

**PUBLIC RECORD****Dates:** 16/12/2024 - 17/12/2024

**Doctor:** Dr Muhammad MIRZA

**GMC reference number:** 4210313

**Primary medical qualification:** MB BS 1995 University of London

**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	Miss Rachel Birks
Registrant Tribunal Member:	Dr Ammar Ghouri
Registrant Tribunal Member:	Dr Jill Edwards
Tribunal Clerk:	Mr Joel Taylor-Garratt

**Attendance and Representation:**

Doctor:	Present, not represented
GMC Representative:	Mr Andrew Molloy, 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 - 17/12/2024

1. The Tribunal has convened to consider Dr Mirza'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 Mirza's first application to be restored to the Medical Register.

## Background

4. Dr Mirza qualified in 1995 and, at the time of the events that led to his erasure, was practising as a GP in Dubai.
5. The circumstances that led to Dr Mirza's erasure were considered at a hearing before a Medical Practitioners Tribunal in May and July 2018 ('the 2018 MPT').
6. Those circumstances can be summarised as follows. In November 2008, a company was set up called Symbiosis Healthcare plc which involved the provision of quality healthcare solutions and management services. Dr Mirza had a controlling share of the business, had been a director of the company since its inception and was the sole signatory to the company bank account. Shares in this company were sold to investors by brokers. The investors were generally retired and, although they were promised large profits, the shares were effectively worthless. The money from the sale of the shares was paid directly into Symbiosis' bank account over which Dr Mirza had control. He in turn paid William Albert Securities (WAS) who then paid commission from that.
7. It was said that Dr Mirza was fully aware of the state of Symbiosis' finances and that the money raised did not build the business but was given to those who raised the funds. In total

the sales amounted to £1.4 million pounds and involved 297 investors who were told that large profits would be made; instead they lost all of the money they invested. Throughout the period of selling shares in Symbiosis, a number of documents, including brochures and market announcements, which Dr Mirza had been instrumental in drafting, were submitted to the shareholders and gave a misleading impression of the company.

8. Dr Mirza contested the charges in court but was convicted in 2017 of:
  - two counts of creating a false or misleading impression
  - one count of company officer publishing false statement.
9. He was sentenced to 15 months imprisonment and disqualified from being a company director for eight years. At the 2018 MPT, Dr Mirza was present and made full admissions. The 2018 MPT determined that Dr Mirza's conduct was fundamentally incompatible with continued registration and that erasure was the appropriate sanction.

#### The Current Restoration Hearing

#### **The Evidence**

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

#### **Witness Evidence**

11. Dr Mirza provided his own reflective statement and also gave oral evidence at the hearing. In his evidence, Dr Mirza said that he was aware his actions were dishonest from the time he was first charged in 2016 but later, in response to questions from Mr Molloy on behalf of the GMC, agreed that he knew at the time that what he was doing was dishonest. Dr Mirza refuted suggestions that he has sought to minimise his level of responsibility for his dishonesty by describing his involvement in hearing documentation that he has put before this Tribunal as just signing a few documents and being under pressure from others.
12. Dr Mirza repeatedly expressed his regret for his actions and stated that he fully accepted responsibility. He told the Tribunal that the root causes for his actions were misplaced ambition, the prospect of financial gain and bad advice from brokers who would become his co-accused at trial. Dr Mirza outlined his plans for the future, which included a masters degree and undertaking the return to practice scheme. He said that he had

engaged in deep, meaningful reflection and had developed full insight into his wrongdoing. He further stated that he understood and regretted the impact on his investors, colleagues, the profession and public trust in the profession and said that he was a changed man. He told the Tribunal that he had learned and improved as a person since his erasure and now had robust plans to avoid any repetition of his misconduct, which included speaking to mentors, not engaging in any future business dealings and focusing his career on clinical practice and medical education.

### Documentary Evidence

13. The parties provided documentary evidence that included, but was not limited to:
  - Record of Determination from the 2018 hearing,
  - Judge’s sentencing remarks,
  - Court discharge form,
  - Dr Mirza's written reflections,
  - Dr Mirza’s proposed paperwork for his next appraisal and Multi-Source Feedback, and
  - Various correspondence, CPD certificates and testimonials.

