

PUBLIC RECORD

Dates: 21/05/2024 - 31/05/2024

Medical Practitioner's name: Dr Natalia WILSON

GMC reference number: 6139355

Primary medical qualification: Vrach 1994 Omskij Ordena Trudovogo Krasn

Type of case	Outcome on facts	Outcome on impairment
New - Misconduct	Facts relevant to impairment found proved	Impaired

Summary of outcome

Erasure
Immediate order imposed

Tribunal:

Legally Qualified Chair	Mr Stephen Gowland
Lay Tribunal Member:	Ms Glenys Evans
Medical Tribunal Member:	Dr Juliet Bennett
Tribunal Clerk:	Mr John Poole

Attendance and Representation:

Medical Practitioner:	Present, not represented
GMC Representative:	Mr David Birrell, 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.

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 Facts - 29/05/2024

Background

1. Dr Wilson qualified in 1994 from Vrach Omskij Ordena Trudovogo Krasn, Russia, and went on to specialise in Psychiatry. She obtained full GMC registration in 2008. At the time of the events Dr Wilson was practising as a Consultant Psychiatrist.
2. The matters that have given rise to Dr Wilson's hearing relate to an allegation that Dr Wilson submitted four false references; three to the East London NHS Foundation Trust ('ELFT') on or around 11 February 2022, and one to Interact Medical locum Agency on or around 2 April 2022. It is the GMC's case that Dr Wilson's conduct in providing false references was dishonest.
3. The matters came to light after ELFT raised concerns about the authenticity of Dr Wilson's references. This led to a re-examination by ELFT of Dr Wilson's CV and the references provided during the recruitment process.

The Outcome of Applications Made during the Facts Stage

4. The Tribunal refused Dr Wilson's application for the entirety of the hearing to be heard in private. The Tribunal's decision is at Annex A.
5. The Tribunal granted the GMC's application to admit into evidence a supplemental witness statement from Mr F. The Tribunal's decision is at Annex B.
6. The Tribunal refused Dr Wilson's application that Mr Birrell be replaced as counsel for the GMC. The Tribunal's decision is at Annex C.
7. The Tribunal determined to amend the allegation at 2(c) in order to substitute "his" for "her". The Tribunal sought the views of the parties and the GMC said it was a typographical error which could be amended and Dr Wilson did not make any submissions as to the change.
8. The Tribunal therefore amended the allegation in accordance with Rule 17 (6) as there is no injustice arising from this amendment.

The Allegation and the Doctor's Response

9. The Allegation made against Dr Wilson is as follows:
1. On around 11 February 2022 you submitted a Reference (the First Reference) to East London NHS Foundation Trust ('ELFT') which:
 - a. falsely purported to have been completed by Dr A; **To be determined**
 - b. included information which represented that Dr A was your '*employer/line manager*' during your employment dates of September 2020 to February 2022, which was untrue. **To be determined**
 2. When you submitted the First Reference, you knew that:
 - a. Dr A was not your employer or line manager at any time; **To be determined**
 - b. Dr A had not completed any part of the First Reference; **To be determined**
 - c. Dr A had no knowledge of your submitting the First Reference, or any reference using ~~his~~ her name; **To be determined**
Amended in accordance with Rule 17(2) of the Rules
 - d. you had never worked with Dr A. **To be determined**
 3. Your conduct as described at paragraph 1 was dishonest by reason of paragraph 2. **To be determined**
 4. On around 11 February 2022 you submitted a Reference (the Second Reference) to ELFT which:
 - a. falsely purported to have been completed by Dr B; **To be determined**
 - b. included information which represented that Dr B was your '*employer/line manager*' during employment dates of November 2019 to May 2020, which was untrue. **To be determined**

