

PUBLIC RECORD**Dates:** 29/07/2024 - 31/07/2024

Medical Practitioner's name: Dr Ibrahim HAFEZ

GMC reference number: 7254484

Primary medical qualification: MD 1995 Semmelweis Orvostudományi Egyetem (Semmelweis University of Medical Sciences)

Type of case

Restoration following disciplinary erasure

Summary of outcome

Restoration application refused. No further applications allowed for 12 months from last application.

Tribunal:

Legally Qualified Chair	Mr Nathan Moxon
Lay Tribunal Member:	Mrs Cindy Mackie
Medical Tribunal Member:	Dr Prashanth Nandhabalan

Tribunal Clerk:	Mrs Jennifer Ireland
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Attendance and Representation:

Medical Practitioner:	Present, not represented
Medical Practitioner's Representative:	N/A
GMC Representative:	Ms Emma Gilsenan, Counsel

Attendance of Press / Public

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

Overarching Objective

Throughout the decision making process the tribunal 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.

Determination on Restoration Following Disciplinary Erasure - 31/07/2024

1. The Tribunal has convened to consider Dr Hafez's application for his name to be restored to the Medical Register following his erasure for disciplinary reasons in 2018.
2. The Tribunal has considered the application in accordance with Section 41 of the Medical Act 1983, as amended ('the Act') and Rule 24 of the GMC (Fitness to Practise) Rules 2004, as amended ('the Rules').
3. This is Dr Hafez's first application to be restored to the Medical Register.

Background

4. Dr Hafez qualified in 1995 and gained his Specialist Qualification in Neurological Surgery in Budapest in 2004. At the time of the events that led to Dr Hafez's erasure he was practising as a Specialist Registrar in Neurosurgery at the Imperial College Healthcare NHS Trust ('ICHT') and at Hull and East Yorkshire NHS Trust ('HEYHT').
5. The circumstances that led to Dr Hafez's erasure were first considered at a hearing before a Medical Practitioners Tribunal ('MPT') in September 2018 ('the 2018 Tribunal').
6. The 2018 Tribunal determined the facts as follows:

Imperial College Healthcare NHS Trust

1. Between 10 August 2015 and 7 December 2015 you were employed by Imperial College Healthcare NHS Trust ('Imperial') as a Specialist Registrar in Neurosurgery. **Admitted and found proved**
2. On 30 August 2015 you failed to adequately perform a burr hole evacuation of a subdural haematoma on Patient A, in that you:

- a. did not use the drill adequately when perforating Patient A's skull; **Not proved**
- b. inserted a drain into Patient A's cerebral parenchyma. **Admitted and found proved**

Hull and East Yorkshire NHS Trust

3. On 22 October 2015 you submitted an application ('the Application') for the position of Clinical Fellow in Neurosurgery to Hull and East Yorkshire NHS Trust ('Hull and East Yorkshire') and within the Application you failed to:

- a. disclose that at the time of submitting the Application you were employed at Imperial; **Admitted and found proved**
- b. provide details of a referee from Imperial. **Admitted and found proved**

4. In respect of paragraph 3, you knew at the time you submitted the Application that you:

- a. had not disclosed or provided the information listed in paragraphs 3(a) and (b); **Determined and found proved**
- b. were required to disclose or provide the information listed in paragraphs 3(a) and (b). **Determined and found proved**

5. On 6 November 2015 you attended an interview ('the Interview') at Hull and East Yorkshire, during which you:

- a. failed to disclose that you:
 - i. were subject to investigation by Imperial; **Admitted and found proved**
 - ii. had been formally excluded by Imperial; **Admitted and found proved**

