

## PUBLIC RECORD

Date: 18/05/2026

Doctor: Dr Hannah SHAHEEN  
GMC reference number: 7411503  
Primary medical qualification: MB BS 2013 Kings College London

Type of case Outcome on impairment  
Review - Misconduct Not Impaired

## Summary of outcome

Revoke conditions

## Tribunal:

Legally Qualified Chair	Ms Samantha Jones
Registrant Tribunal Member:	Dr Muhammad Dadibhai
Registrant Tribunal Member:	Dr Shehleen Khan

Tribunal Clerk:	Mr Matt O'Reilly
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## Attendance and Representation:

Doctor:	Present, represented
Doctor's Representative:	Ms Laura Bayley, Counsel, instructed by Gordons Partnership LLC
GMC Representative:	Mr Vishal Misra, Counsel

## Attendance of Press / Public

In accordance with Rule 41 of the General Medical Council (Fitness to Practise) Rules 2004 the hearing was held partly in public and partly in private.

## Protecting the Public

Throughout the decision making process the tribunal has borne in mind the statutory duty as set out in s1(1) of the Medical Act 1983 (the 1983 Act) to protect the public. The tribunal has considered the relevance and impact on each of the three distinct parts of public protection 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.

## Determination on Impairment - 18/05/2026

1. Parts of this hearing were heard in private in accordance with Rule 41 of the General Medical Council (Fitness to Practise) Rules 2004 (the Rules), where confidential matters XXX were discussed. This determination will be handed down in private due to the confidential nature of matters under consideration. However, as this case concerns Dr Shaheen's misconduct a redacted version will be published at the close of the hearing.

## Background

2. Dr Shaheen obtained her MBBS from King's College London in 2013. After completing her Foundation Year 2 in 2015, she spent two and a half years practising in Australia. In 2018, Dr Shaheen returned to the UK and worked in a number of locum positions in the Midlands. She completed her GP training programme in 2022 and currently works as a GP for the NHS, and as a GP & Health Assessment doctor, at Nuffield Health.

## 27 October - 5 November 2025 MPT Hearing ('the 2025 Tribunal')

3. Dr Shaheen made full admissions to the Allegation which was considered by the Tribunal in 2025.

4. The background to that Allegation related to Dr Shaheen's harassment of three individuals, Mr A, Ms C and Ms B.

5. Dr Shaheen had been in a relationship with Mr A since around February 2019, having met sometime earlier at the XXX of a mutual friend, Ms B. Ms B was a XXX friend of Dr Shaheen and Dr Shaheen was XXX. In around November 2019, Mr A (who was XXX) went XXX. He had decided to end the relationship with Dr Shaheen and used this physical separation as an opportunity to do so. After he left for XXX, Mr A turned off his phone, deleted Dr Shaheen's number and blocked her on his phone. He did not speak with Dr Shaheen or tell her that he was ending the relationship.

6. Dr Shaheen was growing increasingly concerned that she had not heard from Mr A and therefore called him in December 2019 from a different number. Mr A told her that he had ended the relationship. Dr Shaheen called Mr A 'a coward' and Mr A hung up.

7. Dr Shaheen spoke with Mr A again on the telephone in March 2020. They had a discussion about the reasons for the relationship ending. Dr Shaheen continued to contact Mr A from a withheld number between March and October 2020.

8. In October 2020, Dr Shaheen contacted Ms C (Mr A's new partner). Ms C had XXX and Dr Shaheen had sent an email enquiry, requesting Ms C's details in order to arrange a treatment. Dr Shaheen then spoke with Ms C on the phone and subsequently admitted that she was an ex-partner of Mr A. Dr Shaheen broke down on the call and Ms C sympathised with her. Dr Shaheen told Ms C '*he will do the same to you*'. Following the call, Dr Shaheen sent text messages to Ms C, which were responded to.

9. In November 2020, Dr Shaheen sent an unpleasant message to Mr A. In response, Ms C sent Dr Shaheen a message to warn her that if they received one more message, call or email, they would contact the police. Mr A continued to receive calls from Dr Shaheen in March 2021. As a result, he reported the matter to the police, providing them with a statement on 14 March 2021.