### Submissions on behalf of the GMC

14. On behalf of the GMC, Mr Andrew Molloy, Counsel, submitted that Dr Mirza’s application should be refused. He said that the Tribunal must consider Dr Mirza’s level of remediation and insight and whether he is fit to practise, having regard to the overarching objective.
15. Mr Molloy submitted that, although Dr Mirza had shown insight into the wider impact of his actions, he now appeared at this hearing to revert to the unsuccessful defence that he gave at trial, namely that he only signed a few forms that were put in front of him and didn’t fully understand his obligations.
16. Mr Molloy further submitted that Dr Mirza had given conflicting accounts in his oral evidence of the point in time when he understood that his actions were dishonest. Initially he had stated that it was when he was charged, but he later stated that it was at the time of the actual events.
17. Mr Molloy said that Dr Mirza’s reflections lacked exploration of how his actions impacted colleagues and the wider profession. He submitted that Dr Mirza appeared to be giving blanket statements about areas that he is required to address to show insight rather

than demonstrating a genuine understanding of the severity of his dishonesty and how it may have impacted the profession and the public.

18. Mr Molloy acknowledged that Dr Mirza had demonstrated a degree of remediation, having a clear focus on relevant CPD and maintaining his professional skills and knowledge but submitted that clinical competence does not mitigate serious misconduct involving dishonesty.
19. Mr Molloy concluded by reminding the Tribunal that it can be very difficult to demonstrate sufficient remediation in cases such as this, involving serious and persistent dishonesty. He submitted that even a low risk of repetition must be taken seriously because of the potentially serious outcome if Dr Mirza were to repeat his misconduct.

#### Dr Mirza's submissions

20. Dr Mirza submitted that he was a changed person, had learned from his mistakes, understood what he had done and its impact and that he was safe to return to practise.
21. Dr Mirza referred the Tribunal to the Judge's sentencing remarks, where they had said that '*blind ambition*' had led Dr Mirza to do what he had done and that he was '*no businessman*.' Dr Mirza submitted that these comments demonstrated the root causes of his dishonesty. He also referred the Tribunal to various testimonials, which he submitted demonstrated his current, changed state of mind and his commitment to change.
22. Dr Mirza told the Tribunal that he had safety measures in place to prevent any repeat of his dishonesty, which included not engaging in business and making the decision to focus solely on his clinical career.
23. Dr Mirza reminded the Tribunal that, although difficult, remediation in cases such as this was possible and he believed he had fully remediated. He reminded the Tribunal that he had served his sentence, repaid his victims in full and written a letter of apology to his victims.
24. Dr Mirza submitted that he had engaged in significant remediation efforts including workshops, therapy, reflections and clinically focussed CPD. He submitted that he fully understood the gravity of his misconduct and its impact and felt great remorse for what he had done, including wiping out the life savings of vulnerable investors. He submitted that he had done significant work in the field of ethics and now had a strong

understanding of ethics, which he applied in his daily life. He also submitted that he had incorporated reflective practices into his daily life by regularly and honestly assessing his motivations and the potential consequences of his actions.

25. Dr Mirza submitted that his restoration would not put patients at risk and would actually be in the public interest. He said it would symbolise the depth of his transformation and his commitment to serving others.

### The Tribunal's Approach

26. 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.
27. While the Tribunal has borne in mind the submissions made by the parties, the decision as to whether to restore Dr Mirza'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 Mirza's name should be restored to the Medical Register, it can do so only without restrictions on his practice.
28. Throughout its consideration of Dr Mirza'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').
29. The Tribunal reminded itself that the onus is on Dr Mirza 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.
30. The guidance sets out at B2 that the test for the Tribunal to apply when considering restoration is:  
  
*'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?'*
31. 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 Mirza 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 Mirza has done since his name was erased from the register;
- d. the steps Dr Mirza 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**

32. The Tribunal has considered the parties' submissions carefully and has evaluated the evidence in order to reach its decision as to whether Dr Mirza is fit to practise.