- b. gave the impression that you were currently working and undertaking the required duties of your role at Imperial. **Admitted and found proved**
6. In respect of paragraph 5, you knew that during the Interview you:
- a. had:
- i. not disclosed the information listed at paragraphs 5(a)(i) to (ii); **Admitted and found proved**
- ii. given the impression described at paragraph 5(b); **Determined and found proved**
- b. were required to:
- i. disclose the information listed at paragraphs 5(a)(i) to (ii); **Determined and found proved**
- ii. not give the impression described at paragraph 5(b). **Determined and found proved**
7. Between 12 November 2015 and 12 January 2016 you failed to inform Hull and East Yorkshire that you:
- a. were or had been subject to investigation by Imperial; **Admitted and found proved as amended under Rule 17(6)**
- b. had been formally excluded by Imperial. **Admitted and found proved**
8. In respect of paragraph 7, you knew that you:
- a. had not provided the information listed at paragraphs 7(a) and (b); **Admitted and found proved**

b. were required to provide the information listed at paragraphs 7(a) and (b). **Determined and found proved**

9. Your actions as described at paragraphs 3 to 8 were dishonest. **Determined and found proved in relation to paragraphs 4, 6 & 8**

10. On or around 22 December 2015 you failed to obtain appropriate consent from Patient B in relation to a microdiscectomy on Patient B's left side in that the consent form referred only to a microdiscectomy on Patient B's right side. **Admitted and found proved**

11. On 23 December 2015 you assisted Dr C with the microdiscectomy during or before which you realised that you had obtained consent for the wrong side only and you:

a. failed to appropriately communicate with Dr C forthwith that you had failed to take appropriate consent; **Admitted and found proved**

b. knew that you were required to inform Dr C forthwith that you had failed to take appropriate consent. **Determined and found proved**

12. On 23 December 2015 having realised that you obtained consent for the wrong side you:

a. altered the consent form without:

i. consulting Patient B; **Admitted and found proved**

ii. informing Dr C; **Admitted and found proved**

b. knew you should not alter the consent form without:

i. consulting Patient B; **Determined and found proved**

ii. informing Dr C. **Determined and found proved**

13. On 23 December 2015 you failed to maintain adequate records for Patient B in that having amended the consent form you:

- a. failed to record on the consent form:
 - i. that it had been amended; **Admitted and found proved**
 - ii. the reason for the amendment; **Admitted and found proved**
- b. failed to record in Patient B's medical records:
 - i. that the consent form had been amended; **Admitted and found proved**
 - ii. the reason for the amendment; **Admitted and found proved**
- c. knew that you were required to record the information stated at paragraphs 13(a) and (b). **Not proved**

14. Your actions as described at paragraphs 11 to 13 were dishonest.
Determined and found proved in relation to paragraphs 11 and 12.
Not proved in relation to paragraph 13.

7. When considering misconduct in relation to Dr Hafez's treatment of Patient A, the 2018 Tribunal concluded that Dr Hafez's standard of care fell so far short of the standards of care expected of a reasonably competent Specialist Registrar in Neurosurgery as to amount to misconduct that was serious.

8. The 2018 Tribunal found that Dr Hafez knowingly and dishonestly withheld relevant information from a prospective employer in an application form, during an interview and further to his obtaining the position at HEYHT. The 2018 Tribunal had no doubt that Dr Hafez's repeated dishonesty was not just a simple oversight but rather a deliberate attempt to conceal his true circumstances. The 2018 Tribunal considered that it was incumbent on Dr Hafez to be open about his suspension and exclusion from ICHT, and that he had chosen to withhold the information for a prolonged period. Dr Hafez's dishonesty only came to light when he was required to notify his employer that conditions had been imposed on his registration by the GMC.

The 2018 Tribunal considered that these actions undermined public confidence in the medical profession and the maintenance of proper professional standards. Having considered all of the evidence, the 2018 Tribunal was satisfied that Dr Hafez's actions in this respect amounted to misconduct that was serious.

9. The 2018 Tribunal next considered whether Dr Hafez's failure to take appropriate consent from Patient B amounted to misconduct. Having considered the expert evidence, that this was below but not seriously below the expected standard, the 2018 Tribunal was satisfied that this failing, in itself, did not amount to misconduct that was serious.

