

PUBLIC RECORD

Date: 11/07/2022

Medical Practitioner's name: Dr Inigo IRUSKIETA BLASCO

GMC reference number:	3503135
Primary medical qualification:	LMS 1990 Basque Provinces
Type of case	Outcome on impairment
Misconduct	Impaired

Summary of outcome

Suspension for 12 months

Tribunal/Legally Qualified Chair:

Legally Qualified Chair:	Mrs Julia Oakford
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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.

Record of Determinations
Medical Practitioners Tribunal
Review on Papers

1. I have noted the background to Dr Blasco's case, which was first considered by a medical practitioners tribunal in July 2018 ('the First Tribunal'). Dr Blasco qualified in 1990. He became a GP partner with Dr A at Rochford Medical Practice in 2005. Dr Blasco was referred to the GMC by NHS England, after it was discovered he had made bulk amendments to patient medical records, whilst he was working as a GP partner at the Rochford Medical Practice. An audit was undertaken in 2014 of Dr Blasco's entries on patient records around Quality and Outcome Framework ('QOF') indicators. A practice was able to generate income from QOF points which were accumulated through the management of chronic conditions.

2. The First Tribunal found that Dr Blasco had made a number of bulk computer entries, in which he had entered diagnoses for a large number of patients when he had not examined the patient and knew that he had not done so. These included diagnoses for chronic conditions and asthma and medication reviews. The First Tribunal found this to be a failure to provide good clinical care and that the entering of bulk computer entries was dishonest. The First Tribunal was not satisfied that Dr Blasco fully understood the potential impact on patients, the effort needed to undo the bulk entries, or the dishonesty or lack of integrity involved. Dr Blasco's fitness to practice was found to be impaired by reason of his misconduct. The First Tribunal concluded that there was no remediation and therefore a risk of repetition, and that there was an ongoing risk to patient safety and to the reputation of the profession. That Tribunal determined to suspend Dr Blasco's registration for a period of 12 months and directed a review hearing.

3. Dr Blasco XXX had agreed undertakings with the GMC in 2015. He cannot carry out any role requiring a licence to practise. XXX

4. On 1 August and 6 August 2019, a review hearing took place and the medical practitioners tribunal ('the First Reviewing Tribunal') found that Dr Blasco had not fully complied with the recommendations of the First Tribunal in that he had not produced written statements outlining his reflections on his dishonest conduct and his reflections on the training he had undertaken. The First Reviewing Tribunal found he showed very limited understanding of the findings of the First Tribunal and what had gone wrong. It found that he minimised his misconduct and seemed to have no appreciation that the bulk entries he had made damaged the integrity of the clinical records and gave rise to potentially wide-ranging consequences for the patients involved. The First Reviewing Tribunal concluded that it had heard nothing new from Dr Blasco to persuade it that he understood the significance and consequences of his actions, and that it had no evidence to persuade it that Dr Blasco's insight had developed since the First Tribunal hearing. The First Reviewing Tribunal also concluded that there were some gaps in the courses that Dr Blasco's had attended to maintain his knowledge and skills during his suspension.

5. The First Reviewing Tribunal concluded that Dr Blasco had taken limited steps to remediate his misconduct, did not truly understand it or appreciate the gravity of it and had not developed insight to any meaningful extent. The First Reviewing Tribunal could not rule

**Record of Determinations
Medical Practitioners Tribunal
Review on Papers**

out a repetition of the misconduct and concluded that Dr Blasco's fitness to practise remained impaired by reason of his misconduct. The finding was necessary to protect and promote the health, safety and well-being of the public and to promote and maintain public confidence in the medical profession.

6. The First Reviewing Tribunal determined to suspend Dr Blasco's registration for a further 12 months which would uphold the statutory overarching objective and provide Dr Blasco with a further opportunity to develop his insight and understanding of the consequences of his actions. The First Reviewing Tribunal directed that there should be a further review hearing before the end of the period of suspension.

7. A medical practitioners tribunal ('the Second Reviewing Tribunal') convened on the 31 July 2020 at the end of the further period of suspension to review Dr Blasco's case. The Second Reviewing Tribunal acknowledged that it had received extensive evidence of CPD and noted that Dr Blasco appeared remorseful. The Second Reviewing Tribunal concluded that there was still a lack of insight and appreciation of the impact of Dr Blasco's misconduct on patients. It concluded that in the absence of developed insight and remediation there remained a risk of repetition. The Second Reviewing Tribunal made a finding of impaired fitness to practise in order to uphold the three limbs of the overarching objective. It directed that there should be a further 12-month period of suspension which would allow Dr Blasco further time to develop his understanding of the findings of dishonesty and allow him time to remediate fully. A further review hearing was directed to take place at the end of the period of suspension, and it was recommended that a future reviewing tribunal would be assisted by:

- Evidence that Dr Blasco had appointed a mentor or coach and had gone through the determinations of that and the two previous tribunals to help him gain insight into the seriousness and impact of his dishonest conduct;
- A regular, perhaps monthly, record throughout that period of suspension, written by Dr Blasco showing what he had done to develop his understanding of the seriousness and impact of dishonest conduct;
- Evidence of any training undertaken, particularly if it related to the findings of the First Tribunal, for example (not exhaustive): the accurate and timely recording of clinical findings and accurate date input;
- A final written statement towards the end of that period of suspension outlining his reflections in relation to :
 - a) His dishonest conduct in deliberately entering false diagnoses in patient records when he knew he had not seen the patients;
 - b) The potential consequences for patients who have false diagnoses entered in their records;
 - c) The potential consequences for colleagues;

**Record of Determinations
Medical Practitioners Tribunal
Review on Papers**

- d) The potential impact on public confidence in the profession;
- e) The ethical issues arising from the misconduct;
- f) What he has learnt from the discussions with his coach and mentor regarding dishonesty;
- g) The learning achieved from the training.