### **The circumstances which led to Dr Mirza's erasure**

33. The Tribunal reminded itself of the circumstances of the case, namely that Dr Mirza was found guilty of defrauding over 200 investors to the tune of £1.4m. The Tribunal noted Mr Molloy's submissions that this dishonesty was deliberate and persistent, as identified by the sentencing judge and the statute under which Dr Mirza was convicted, and highlighted by the 2018 MPT. The Tribunal also noted that Dr Mirza had acknowledged the serious impact that his actions had on investors and had volunteered examples of this seriousness.
34. The Tribunal considered that the misrepresentations Dr Mirza had made in signing documents he knew to be false were very serious, as found by the 2018 MPT, and had clearly had a very serious impact on those that he had defrauded.
35. The Tribunal noted the 2018 MPT's finding that Dr Mirza had acted with an intention to deceive, which involved him acting dishonestly. It noted that Dr Mirza did accept that his actions were dishonest but considered that Dr Mirza had been inconsistent in his written and oral evidence of when he had understood that what he was doing was dishonest.

**Whether Dr Mirza has demonstrated insight into the matters that led to erasure, taken responsibility for his actions, and actively addressed the findings about his behaviour**

36. The Tribunal considered that Dr Mirza had made multiple statements during his evidence that he accepted responsibility for his actions and understood their impact. It also noted the significant work that Dr Mirza had done to attempt to remediate his past conduct.
37. The Tribunal considered that, when discussing his insight, Dr Mirza's evidence had not substantially evolved beyond the Judge's sentencing comments. The Tribunal considered that Dr Mirza appeared to understand the impact and seriousness of his actions but was concerned by what appeared to be minimisation of his involvement in the acts. The Tribunal recalled that Dr Mirza had said that he had just signed documents that were sent to him, had been advised or encouraged to do certain things by people around him at the time and that he lacked sufficient understanding of the complex documents that he was signing. The Tribunal determined that this description of events amounted to Dr Mirza seeking to blame his actions on others or his circumstances at the time, and thereby attempting to minimise his culpability. The Tribunal considered that Dr Mirza, being the director of Symbiosis and having sole control over the accounts, knew what money was coming in and knew that he was signing misleading or false documents. It noted the sentencing judge's remarks in this regard. The Tribunal considered that Dr Mirza did not require particularly strong business acumen to know that he was endorsing statements that were not true. It noted his own oral evidence, that one of the misleading statements was that there were four clinics when there was actually only one. It would not have required detailed business acumen to have understood that this was grossly inaccurate.
38. The Tribunal considered that, although Dr Mirza had demonstrated insight into certain aspects of his conduct and its impact, it appeared that he had not yet fundamentally taken ownership of the fact that his actions, not just those of his co-accused, were deliberate, persistent, and involved acts of commission and not just acts of omission.
39. The Tribunal noted that significant amount of work on ethics that Dr Mirza had since undertaken. The Tribunal considered that, although Dr Mirza has been frank about the financial motivations behind his conduct he has not yet fully opened up as to why he ultimately chose to do something so unethical. His awareness appears confined to understanding his motivations, rather than an appreciation that most doctors do not succumb to financial motivations to act dishonestly, and therefore he needs to develop an understanding of why he, himself, did succumb. The Tribunal did not accept that he would have been unaware of the duties to act with honesty and integrity that Good Medical Practice places upon a doctor.
40. Additionally, the Tribunal was concerned about the fact that, despite citing ambition and being overworked as factors in his dishonesty, Dr Mirza had set out a very ambitious plan



for the immediate future that included a masters degree whilst also undertaking the return to practice scheme, conducting research and writing journal articles. These concerns were also relevant to the risk of repetition.