5. When you submitted the Second Reference, you knew that:
 - a. Dr B was not your employer or line manager at any time; **To be determined**
 - b. Dr B had not completed any part of the Second Reference; **To be determined**
 - c. Dr B had no knowledge of your submitting the Second Reference, or any reference using his name; **To be determined**
 - d. you had never worked with Dr B. **To be determined**
6. Your conduct as described at paragraph 4 was dishonest by reason of paragraph 5. **To be determined**
7. On around 11 February 2022 you submitted a Reference (the Third Reference) to ELFT which:
 - a. falsely purported to have been completed by Dr C; **To be determined**
 - b. included information which represented that Dr C was your '*employer/line manager*' during employment dates of November 2017 to November 2019, which was untrue. **To be determined**
8. When you submitted the Third Reference, you knew that:
 - a. Dr C was not your employer or line manager at any time; **To be determined**
 - b. Dr C had not completed any part of the Third Reference; **To be determined**
 - c. Dr C had no knowledge of your submitting the Third Reference, or any reference using his name; **To be determined**
 - d. you had never worked with Dr C. **To be determined**
9. Your conduct as described at paragraph 7 was dishonest by reason of paragraph 8. **To be determined**
10. On or around 2 April 2022 you submitted to Interact Medical locum Agency a completed Reference Request form (the Fourth Reference), which:
 - a. falsely purported to be:
 - i. completed by Dr D; **To be determined**

- ii. signed by Dr D; **To be determined**
- iii. dated 2 April 2022 by Dr D. **To be determined**

- b. included information which represented that you had worked with Dr D:
 - i. at HMP Woodhill; **To be determined**
 - ii. from February 2021 to February 2022; **To be determined**

which was untrue. **To be determined**

11. When you submitted the Fourth Reference, you knew that:
- a. Dr D had not completed any part of the Fourth Reference; **To be determined**
 - b. Dr D had not signed the Fourth Reference; **To be determined**
 - c. Dr D had not dated the Fourth Reference; **To be determined**
 - d. Dr D had no knowledge of your submitting the Fourth Reference, or any reference using her name; **To be determined**
 - e. you had not worked with Dr D. **To be determined**

12. Your conduct as described at paragraph 10 was dishonest by reason of paragraph 11. **To be determined**

The Facts to be Determined

10. Dr Wilson did not make any admissions to the Allegation. Accordingly, the Tribunal must determine the entirety of the Allegation.

Witness Evidence

11. The Tribunal received evidence on behalf of the GMC from the following witnesses:
- Dr A, Consultant Psychiatrist.
 - Dr B, Consultant Psychiatrist.
 - Dr C, Consultant Psychiatrist.
 - Dr D, Consultant Psychiatrist
 - Dr E, Medical Resourcing Coordinator at ELFT.
 - Mr F, Team Leader of the Psychiatry Department at Interact Medical

- Ms G, Local Counter Fraud Specialist at ELFT.
12. Dr Wilson also gave oral evidence to the Tribunal.
13. In summary, Dr A, Dr B, Dr C and Dr D gave evidence that they did not provide a reference for Dr Wilson and did not know the references had been provided and did not recognise the email addresses from which the references were submitted. Dr Wilson’s case was that she was a whistleblower and that the witnesses had been scared, intimidated and influenced by ELFT.

Documentary Evidence

14. The Tribunal had regard to the documentary evidence provided by the parties. This evidence included but was not limited the ELFT Counter Fraud Investigation Report, dated 1 August 2022, and a copy of the references purporting to be from Dr A, Dr B, Dr C and Dr D.

The Tribunal’s Approach

15. In reaching its decision on facts, the Tribunal has borne in mind that the burden of proof rests on the GMC and it is for the GMC to prove the Allegation. Dr Wilson does not need to prove anything. The standard of proof is that applicable to civil proceedings, namely the balance of probabilities, i.e., whether it is more likely than not that the events occurred.
16. The LQC advised that good character is something which the Tribunal should take into account when deciding any issues of fact but it is not determinative nor a defence to an allegation. There were no issues relating to Dr Wilson’s character or standing prior to these matters.
17. In relation to dishonesty, the Tribunal was mindful of the test as set out by Lord Hughes in *Ivey v Genting Casinos [2017] UKSC 67* which advises:

“ When dishonesty is in question the fact-finding tribunal must first ascertain (subjectively) the actual state of the individual’s knowledge or belief as to the facts. The reasonableness or otherwise of his belief is a matter of evidence (often in practice determinative) going to whether he held the belief, but it is not an additional requirement that his belief must be reasonable; the question is whether it is genuinely held. When once his actual state of mind as to knowledge or belief as to facts is established, the question whether his conduct was honest or dishonest is to be determined by the fact-finder by applying the (objective) standards of ordinary decent people. There is no requirement that the defendant must appreciate that what he has done is, by those standards, dishonest.”