10. The 2018 Tribunal then considered whether Dr Hafez's dishonesty in his failure to inform Mr C that he had failed to take appropriate consent and had altered the consent form without consulting Patient B, or informing Mr C, amounted to serious misconduct. The 2018 Tribunal noted that Dr Hafez's suspension and exclusion from ICHT arose out of his clinical failing in respect of Patient A and his failure to inform Mr E of that failing at the time. Despite the fact that, in that instance, it was made clear to Dr Hafez that he should have communicated with his senior colleague, within four months he repeated that same failing in a clinical situation at HEYHT. The 2018 Tribunal considered that this demonstrated a clear propensity on Dr Hafez's part to conceal information that may leave him open to criticism. The 2018 Tribunal was satisfied that Dr Hafez's dishonesty in relation to Patient B's consent amounted to misconduct that was serious.

11. Having found serious misconduct, the 2018 Tribunal went on to consider impairment in relation to misconduct.

12. The 2018 Tribunal was satisfied that Dr Hafez's clinical failings in respect of Patient A were remediable. However, there was limited evidence before the 2018 Tribunal in relation to remediation. The 2018 Tribunal noted that Dr Hafez stated that he had been unable to remediate fully due to restrictions on his practice. This meant that the 2018 Tribunal could not be satisfied that Dr Hafez did not pose an ongoing risk to patients.

13. In relation to Dr Hafez's repeated dishonesty, the 2018 Tribunal took into account that dishonesty is difficult to remediate. However, there was no evidence to suggest that Dr Hafez had engaged with the issue, despite undertaking a course on probity. The 2018 Tribunal had regard to a reflective statement produced by Dr Hafez, in which he stated what he would do in the future, however, there was no real reflection on the potential impact that his dishonesty could have had on either his patients or colleagues. The 2018 Tribunal noted

that Dr Hafez had undertaken a probity course but there was no evidence before it to demonstrate what Dr Hafez had learned from the course, or any consideration of why he might have acted in the way that he did.

14. The 2018 Tribunal noted that Dr Hafez appeared to maintain his position that his actions arose out of a lack of care on his part, rather than a conscious decision to withhold information, even after the 2018 Tribunal's findings. The 2018 Tribunal considered that this demonstrated a continued lack of candour and subsequent lack of insight.

15. Having considered all the circumstances, the 2018 Tribunal determined that Dr Hafez's fitness to practise was impaired by reason of misconduct and went on to consider what sanction to impose.

16. The 2018 Tribunal found that Dr Hafez's conduct demonstrated particularly serious departures from the principles set out in Good Medical Practice (2013) ('GMP'), a reckless disregard for patient safety and, in the case of Patient A, caused serious harm through incompetence. It found that Dr Hafez's dishonesty was persistent and considered his admission that he did not want to give a bad impression to his senior colleagues which demonstrated his propensity to put his own interests before those of patients. The 2018 Tribunal was not satisfied that Dr Hafez had demonstrated sufficient remediation of this aspect of his character and it considered that he therefore presented an ongoing risk to patients.

17. The 2018 Tribunal considered the overarching objective, balancing Dr Hafez's interests with the need to protect the public. It determined that Dr Hafez had very limited insight into the gravity of his actions. Taking all of the circumstances into account, the 2018 Tribunal determined that Dr Hafez's misconduct was fundamentally incompatible with continued registration. The 2018 Tribunal therefore concluded that the only appropriate and proportionate sanction in this case was one of erasure. It also imposed an immediate order of suspension.

The Current Restoration Hearing

18. This Tribunal convened to consider Dr Hafez's application for his name to be restored to the Medical Register in accordance with Section 41 of the Medical Act 1983 (as amended) and Rule 24 of the Rules.

The Evidence

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

20. Dr Hafez provided his own witness statement and also gave oral evidence at the hearing. In addition, the Tribunal received evidence from the following witnesses on Dr Hafez's behalf:

- Mr F, Former Clinical Lead for Neurosurgery at Szent Borbála Hospital, Hungary, via telephone; and
- Mr G, Consultant Neurosurgeon at Kettering General Hospital, via telephone.