41. The Tribunal considered that Dr Mirza was naïve in thinking that by removing himself from commercial work in the future, there will be no financial temptations present in his day to day work. The Tribunal noted:
  - his desire to conduct research which may involve applying for grants, and
  - that in his work as a GP he may become involved in running a practice in the future which could include financial incentives for work undertaken.
42. The Tribunal considered that, in lacking openness and full insight into why he acted in such an unethical way, and in the continued attempts to minimise his responsibility in the deceit, it could not be satisfied that Dr Mirza would not act similarly in the future. The risk of repetition has reduced since the 2018 MPT, but it still remains. Although the risk is low, the seriousness of the consequences, if repeated, could be very serious.

**What Dr Mirza has done since his name was erased from the register and the steps he has taken to keep his medical knowledge and skills up to date**

43. Since erasure, Dr Mirza worked in various roles including as a personal trainer and medical educator and has engaged in a significant number of workshops and courses that were relevant to his misconduct.
44. Dr Mirza had also taken on shadowing and clinical attachment roles and had engaged with self-led learning to keep his skills and knowledge up to date.
45. The Tribunal was impressed with the significant relevant and targeted work that Dr Mirza had done both to try to understand his misconduct and maintain his skills and knowledge. The Tribunal considered that the amount of work Dr Mirza had done was to his credit and was reflected in the glowing testimonial evidence presented to it, which included testimonials from students he had taught and from colleagues he had shadowed.
46. However, the Tribunal was concerned that Dr Mirza had not demonstrated how he had applied his learning to his daily life in the context of his misconduct and dishonesty. The Tribunal considered that, Dr Mirza needs to be able to provide reflections of a greater depth and more personal nature when discussing dishonesty and ethical issues. The

Tribunal determined that Dr Mirza's insight lacked sufficient depth despite his significant and appropriately targeted remediation efforts.

### **The lapse of time since erasure**

47. The Tribunal noted that the longer a practitioner has been out of practice the more likely it is that their skills and knowledge will have lapsed. This is Dr Mirza's first restoration application, made at the earliest opportunity. The Tribunal was satisfied that Dr Mirza had made significant efforts to maintain his clinical skills and knowledge and the lapse of time did not yet pose a significant obstacle to restoration.
48. The Tribunal considered that the significant lapse in time meant that the wider public interest did not necessarily require Dr Mirza to remain off the Medical Register, once he has demonstrated that there is sufficient insight such that there is no risk of repetition. He is not yet at that point.

### **Will restoration meet the overarching objective?**

49. Having made the above findings as to whether Dr Mirza is fit to practise, the Tribunal next had regard to the statutory overarching objective. In so doing, it performed a balancing exercise, weighing its findings above with its obligations under the individual limbs of the overarching objective which are:
  - To protect, promote and maintain the health, safety and well-being of the public
  - To promote and maintain public confidence in the profession, and
  - To promote and maintain proper professional standards and conduct for members of that profession.
50. The Tribunal reminded itself that Dr Mirza's conviction was for persistent, deliberate dishonesty, which led to a large number of victims collectively losing £1.4m. The severity of this conduct is very serious and the Tribunal considered that the public would want to ensure that any doctor returning to practice in these circumstances had full insight and that safeguards were in place to guard against future dishonesty, such that there was no risk of repetition. The Tribunal considered that this was particularly important given that Dr Mirza had previously, in 2008, received a GMC Warning for dishonest conduct.
51. The Tribunal was encouraged that Dr Mirza intended to undertake the return to practice scheme as this would ensure supervision. However, the Tribunal was not satisfied that this support would be present beyond the scope of the return to practice scheme. It

considered that the checks and balances that Dr Mirza had described were all self-imposed and he had not sufficiently explained how they would prevent him from being dishonest in the future.

52. In conclusion, the Tribunal considered that Dr Mirza's insight was not yet fully developed, specifically in regard to the reasons for him acting dishonestly and his personal responsibility for the dishonesty. He has not therefore sufficiently demonstrated how he would avoid repeating his dishonesty in the future. Accordingly, it determined that Dr Mirza's name should not be restored to the Medical Register, as to do so would not meet the overarching objective.

#### **Dr Mirza's right to make further applications for restorations**

53. Dr Mirza must wait at least 12 months from the date of his application (not the date of the tribunal's decision not to restore) before applying again.