- Evidence that he has undertaken CPD in his area of practice, such as training, seminars, workshops, courses and online study;
- Any other relevant evidence he wished to present to assist the review tribunal such as testimonials, references or reports from any clinical attachment or observation he may have undertaken.

8. On 9 July 2021 a Legally Qualified Chair (LQC) reviewed Dr Blasco's case on the Papers. That LQC noted that on 30 April 2021, Dr Blasco had telephoned the GMC and advised that XXX. On 11 May 2021 the GMC wrote to Dr Blasco telling him that a review could take place on the papers, whereby the parties could mutually agree to an extension of the suspension and a review could be undertaken by an LQC. A signed agreement from Dr Blasco, dated 7 July 2021, agreeing to a review on the papers had been received. In addition the GMC and Dr Blasco had provided agreed terms of an order to extend the Suspension Order by 12 months.

9. The LQC considered all the documentary evidence and the agreed terms to extend the suspension order by 12 months. The LQC considered that Dr Blasco was unlikely at that time to be able to engage with the GMC or a medical practitioners tribunal due to XXX. The LQC received no further evidence relating to insight and remediation from Dr Blasco in particular what the Second Reviewing Tribunal had determined would assist a future hearing including evidence that he appreciated the gravity of his dishonesty, or the impact on public confidence in the profession. The LQC considered that a further order of suspension would protect the public and the public interest and would be proportionate and would give Dr Blasco time to work towards providing evidence of remediation and insight. The LQC was satisfied that there was no evidence to suggest that Dr Blasco was incapable of developing insight and remediation. The LQC therefore decided to extend the Suspension Order on Dr Blasco's registration for a further period of 12 months.

10. I have considered all the documentary evidence provided to me. I note that on 14 April 2022 Dr Blasco telephoned the GMC to seek a postponement of his upcoming review hearing XXX. On the 21 April 2022 the GMC informed Dr Blasco that a postponement was not possible but a review could be considered to take place on the papers if he agreed. The GMC told him that it might be possible to agree on suspension which would continue for another 12 months.

Record of Determinations
Medical Practitioners Tribunal
Review on Papers

11. Dr Blasco 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.

12. I have received and accepted an Agreement form signed by Dr Blasco on 20 June 2022 and the GMC on 23 June 2022. The Agreement states 'The parties hereby agree that the Practitioner's fitness to practise remains impaired by reason of their misconduct and that pursuant to Section 35D(5)(a) of the Medical Act 1983 (as amended), the order of suspension currently imposed on the Practitioner's registration shall be extended for a further period of 12 months from the date on which it would otherwise expire.'

13. There has been no evidence received from Dr Blasco with regard to his remediation and demonstration of insight. In particular it appears that he has not undertaken the actions suggested by the Second Reviewing Tribunal as set out above. The onus at a review hearing is on Dr Blasco to demonstrate he is no longer impaired. I am of the opinion that the situation and circumstances have not changed since this case was reviewed by both the Second Reviewing Tribunal and the LQC's review on the papers and as such Dr Blasco's fitness to practise remains impaired by reason of misconduct.

14. In reaching my decision, I have taken account of the Sanctions Guidance. I have borne in mind that the purpose of the sanction is not to be punitive, but to protect patients and the wider public interest, although it may have a punitive effect.

15. I have applied the principle of proportionality, weighing Dr Blasco's own interests with the public interest. The public interest includes amongst other things, the protection of patients, the maintenance of public confidence in the profession, and declaring and upholding of proper standards of conduct and behaviour.

16. I am satisfied that a period of suspension is proportionate and would be sufficient to protect the public and the public interest. I have therefore determined that Dr Blasco's registration be suspended for a period of 12 months.

17. In reaching this decision, I have accepted the agreement between the parties that an order of 12 months suspension should be imposed. I have no evidence to suggest that Dr Blasco is incapable of remediating his misconduct or developing insight. The 12 months period of suspension should give Dr Blasco sufficient time to XXX and be in a position to attend a future Tribunal hearing and provide evidence to it. The 12 months suspension will uphold the overarching objective by protecting the public and the public interest.

18. The effect of this direction is that, unless Dr Blasco exercises his right of appeal, the period of suspension will take effect 28 days from when written notice of this determination has been served upon him. The current order of suspension will remain in place until the

Record of Determinations
Medical Practitioners Tribunal
Review on Papers

appeal period has ended, or in the event that he does appeal, that appeal is decided. A note explaining Dr Blasco's right of appeal will be provided to him.

19. Notification of this decision will be served on Dr Blasco in accordance with the Medical Act 1983, as amended.