21. The Tribunal also received documentary evidence provided by the parties. This evidence included but was not limited to:

- MPTS Record of Determination, dated September 2018;
- Dr Hafez's restoration application and supporting documentation, dated 14 January 2024;
- Various Continuing Professional Development certificates arising from online British CPD;
- Evidence of CPD undertaken in Hungary;
- Patient feedback, dated between 2005 and 2014;
- Email confirmation of his employment as a specialist neurosurgeon in Hungary between December 2018 and December 2021;
- VERL-UD8 Medical Service Statement from his current employer in Hungary, confirming that Dr Hafez provides medical services and that the signatory is not aware of any concerns of his performance;
- A letter of reference from the Director of IQB Medical, dated 13 October 2023, confirming that Dr Hafez has been employed as a neurosurgical consultant since December 2021. It outlines Dr Hafez's duties and refers to positive feedback from patients;
- Certificate of Good Standing from the National Directorate General for Hospitals in Budapest which confirms that Dr Hafez has no criminal convictions and is '*...entitled to pursue the activities of a doctor and a specialist in neurological surgery in Hungary without supervision*';

- Email confirmation and certificate of satisfactory performance that Dr Hafez has undertaken a clinical attachment at Coventry Hospital between 21 February 2022 and 18 March 2022; and
- Email confirmation and certificate of satisfactory performance that Dr Hafez had undertaken a clinical attachment at Kettering General Hospital between 20 February 2023 and 3 March 2023.

Dr Hafez's evidence

22. Dr Hafez gave evidence to the Tribunal on his own behalf. He was cross-examined and also answered questions from the Tribunal.

23. Dr Hafez told the Tribunal that he had undertaken two clinical attachments in the UK, the first in 2022 and the second in 2023. He stated that he shadowed a colleague during daily rounds, and patient management, as well as attending the operating theatre to observe procedures. He told the Tribunal that Mr G had given him the opportunity to assess patients, while working within the guidelines for a clinical attachment and making it clear that he was not a licensed doctor, and discussing everything with Mr G. He told the Tribunal that he had had a very open and free discussion about the reasons for his erasure with both Mr G and Mr H during this time.

24. Dr Hafez told the Tribunal that he had returned to practise in Hungary where he had been working since December 2018. During this time, he said that he had discussed his erasure with a former colleague, Mr F. He stated that Mr F had then observed his surgeries for a very long time between 2018 and 2021, at his own request, and had observed between 50 and 55 burr hole procedures of the approximately 70 to 75 he had performed. He said that they had also discussed the procedure on Patient A, the things that had gone wrong, and the issues around consent with Patient B.

25. In respect to the issue of consent, Dr Hafez acknowledged his dishonesty but maintained that this was unintentional. He told the Tribunal that he had frequently witnessed corrections to consent forms in daily practise. He explained that he had only become aware of the mistake when the patient was already put to sleep in the operating theatre. He told the Tribunal that the patient did not suffer any complications because of his actions but accepted that he should have paid more attention. He stated that he was aware that these things could result in serious complications.

26. Dr Hafez told the Tribunal that he understood the importance of being honest on job application forms. In response to a question from the Tribunal, he said that not being honest may lead to the appointment of a doctor who was not fit to take the post he had been offered, and that could put patient safety at risk. He told the Tribunal that the job application had been previously saved online, and he had just submitted it without reading it carefully.

27. Dr Hafez told the Tribunal that he had attended an online probity and ethics course in 2023. He stated that the delay was primarily due to the cost of the course. He stated that he did not *'think that a course can deal with the dishonesty'*. He said that a doctor could use it to improve insight but this did not mean he would become an honest doctor. He told the Tribunal that it gave him a *'guideline to work on and to build on'*. He told the Tribunal that he had provided his Hungarian CPD records as this showed the number of certificates and courses he had attended over the last five years.

Submissions

On behalf of the GMC

28. Ms Gilson submitted that the GMC opposed Dr Hafez's application for restoration to the Medical Register. She referred the Tribunal to the determinations of the 2018 Tribunal, relevant caselaw and to the MPTS Guidance for medical practitioners tribunals on restoration following disciplinary erasure ('the Guidance').