10. Dr Shaheen was arrested by the police on 6 April 2021 for harassment/ stalking of Mr A and Ms C. She subsequently self-referred the matter to the GMC after being advised to do so by the police. Dr Shaheen was later charged (date unknown) with an offence relating to Mr A and Ms C, but it was accepted that the charging decision was made in error, as the offences were '*out of time*', which was a bar to bringing any prosecution.

11. Earlier in 2020, Dr Shaheen had contacted Ms B and her partner by message and email. She had sought to discuss the relationship breakdown with them. In May 2020, Dr

Shaheen sent Ms B a message that Ms B considered to be abusive. Ms B decided to block Dr Shaheen on WhatsApp. Despite this, Dr Shaheen continued to contact Ms B. This contact became more intense after Ms B provided a witness statement to the police in March 2021. The unwanted contact with Ms B continued during 2022, until the last contact in December 2023. This was despite repeated requests from Ms B to stop contacting her.

12. Dr Shaheen admitted, and the 2025 Tribunal therefore found proved, that she contacted Mr A on one or more occasion between around March 2020 and March 2021, by email, telephone call and Whatsapp, including by email on 6 November 2020, and by telephone on 5 March 2021, 13 March 2021 and 22 March 2021. Dr Shaheen further admitted that she contacted Ms B on one or more occasion between around May 2020 and 23 December 2023, by Whatsapp on 15 June 2020, by email on 26 May 2020 and 3 October 2022, by telephone on 22 December 2022 and 23 December 2023, and by text message on 11 occasions between 9 July 2020 and 21 November 2023. She further admitted that she contacted, or attempted to contact Ms C on one or more occasion between around 2 October 2020 and 7 November 2020, by telephone on 2 October 2020, and by text message on 2 October 2020, 4 October 2020 and 7 November 2020.

13. Dr Shaheen admitted, and the 2025 Tribunal found proved, that she contacted Ms C via email on 2 October 2020, she did so inappropriately as she asked for her phone number so that she could arrange a treatment at XXX, when she knew that Ms C was Mr A's partner, that she did not intend to arrange a treatment with Ms C and that she intended to speak to Ms C about Mr A.

14. Dr Shaheen also admitted, and the 2025 Tribunal also found proved, that Dr Shaheen's unwanted contact and attempted contact with Mr A, Ms C and Ms B amounted to harassment.

15. At the impairment stage, Ms Laura Bayley, counsel on behalf of Dr Shaheen at the 2025 Tribunal, submitted that Dr Shaheen accepted that the misconduct and breaches of Good Medical Practice were so serious as to amount to serious professional misconduct.

16. When considering whether Dr Shaheen's actions amounted to misconduct, the 2025 Tribunal considered the particular circumstances which initially led to her misconduct. Namely, she had been in a committed relationship, which ended in an unkind and highly undesirable manner. Not long after Dr Shaheen was able to get an explanation for the relationship breakdown from Mr A, the country went into a period of lockdown due to the

COVID-19 pandemic. She was at home and obsessed over what had happened and the reasons for the breakup. Her initial reaction was understandable, as was her decision to seek support from Ms B and her husband.

17. The 2025 Tribunal also considered the nature of Dr Shaheen’s conduct and the manner in which it progressed, namely by contacting a new partner of Ms A under a false pretence. The unwanted contact with Mr A lasted for around one year. Of particular note, the unwanted contact persisted when she had clearly been told to stop by Mr A and Ms C and been warned that they would contact the police. Mr A installed lights and CCTV where Ms C worked as they were concerned that Dr Shaheen would turn up XXX, and cause her harm. The 2025 Tribunal considered that these individuals felt the need to take action to protect themselves from Dr Shaheen, whether or not that was the intended result of Dr Shaheen’s behaviour.

