct was not fundamentally incompatible with continued registration and he was capable of reflecting on his dishonesty and the impact it had on Patient A's family and the damage it had caused to the wider profession.

3. In order to provide assistance at this review the tribunal at the previous hearing recommended that Dr Ojo provide:
 - I. Written evidence of further reflection and remediation: Dr Ojo may wish to reflect on his past actions, his dishonesty, and the impact upon public confidence in the medical profession as well as upon his colleagues.
 - II. Reflection on the importance of honesty and candour with patients.
 - III. Targeted courses in professional probity and ethics. Preferably including face-to-face courses, rather than just conducted online (can be via video link).
 - IV. Reflection piece written post his professional courses. He may wish to give the reviewing Tribunal each course aims and objectives, show examples of what he has learnt and demonstrate how he will apply that learning if allowed to resume

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practicing.

- V. Evidence that he has kept up to date clinically during his period of suspension.
4. Dr Ojo and the GMC have agreed that this review should be considered on the papers in accordance with Rule 21B of the General Medical Council (Fitness to Practise) Rules 2004. They have provided agreed terms of a decision which I could make at this review.
 5. I have considered all of the evidence presented to me, and the agreed submissions made on behalf of Dr Ojo and by the GMC. In the submissions, Dr Ojo and the GMC agree that Dr Ojo's fitness to practise is not impaired and that the sanction currently in place should be revoked.
 6. I have taken into account that since the previous order was made Dr Ojo has been out of clinical practice. I can see from the documentation provided by Dr Ojo that he has used that time to reflect extensively on the circumstances leading to the previous hearing and develop his learning on what went wrong and how to avoid any repetition of his misconduct. Dr Ojo has also attended a number of targeted courses as suggested by the tribunal and reflected extensively on the learning from those courses. Dr Ojo has attempted, so far as he is able given the terms of his suspension, to keep up to date with clinical practice and keep in touch with other medical professionals to assist with his continuing development.
 7. I have borne in mind the statutory overarching objective which is to protect, promote and maintain the health, safety and well-being of the public, to promote and maintain public confidence in the medical profession, and to promote and maintain proper professional standards and conduct for the medical profession.
 8. I have determined that Dr Ojo's fitness to practise is no longer impaired by reason of his misconduct.
 9. In reaching this decision, I have considered all of the evidence in the agreed bundle and taken account of the submissions made by the parties. I consider that the reflective pieces written by Dr Ojo demonstrate an acceptance of the dishonest conduct and an awareness of the impact on Patient A's family. Dr Ojo acknowledged in his recent reflection dated 7 December 2021 that "the effect on Patient A's parents and his extended family is enormous.... and my dishonesty made it difficult for them." Dr Ojo also

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stated that he regrets making the mother of Patient A “feel like she was lying” and has repeatedly apologised for his conduct. Dr Ojo has also recognised that his dishonesty reflected badly on the profession as a whole and damaged public trust in doctors. Dr Ojo’s reflections on his learning demonstrate why public trust in the profession is important and how his dishonesty undermined that trust. These issues were highlighted by the tribunal as areas for Dr Ojo to reflect upon as his insight was undeveloped. I consider that Dr Ojo has now fully understood and appreciated the impact his dishonesty had on Patient A’s family and the wider profession.

10. Dr Ojo has attended live online probity and ethics courses and participated in a duty of candour webinar. Dr Ojo has reflected on the learning from these courses and used them to gain a deeper understanding of his misconduct. As a result of this training, I consider that Dr Ojo now has an understanding of the reasons why he acted as he did. Dr Ojo has provided his reflections on the courses he has attended which has led to an understanding that his fear and shame were drivers of his conduct and his distress at learning of the death of Patient A clouded his thinking. Dr Ojo has explained the strategies he would put in place to prevent a repetition of his misconduct, including reaching out to colleagues and continuing to reflect on what he has learned as a result of the fitness to practise process. Dr Ojo has also recognised that his working environment may have contributed to his failures and has indicated that he will keep his future workload under review and avoid situations where he is isolated.
11. Dr Ojo has made extensive efforts to keep his clinical skills up to date during the period of his suspension. He has provided evidence of his CPD courses which cover a wide range of areas and have been undertaken each month during the period of suspension showing a consistent maintenance of his knowledge. Dr Ojo has also begun studying for a Certificate in Pharmacovigilance and intends to progress to a Masters. Dr Ojo has remained a member of an online group of professionals that discuss cases. Dr Ojo has confirmed that he has made no contribution to this group but has continued to observe for his education. I consider that Dr Ojo has made extensive efforts to keep his clinical skills up to date and he would not be a risk to patients if he was allowed to return to practice.
12. I consider that Dr Ojo has fully addressed the issues that led to his dishonest conduct and demonstrated that he has remediated. I note that the previous tribunal were satisfied that Dr Ojo did not have a dishonest character trait and that this was the first time his probity had been questioned. I consider that his reflections demonstrate he now has

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developed insight and in light of all the information I consider the risk of repetition of dishonesty to be low. I consider that Dr Ojo is no longer impaired by reason of his misconduct.

13. In light of my decision, I direct that Dr Ojo's current period of suspended registration be revoked with immediate effect. Given the conclusions I have reached above I see no value in allowing the order to continue until expiry as this would serve no useful purpose and deprive the public of the skills of an otherwise competent doctor.
14. Notification of this decision will be served on Dr Ojo in accordance with the Medical Act 1983, as amended.