29. Ms Gilson submitted that the Tribunal should first consider whether Dr Hafez is fit to return to unrestricted practise. She reminded the Tribunal that it has no guarantee that if Dr Hafez is restored to the Medical Register he will seek the appropriate supervision, if needed, and that there is no power to restrict Dr Hafez's practise in any way if the Tribunal chooses to grant the application.

30. In regard to insight, Ms Gilson submitted that Dr Hafez has failed to demonstrate, evidentially, that he has fully remediated all the clinical concerns raised by the 2018 Tribunal. She submitted that whilst Dr Hafez asserts that he has fully remediated, there is no contemporaneous documentary evidence, such as a log of case based discussion, multi-source feedback, a professional development plan or operation logs, to support his assertion.

31. Ms Gilson submitted that the Tribunal may wish to scrutinise the credibility of the evidence of Mr F. She submitted that Mr F has been retired since 2008 and was supervising Dr Hafez in a non-official, voluntary capacity. Further, he could not recall the last time he

worked with Dr Hafez and could not recall exactly how many burr hole procedures that he had supervised between 2018 to 2021.

32. In relation to the probity concerns, Ms Gilsean submitted that Dr Hafez has failed to demonstrate, evidentially, that he has fully remediated the misconduct and probity concerns raised by the 2018 Tribunal. She submitted that Dr Hafez had chosen to wait to undertake the probity and ethics course, instead of immediately addressing those concerns before resuming practise in Hungary in 2018. Further, she stated that his reference to his dishonesty as a '*very huge mistake*' is in contrast to the findings of the 2018 Tribunal.

33. Ms Gilsean submitted that Dr Hafez has not been in clinical practice in the UK for six years, a significant lapse of time. She submitted that due to this there is no evidence of practical clinical experience in relation to the burr hole evacuation procedure and consenting patients in the UK since 2018. She submitted that a prolonged period of absence from working within UK practices, procedures and protocols would inevitably raise patient safety concerns if Dr Hafez were to be restored to the register, in a full unrestricted capacity.

34. Ms Gilsean submitted that Dr Hafez's conduct was previously judged to be so serious that erasure was the only means by which the public could be protected or that public confidence in the medical profession and proper professional standards and conduct for doctors could be maintained. She submitted that, on the face of it, Dr Hafez appears to struggle to fully accept his dishonest actions, and has not provided evidence of a material shift in his attitude since his erasure. Further, there is very little evidence to demonstrate his current knowledge and skills, specifically in relation to the burr hole procedure. She submitted that an ordinary and reasonable, well informed member of the public who is aware of all the relevant facts of Dr Hafez's case would be shocked and concerned to learn that Dr Hafez had been allowed to return to practice unrestricted.

35. Ms Gilsean submitted that, in light of the information presented as a whole, there is insufficient evidence for the Tribunal to be satisfied that Dr Hafez is fit to practise unrestricted.

Dr Hafez's submissions

36. Dr Hafez submitted that it was inaccurate to say that he had been out of practise for six years, as he was not erased until October 2018. He stated that he had submitted his

application after the five years had elapsed and it had taken several months to get a hearing date, but it was not six years.

37. Dr Hafez submitted that, over the time since his erasure, he had been working in Hungary. He submitted that he had made a plan immediately after his erasure in order to gain restoration after five years. He told the Tribunal that he had made plans to undertake clinical attachments in the UK, to reflect on his past actions, and to maintain his knowledge and skills by working and doing CPD in Hungary. Dr Hafez stated that it had not been possible for him to do a clinical attachment before 2022 due to the COVID-19 pandemic.

38. Dr Hafez submitted that he had full insight into his actions and has completely changed as a person and is a new doctor. He stated that his perspective had completely changed, he had learned from the incidents and he only blamed himself for his actions.

39. Dr Hafez told the Tribunal that he has been observed by Mr F in order to remediate the concerns about his practise, not out of necessity, but because he had asked Mr F to do so. He told the Tribunal that there has been no repetition of the concerns of the 2018 Tribunal. He stated that there have been no concerns raised about his performance or surgical practise in Hungary.