18. The 2025 Tribunal considered that the continued unwanted contact with Ms B came at a time when she realised that Ms B had provided the police with a witness statement. The messages to Ms B appeared to be intentionally hurtful, abusive and vitriolic. They appeared to be a direct response to the witness statement Ms B had given to the police. At one stage, Dr Shaheen had bail conditions not to contact Ms B (in addition to Mr A and Ms C). Whilst there was no suggestion that she had breached these conditions, the 2025 Tribunal considered that Dr Shaheen should have understood the fact that Ms B wanted no further contact with her. She also continued to send Ms B hurtful messages, after Ms B had told her to stop on a number of occasions, both in messages and telephone calls. The persistent unwanted contact with Ms B also came after police involvement for a harassment matter involving Mr A and Ms C, however this did not dissuade Dr Shaheen. Ms B and her husband had CCTV installed at their home as a result of Dr Shaheen’s behaviour.

19. The 2025 Tribunal was satisfied that paragraph 65 of GMP was engaged in this case. Namely:

*65. You must make sure that your conduct justifies your patients’ trust in you and the public’s trust in the profession.*

20. The 2025 Tribunal noted that Dr Shaheen had conceded that her behaviour amounted to serious misconduct, and the Tribunal found that her unwanted contact persisted over a period of time, with three individuals, despite several warnings to desist. Dr Shaheen’s unwanted contact amounting to harassment, had a significant impact on those to

whom she directed her unwanted contact, resulting in fear, disruption, stress and upset to their day to day lives.

21. The 2025 Tribunal was satisfied that Dr Shaheen’s conduct fell below the standard expected of a medical professional and that her behaviour did amount to serious professional misconduct.

22. The 2025 Tribunal found Dr Shaheen’s fitness to practise currently impaired. While they found the misconduct was serious, they were satisfied that it was remediable. They considered that Dr Shaheen had expressed genuine regret and remorse for her behaviour and she had demonstrated that in her reflections on CPD courses she had undertaken in November 2024 and in the reflective statement she submitted to the Tribunal. There was no evidence that there had been any repetition of any unwanted contact with any individual since December 2023.

23. The 2025 Tribunal was of the view that whilst Dr Shaheen had developed substantial insight into her unwanted contact with Mr A and Ms C, the insight in respect of the unwanted contact with Ms B was very recent and was more limited.

24. The 2025 Tribunal was satisfied that Dr Shaheen had, at the time of the 2025 hearing, developed recent insight into her conduct towards Ms B and this was evidenced in her very recent reflections. However, whilst Dr Shaheen had engaged on a general level with her reflections about the behaviour towards Ms B, the 2025 Tribunal considered that her oral evidence demonstrated that she had not fully reflected on the content of all the messages and emails she sent to Ms B and therefore had not developed full insight into her conduct. It also did not appear to the 2025 Tribunal that Dr Shaheen had put herself fully in the position of Ms B, being on the receiving end of her persistent unwanted and distressing contact to the point where the family felt the need to install CCTV.

25. The 2025 Tribunal was of the view that Dr Shaheen had not fully considered the impact of her behaviour on Ms B. It therefore determined that it could not be satisfied that Dr Shaheen had fully remediated her misconduct.

26. The 2025 Tribunal was of the view that the risk of repetition was low, but it could not be satisfied that the risk of repetition was *highly* unlikely. The 2025 Tribunal was of the view that Dr Shaheen had more work to do to develop and embed her insight and understanding

into the causes of her actions, understanding of her thought processes and the impact her actions had.

27. The 2025 Tribunal concluded that a finding of current impairment was necessary in order to promote and maintain public confidence in the profession, and to promote and maintain proper professional standards and conduct for members of the profession. It therefore determined that Dr Shaheen's fitness to practise was impaired by reason of her misconduct.

28. The 2025 Tribunal determined to impose a period of conditions on Dr Shaheen's registration for 6 months. It was satisfied that a conditions of practice order was appropriate, proportionate, workable and measurable as there were identifiable areas where Dr Shaheen could develop further insight. Further, the 2025 Tribunal were satisfied that Dr Shaheen would be likely to respond positively if provided with an opportunity to engage in further reflections, as evidenced by her reflections and remediation already undertaken and provided to the Tribunal. They considered a conditions of practice order was the most proportionate and least restrictive response given the low risk of repetition and significant mitigation in the case. The 2025 Tribunal found that this period of conditional registration would allow Dr Shaheen sufficient time to further develop her insight through the completion of a professional development plan ('PDP'). The 2025 Tribunal outlined that a future Tribunal may be assisted by a copy of Dr Shaheen's completed PDP, reflections which demonstrated her further insight into the outstanding concerns of the 2025 Tribunal, and any other evidence Dr Shaheen considered would assist.