40. Dr Hafez told the Tribunal that his main hope was to return to UK practise so that he could improve, and so that he could continue to help patients and the public.

The Tribunal's Approach

41. The Tribunal reminded itself that its power to restore a practitioner to the Medical Register in accordance with Section 41 of the Act is a discretionary power. This power is to be exercised in the context of the Tribunal's primary responsibility to act in accordance with the statutory overarching objective to protect the public, as set out later in this determination.

42. While the Tribunal has borne in mind the submissions made by the parties, the decision as to whether to restore Dr Hafez's name to the Medical Register is a matter for this Tribunal exercising its own judgment. The Tribunal reminded itself that, if it directs that Dr Hafez's name should be restored to the Medical Register, it can do so only without restrictions on his practice.

43. Throughout its consideration of Dr Hafez’s application for restoration, the Tribunal was guided by the approach laid out in the MPTS Guidance for medical practitioners tribunals on restoration following disciplinary erasure (‘the Guidance’).

44. The Tribunal reminded itself that the onus is on Dr Hafez to satisfy it that he is fit to return to unrestricted practice and that the Tribunal should not seek to go behind the original Tribunal’s findings on facts, impairment and sanction.

45. The guidance sets out at B2 that the test for the Tribunal to apply when considering restoration is:

‘B2 Having considered the circumstances which led to erasure and the extent of remediation and insight, is the doctor now fit to practise having regard to each of the three elements of the overarching objective?’

46. The Tribunal reminded itself that, in making its decision, it should consider the following five factors set out within paragraphs B4-B34 of the guidance which address:

- a) the circumstances which led to the erasure;
- b) whether Dr Hafez has demonstrated insight into the matters that led to erasure, taken responsibility for his actions and actively addressed the findings about his behaviour or skills;
- c) what Dr Hafez has done since his name was erased from the register;
- d) the steps Dr Hafez has taken to keep his skills and knowledge up to date; and
- e) the lapse of time since erasure;

and then go on to determine whether restoration will meet the overarching objective.

The Tribunal’s Decision

The circumstances that led to disciplinary erasure

47. The Tribunal fully considered the transcripts and determinations of the 2018 Tribunal. The Tribunal reminded itself that it should not seek to go behind any of the findings made by the 2018 Tribunal.

48. The Tribunal noted that the 2018 Tribunal had found that Dr Hafez’s actions leading to his erasure were very serious and fundamentally incompatible with registration.

49. In relation to his clinical issues, the Tribunal noted there were specific concerns about a burr hole evacuation procedure performed by Dr Hafez in which the *'standard of care fell so far short of the standards of care expected of a reasonably competent Specialist Registrar in Neurosurgery'*.

50. The Tribunal also took into account that Dr Hafez had been found to be dishonest in relation to two distinct issues – his job application to HEYHT and in relation to alterations made to Patient B's consent form. The Tribunal noted that the previous Tribunal acknowledged that Dr Hafez had a propensity to conceal information that may leave him open to criticism. Further, the Tribunal took into consideration the views of the 2018 Tribunal:

'The Tribunal is not satisfied that Dr Hafez has insight and considers that there is a significant risk of him repeating his behaviour. Although Dr Hafez now admits that he was dishonest, this acknowledgement of fault came at a very late stage in proceedings, following the Tribunal's findings of fact and impairment. The Tribunal found the timing and manner of Dr Hafez's acknowledgement of his dishonest conduct somewhat disingenuous, demonstrating continuing lack of candour and insight. The Tribunal determined that the explanation provided by Dr Hafez for the sudden realisation of his dishonest conduct was simply unconvincing.'