### **Today's hearing**

29. At this review hearing the Tribunal now has to decide in accordance with Rule 22(1)(f) of the General Medical Council (GMC) (Fitness to Practise) Rules 2004, as amended ('the Rules') whether Dr Shaheen's fitness to practise is impaired by reason of misconduct.

### **The Evidence**

30. The Tribunal has taken into account all the evidence received, both oral and documentary.

31. The Tribunal also heard oral evidence from Dr Shaheen.

### Summary of Dr Shaheen’s oral evidence

32. Dr Shaheen was asked about any strategies for dealing with a similar incident should she ever find herself in a similar position and the support network available to her. XXX. She explained she had XXX which provided her with some coping mechanisms and helped her to sort and challenge the XXX thought processes she was having about this situation. XXX

33. Dr Shaheen explained that she does now have a lot of insight and knows when she is likely to need help based on XXX. In terms of strategies, she has put in place to maintain XXX, Dr Shaheen explained that she has a good routine, a decent work life balance which enables her to keep her XXX in a good place.

34. Dr Shaheen said that the main difference between 2021 and now is that she did not tell anyone as she was embarrassed, ashamed and panicked about everything. She said that now she has a strong support network: multiple friends who she can talk to and who genuinely have her best interests at heart and who are very good people of sound judgment. She said that poetry is helpful for her XXX and reading philosophy. She said that she left social media a few years ago and that her life is better for it.

35. Dr Shaheen said that she would notice XXX. She said her landlady is a really good support, knows about the situation and would probably notice, as would friends. She benefits from professional support in both of her workplaces, as also demonstrated by her testimonials. Dr Shaheen explained that if she were to find herself in the same position again, she would reach out to XXX as a first point of contact. She would pause to reflect on the situation and her actions and try not to react. She would involve friends and seek support instead of making impulsive decisions.

### Documentary Evidence

36. The Tribunal received:

- The determinations of the 2025 hearing;
- Email from Dr Shaheen containing Work, Workplace Reporter and Responsible Officer Details, dated 9 December 2025;
- Introductory Letter from the GMC to Dr Shaheen, dated 16 December 2025, attaching: GMC Personal Development Plan template;

- Email trail containing Responsible Officer approval of Workplace Reporters, dated 18 December 2025;
- Workplace Reports from Dr J, Lead GP at Operose Health, Islington, dated 9 January 2026 and 23 April 2026;
- Workplace Reports from Mr F, Clinic Manager at Nuffield Health, Moorgate, dated 13 January 2026 and 9 April 2026;
- Dr Shaheen’s Personal Development Plan dated, 9 March 2026;
- Email from Dr Shaheen’s Responsible Officer/ nominated deputy, Dr K confirming approval of Dr Shaheen’s PDP, dated 10 March 2026;
- Dr Shaheen’s CV;
- Reflective statements, undated;
- PDP;
- CPD Certificates, with reflections, various;
- Testimonials;
- Patient and Colleague feedback, various;
- Letter from Ms L, Deputy Regional Head of Professional Standards for NHSE London, dated 7 May 2026.

### Submissions on behalf of the GMC

37. Mr Vishal Misra, Counsel, provided the Tribunal with a background to this case and submitted that, given the evidence of insight and remediation as laid out by Dr Shaheen, in terms of the defence bundle and in terms of any impairment, the GMC is neutral. Mr Misra submitted that, should the Tribunal find no impairment, then keeping conditions in place until the expiry of the order on 8 June 2026 may be considered disproportionate.

### Submissions on behalf of Dr Shaheen

38. Ms Bayley submitted written submissions which were supplemented orally. She submitted that Dr Shaheen has reflected upon the allegations and her misconduct at length. She invited the Tribunal to agree that the misconduct is capable of remediation and that Dr Shaheen has demonstrated sufficient insight and remediation such that the misconduct is highly unlikely to recur. She invited the Tribunal to find that Dr Shaheen’s fitness to practise is no longer impaired on public protection grounds. She submitted that the six-month order has been complied with and, taken in combination with all that has gone before, satisfactorily met the public interest demands of this case. She submitted that Dr Shaheen is no longer impaired on public interest grounds.

39. Ms Bayley submitted that Dr Shaheen complied with the fitness to practise investigation, had self-referred, attended each day of the 2025 Tribunal hearing, submitted herself for questioning over two days which was quite an ordeal, as well as made admissions to all the allegations to prevent any witnesses having to attend and relive any trauma. Ms Bayley then invited the Tribunal to consider all the reflective work that Dr Shaheen has done, with numerous CPD certificates and reflections on those courses at the time they were done, then taking that learning and applying it. She said that Dr Shaheen has strengthened her practice to ensure that there is no recurrence, and that there had been no recurrence.

40. Ms Bayley reminded the Tribunal that this was the single referral that Dr Shaheen has ever had to the GMC and amounts to the sum total of any misconduct allegations that have ever been made against her. She invited the Tribunal to consider all of those aspects and agree that Dr Shaheen's fitness to practise is no longer impaired on public interest grounds, that the public interest considerations in this case have now been satisfied, as well as by the imposition, and compliance with, a six-month restriction on her registration. Ms Bayley also reminded the Tribunal that this is a public hearing, and the determination of the 2025 Tribunal is on the website for 12 months, and then searchable for 10 years. She said that this Tribunal's determination will also be available for those same periods.

41. Ms Bayley referred the Tribunal to the accepted and relevant legal framework when considering impairment. She submitted that the Tribunal will be aware that fitness to practise is not about punishing registrants for past misconduct but is primarily concerned with protection of the public.

42. Ms Bayley invited the Tribunal to take into account the attitude of Dr Shaheen towards the misconduct charges. She submitted that there was little more that Dr Shaheen could do to demonstrate that she does have that requisite level of remorse, remediation and insight to assure this Tribunal that the conduct is highly unlikely to be repeated. She submitted that there is no obligation to find impairment to uphold public confidence. She said that in some cases, that may be assured by a robust regulatory process and a finding of misconduct, but over and above that, there is also a finding of impairment and a sanction. She submitted that Dr Shaheen had faced a robust regulatory process, which has now been ongoing for five years and stressful to Dr Shaheen during that time. Ms Bayley submitted that despite that stressful situation, there had been no repetition of her behaviour in that time. She submitted that a six-month condition of practice order was a sufficient sanction to mark the public interest and invited the Tribunal to accept that there is no longer any requirement

on that basis. Ms Bayley reminded the Tribunal of the principle of proportionality which applies throughout the Tribunal's decision-making process and on that basis, invited it to consider that there is no longer any necessity for a finding of impairment or the imposition of a sanction.

43. Ms Bayley submitted that Dr Shaheen is manifestly and self-evidently capable and has a lengthy history of demonstrating safe and effective practice, borne out by her testimonials and patient feedback. She said that there have never been any concerns raised about Dr Shaheen's patient care. She submitted that in light of Dr Shaheen's ongoing training and continued safe practice and insight, she invited the Tribunal to agree that Dr Shaheen is no longer any less fit to practise than any other doctor with an unblemished record. She said that the amount of work that Dr Shaheen has undertaken to learn about perspective taking, on communication, dignity, care and the importance of maintaining others' dignity and civility in all of her interactions, means that she has that enhanced level of understanding. She said this is borne out in Dr Shaheen's testimonials. Ms Bayley said that she has never seen somebody that was described quite so often as being kind and compassionate when it comes to patients.