Insight, remediation and risk of repetition

51. The Tribunal considered Dr Hafez's level of insight into the issues which led to his erasure. The Tribunal had regard to all relevant paragraphs of the Guidance, in particular paragraph B10 of the Guidance:

'B10 *Factors that can be relevant to a doctor demonstrating genuine insight include, but are not limited to, evidence they have:*

a considered the concern, understood what went wrong and accepted they should have acted differently

b demonstrated that they fully understand the impact or potential impact of their performance or conduct, for example by showing remorse (see below)

c demonstrated empathy for any individual involved, for example by apologising fully (see below)

d taken steps to remediate and to identify how they will act differently in the future to avoid similar issues arising (see below)

52. The Tribunal noted that the previous Tribunal had seen limited evidence of insight and remediation in relation to Dr Hafez's clinical failings. Dr Hafez has acknowledged that burr holes are a simple and common procedure. Since his erasure, Dr Hafez has been working in Neurosurgery in Hungary. During this time, it was his evidence that he had performed a large number of burr hole procedures under the supervision of Mr F, a retired neurosurgical consultant and had taken verbal feedback from him, which was to his credit. Dr Hafez told the Tribunal that he had been observed in this procedure by Mr F on more than 50 occasions. Mr F told the Tribunal he was unable to recall how many of these procedures he had supervised. When asked whether it was 10, 20 or 30, he replied '*more than 10*'.

53. The Tribunal gave weight to the evidence of Mr F, who confirmed that Dr Hafez was working safely and capably, but the weight was significantly reduced by the fact that Mr F, as a friend and old mentor, was not independent; had retired from medical practise in 2008; and was supervising Dr Hafez in an unofficial, informal and voluntary basis.

54. The Tribunal, while acknowledging the positive steps Dr Hafez had taken in seeking out supervision and feedback, had no objective evidence of Dr Hafez's skills in this area from an official source. As this was a specifically identified failing, it would have been useful to have evidence such as an anonymised log of burr hole procedures, with confirmation of satisfactory practise from an authorised clinician. Without such documentation, the Tribunal did not have sufficient evidence to be satisfied that the failings, with regard to performance of burr hole procedures, had been successfully remediated.

55. The Tribunal acknowledged the October 2023 letter from his current employer, which provides a positive overview of Dr Hafez's medical practise but does not specifically address his ability to undertake burr hole evacuation procedures. This was a significant omission given the findings of the 2018 Tribunal.

56. In relation to dishonesty, the Tribunal acknowledged that dishonesty is hard to remediate. It also accepted the 2018 Tribunal's view that Dr Hafez had not wanted to give a

bad impression to senior colleagues which had led to his acts of dishonesty. The Tribunal also noted that Dr Hafez accepted he had acted dishonestly during his oral evidence at the sanction stage of the 2018 Tribunal. It took into account the probity and ethics course Dr Hafez attended in June 2023. It accepted that Dr Hafez had been unable to attend the course earlier than this due to financial pressures. The Tribunal also accepted Dr Hafez's evidence that he had discussed the reasons for his erasure with Mr G, Mr F and Mr H.

57. In his oral evidence, Dr Hafez was able to describe the importance of honesty to the doctor-patient relationship. The Tribunal acknowledged that Dr Hafez now understands why it is important to be honest generally and especially when applying for jobs. It was clear to the Tribunal that Dr Hafez has made the link between honesty and patient safety in that regard.

58. However, his insight is undermined by his continuing to minimise his culpability, particularly in relation to the changing of the consent form, which he stated was an everyday occurrence in his oral evidence to the Tribunal. This was of particular concern to the Tribunal. The Tribunal also noted that Dr Hafez continues to claim that his application was a previously saved version. The Tribunal noted that this was not in keeping with his evidence to the 2018 Tribunal at the sanction stage:

'Dr Hafez admitted that he had deliberately submitted his application form to HEYHT without updating it as he needed to secure employment. Dr Hafez also admitted that he had deliberately withheld information from senior colleagues as he wanted to give a good impression. He stated that he recognised that by withholding information he put patients at risk and lost the trust and confidence of his senior colleagues.'

59. The Tribunal would have liked to have seen an unambiguous acceptance of his dishonesty and a demonstration of insight by Dr Hafez that he had prioritised his own needs over the needs of patients. It is difficult for Dr Hafez to demonstrate adequate insight without acknowledging that his actions were deliberate, the intent behind his dishonesty, and an understanding of how to avoid such actions in the future.