44. Ms Bayley submitted that Dr Shaheen has worked incredibly hard to produce those reflections, to do the work that is required and has approached this entire fitness to practise process with a very professional stance and healthy attitude. She said Dr Shaheen has been open to criticism, taken responsibility and accountability for her actions and dedicated herself to demonstrating that she is no longer impaired, that her misconduct is remediated and is highly unlikely to recur. She said Dr Shaheen has offered apologies at the 2025 Tribunal, to the public, and significantly to the parties that have been affected. She invited the Tribunal to agree that those apologies, repeated within Dr Shaheen's most recent updated reflections, are genuine and heartfelt.

45. Ms Bayley referred the Tribunal to the defence bundle which included Dr Shaheen's updated work details, her personal development plan, a number of relevant courses that she has undertaken, further reflections and new perspectives, updated testimonials, and patient feedback. Ms Bayley submitted that, significantly, there is a letter from NHS England, confirming the recommendation that Dr Shaheen should resume unrestricted practice. She reminded the Tribunal that NHS England imposed conditions on Dr Shaheen's practice, reflecting the MPTS conditions.

46. Ms Bayley reminded the Tribunal of the 2025 Tribunal decision that the misconduct was remediable, that Dr Shaheen had developed substantial insight into her unwanted contact in relation to Mr A and Ms C. She said the 2025 Tribunal also determined that Dr Shaheen’s insight into the unwanted contact with Ms B was more recently developed, and although it determined the risk of repetition was low, that further work was required to develop and embed her insight. She said it found that a sanction was therefore required in the public interest and maybe on public protection grounds. Ms Bayley submitted that Dr Shaheen has approached the substantive order with that same level of dedication and professionalism as she had all the way through the hearings. She said Dr Shaheen has undertaken targeted and relevant training, which she has reflected on and participated in further reflective discussions with professional colleagues, and considered in detail, particularly in relation to Ms B and how Good Medical Practice applies.

47. Ms Bayley submitted that Dr Shaheen has considered a lot of philosophical concepts and has genuinely learned from the CPD that she has undertaken to try to improve and strengthen her practice through that. She invited the Tribunal to find that Dr Shaheen’s insight is now well developed in relation to her misconduct, and more importantly embedded in her practice. She said that Dr Shaheen genuinely and deeply regrets her actions, that they are of deep personal and professional shame and anguish.

48. Ms Bayley submitted that Dr Shaheen now has healthy coping mechanisms. She said that she hopes Dr Shaheen has been able to reassure the Tribunal in her oral evidence that were she to experience such circumstances again, she would seek support XXX. She referred the Tribunal to the positive patient and colleague feedback, which demonstrated Dr Shaheen as a highly regarded and valued doctor who is well respected for her clinical skills, her professionalism, and her kindness and compassion towards patients. She said Dr Shaheen is a medical professional of good character, notwithstanding this case. Ms Bayley submitted that the Tribunal can be satisfied that the charges represent conduct which is entirely out of character for Dr Shaheen, which occurred at a uniquely emotional and stressful time and within the context of the pandemic and that the misconduct is highly unlikely to occur. She submitted that, in those circumstances, the Tribunal is invited to find that Dr Shaheen’s fitness to practise is not currently impaired on any public protection or public interest grounds.

49. Ms Bayley invited the Tribunal to take the view that the public interest has been adequately marked and that a finding of current impairment is no longer necessary on public interest grounds to maintain public confidence or to uphold professional standards. She said

that this process has done what it was intended to do. She submitted that if the Tribunal found no current impairment, there are no grounds for continuing any sort of restriction, as it becomes disproportionate. She said that it was a matter for the Tribunal whether to revoke the order immediately or allow it to expire on 8 June 2026.

### **The Relevant Legal Principles**

50. The Tribunal reminded itself that the decision of impairment is a matter for the Tribunal's judgment alone. As noted above, the 2025 Tribunal set out the matters that a future Tribunal may be assisted by. This Tribunal is aware that it is for the doctor to satisfy it that she would be safe to return to unrestricted practice.

51. This Tribunal must determine whether Dr Shaheen's fitness to practise is impaired today, taking into account her conduct at the time of the events and any relevant factors since then such as whether the matters are remediable, have been remedied and any likelihood of repetition.

### **The Tribunal's Determination on Impairment**

52. The Tribunal reviewed the evidence it had received in this case, both oral and documentary as well as the written submissions submitted by Ms Bayley.

53. The 2025 Tribunal suggested that a reviewing Tribunal may be assisted by receiving a completed PDP, reflections which demonstrate her further insight into the outstanding concerns of the 2025 Tribunal, and any other evidence Dr Shaheen considers would assist.

54. This Tribunal noted that since the 2025 Tribunal hearing, Dr Shaheen has undertaken significant steps, and extensive work, to remediate her misconduct and gain insight into that misconduct. In particular, she has undertaken further courses and reflective work to particularly understand her misconduct towards Ms B and embed insight and learning from her behaviour. She has provided insightful reflections which demonstrate that she has identified the nature and circumstances leading up to her misconduct, why she acted the way she did and how she would act differently in the future. She has undertaken targeted CPD courses which she has also reflected upon, at the time she undertook those courses, and provided those reflections.

55. Dr Shaheen has demonstrated a genuine expression of apology, regret and remorse for her behaviour. The Tribunal also recognised the unique circumstances which led to Dr Shaheen’s misconduct which occurred at the start of the Covid-19 pandemic lockdown. It is accepted that her actions were out of character.

56. The Tribunal noted that there has been no further repetition of the misconduct, which occurred five years ago. There is no evidence before this Tribunal of any further complaints of any description against her. The patient and colleague feedback provided is very positive as are the testimonials.

57. Dr Shaheen has taken concrete steps to understand and recognise what her triggers were for the behaviour which led to her misconduct, and what she would do were they to recur. The Tribunal is satisfied that Dr Shaheen’s learning and insight is well developed and embedded. The Tribunal considered that she had been open and transparent in relation to these matters with both her personal and professional support networks. She has also demonstrated that she has these support networks available to her which she can rely on in the future were she to find herself in a similar situation.

58. The Tribunal took confidence and reassurance in Dr Shaheen’s evidence that she understands XXX and that she had coping strategies in place and a close support network.

59. The Tribunal was satisfied that Dr Shaheen has fully addressed the concerns of the 2025 Tribunal and that the extra time since the substantive hearing had allowed Dr Shaheen to further learn, reflect and embed positive behaviours. It was of the view that Dr Shaheen has gone above and beyond what it might have expected to have received by way of insight and remediation. It was satisfied that Dr Shaheen has fully remediated her misconduct and has gained full insight into her behaviour.

60. The Tribunal was therefore satisfied that there was a low level of risk and that the behaviour was highly unlikely to recur.

61. The Tribunal is satisfied there are no patient safety concerns in this case. In respect of public confidence in the profession, the Tribunal was of the view that the imposition of six months conditional registration was imposed in order to allow Dr Shaheen sufficient time to address the concerns of the 2025 Tribunal. The Tribunal is satisfied that Dr Shaheen has met those concerns and that that public confidence in the medical profession and the need to uphold proper professional standards has been met.

62. The Tribunal therefore determined that, in all the circumstances of this case, Dr Shaheen’s fitness to practise is no longer impaired by reason of her misconduct.

63. When considering whether to allow the order of conditions to expire at the end of the six-month period on 8 June 2026 (in three weeks), or to revoke them, this Tribunal reminded itself that the 2025 Tribunal imposed a six-month conditions of practice in order to allow Dr Shaheen sufficient time to address its concerns. The length of conditional registration appears not to have been imposed on the basis of marking the misconduct.

64. Therefore, this Tribunal considered that, a fully informed member of the public with full knowledge of all the details in this case, would be satisfied that public confidence in the profession has already been met given that Dr Shaheen has more than sufficiently addressed the concerns raised, and the public record has been marked by the imposition of an order of over five months in length.

65. The Tribunal did not consider that this was one of those cases in which the public record required the order to last the entire six months especially given that Dr Shaheen’s fitness to practise is no longer impaired in view of the extensive remediation undertaken.

66. The Tribunal therefore determined to revoke the order of conditions imposed on her registration with immediate effect.

67. This case is concluded.