60. Taking this into consideration, the Tribunal concluded that while Dr Hafez's insight has improved since 2018, it is not yet sufficiently developed. Further, while he has undertaken some remediation, there are still areas which lack supporting or objective evidence. Taking all

of this into account, the Tribunal could not be satisfied that there was not an ongoing risk of repetition.

What Dr Hafez has done since his name was erased from the Register, steps taken to keep his medical knowledge and skills up to date and the lapse of time?

61. Dr Hafez's name was erased from the Medical Register following the 2018 Tribunal, which concluded in September 2018.

62. Since his erasure, Dr Hafez has completed two clinical attachments in the UK. The clinical attachments were completed in 2022 and 2023. The Tribunal accepted that it was not possible to participate in these earlier than this due to restrictions relating to the COVID-19 pandemic. The Tribunal noted that both Mr H and Mr G speak positively of Dr Hafez. It was clear to the Tribunal that Dr Hafez had sought to maximise these opportunities as much as possible.

63. The Tribunal had regard to oral and written evidence from Mr G asserting that he would be happy for Dr Hafez to return to unrestricted practise.

64. The Tribunal has also been provided with Dr Hafez's CPD record from Hungary, which is extensive, as well evidence of online courses completed in the UK. The Tribunal was satisfied, in this respect, that Dr Hafez has kept his medical knowledge up to date.

65. The Tribunal acknowledged that Dr Hafez has been working in Hungary since December 2018, for which he has provided a certificate of good standing, dated November 2023. The Tribunal has also been provided with an email from a HR representative at the hospital Dr Hafez worked for between December 2018 and December 2021, which sets out his main duties.

66. The Tribunal took note of the letter of reference from Dr Hafez's current employer, referring to *'high levels of satisfaction from patient surveys and a good relationship with colleagues and staff'*. This is consistent with the feedback from Mr F.

67. The Tribunal was satisfied that Dr Hafez has provided sufficient evidence to demonstrate that he has generally maintained his knowledge and clinical skills but has not adequately addressed the clinical concerns of the 2018 Tribunal, specifically his competency in undertaking burr hole procedures. Without this evidence, the Tribunal could not be

satisfied that Dr Hafez did not pose a risk to patient safety, nor could it be satisfied that he was fit to return to unrestricted practise.

Whether restoration will meet the statutory overarching objective?

68. The Tribunal considered the Guidance in relation to the application of the overarching objective which states at B35:

'B35 Having considered the different factors above, the tribunal must make findings in relation to whether the doctor is fit to practise. The tribunal should then step back and balance its findings against whether restoration will meet our overarching objective. This balancing exercise will involve careful consideration of each of the elements.'

69. Having considered the specific concerns that led to Dr Hafez's erasure and the factors set out above, the Tribunal went on to determine whether he is fit to practise and be restored to the Medical Register. The Tribunal carefully balanced its findings against whether restoring Dr Hafez to the Medical Register will meet the overarching objective, considering each of the three limbs.

70. The Tribunal was mindful of the serious findings of dishonesty that led to Dr Hafez's erasure by the 2018 Tribunal. Dr Hafez has shown improved insight and remediation, albeit with some notable areas for further reflection, and overall the Tribunal was satisfied that he has maintained his general knowledge and skills through practise overseas. However, it noted that the clinical concerns relating to a specific procedure, namely burr hole evacuation, had not been adequately remediated. As the Tribunal cannot be certain that the risk identified by the 2018 Tribunal has been satisfactorily mitigated, the Tribunal found that restoration would not promote patient safety. On that basis, restoration to the Medical Register would undermine the first limb of the overarching objective.

71. Having carefully considered the evidence and specific circumstances of this case, the Tribunal was not satisfied that Dr Hafez had demonstrated that he was fit to return to unrestricted UK practice at this time. Accordingly, it refused Dr Hafez's application to be restored to the Medical Register.