18. Therefore, the Tribunal must ascertain (subjectively) the actual state of Dr Wilson’s knowledge or genuinely held belief as to the facts at the material time. The Tribunal should

then decide whether this was dishonest by the objective standards of ordinary decent people. If this is not established, then the Allegation would not be proved.

19. In regard to the assessment of the witnesses, the Tribunal was mindful of the principles derived from Khan v GMC [2021] EWHC 374 and Dutta v GMC [2020] EWHC 1974 (Admin).

The Tribunal's Analysis of the Evidence and Findings

20. The Tribunal has considered each outstanding paragraph of the Allegation separately and has evaluated the evidence in order to make its findings on the facts.

Paragraph 1a

21. The Tribunal considered whether on around 11 February 2022 Dr Wilson submitted a reference to ELFT which falsely purported to have been completed by Dr A.

22. The Tribunal had regard to the email from Dr Wilson to Mr E, Resourcing Team Leader at East London NHS Foundation Trust, dated 11 February 2022. In this she provided email addresses for three referees, Dr A, Dr B and Dr C. It was uncontested that Dr Wilson provided these email addresses.

23. The Tribunal observed that it was from the email account Dr Wilson had provided for Dr A that the reference pertaining to be from Dr A was submitted to the ELFT.

24. The Tribunal had regard to the evidence of Dr A. In her witness statement, she stated:

'...I did not write or send this reference. I do not recall being asked by a Dr Natalia Wilson to provide a reference for her and I cannot recall ever being asked by ELFT to provide a reference for her...'

25. With reference to the email address, Dr A stated that *'I do not remember setting up this email address or using and controlling it in any way.'*

26. The Tribunal also had regard to the Counter Fraud report. It detailed that on 4 April 2022 the IT Server Manager confirmed that he had 'conducted a trace on the NHS mail system and could not find Dr A on the email address provided', nor after having conducted a broader search.

27. Dr A also observed in her witness statement:

'I find it interesting that the name is simply written as "A". When I write a reference, I usually include my title and write my name as 'Dr A'.'

28. The Tribunal accepted Dr A's evidence. It considered that her evidence was further bolstered by the fact that the reference was queried with her by the counter fraud investigator some five months after it had been submitted. The Tribunal considered it unlikely that she would not have remembered providing a reference for Dr Wilson.

29. The Tribunal accepted Dr A's evidence and concluded that she did not provide the reference and that the email address provided did not belong to Dr A.

30. The Tribunal had regard to the Counter Fraud investigation report. It observed that:

'The Trust relied upon these false references to complete the necessary pre-employment checks. Whilst it cannot be proven that the subject herself created, was in control of, or was the person that responded to ELFT's Resourcing Team from the email addresses, and whilst the subject did not stipulate the three referees were her line managers, the subject would have been fully aware that the three referees she gave did not line manage her, two definitely did not know her, did not provide the references and also did not use the email addresses she had provided for them. By providing the three referees details, she was inferring they were in a position to provide a reference for her. The Trust would only accept references from former line managers or from the organisation that had employed the subject as details of sickness absence, dates of employment, details of any known investigations and DBS are requested. Therefore, it is alleged the subject knowingly provided false information to the Trust and if it was not her personally who responded to the Trust, it is alleged she had had knowledge of who responded and gave the false references.'

31. The Tribunal accepted Dr A's evidence that she did not provide or submit the reference and concluded that the reference was false.

32. The Tribunal was persuaded by Mr Birrell's submission and that as the email address was provided by Dr Wilson and that it was she who stood to gain from the reference, it was more likely than not that Dr Wilson wrote and submitted the reference herself.

33. Accordingly, the Tribunal found paragraph 1a proved.

Paragraph 1b

34. The Tribunal considered whether the reference falsely purporting to have been completed by Dr A, included information which was untrue in the sense that it represented that Dr A was Dr Wilson's 'employer/line manager' during employment dates of September 2020 to February 2022.

35. The Tribunal was mindful that in Dr Wilson's CV provided within the bundle of documents, this confirmed that during the relevant period, Dr Wilson was working at HMP Mounts and HMP Woodhill. The Tribunal noted that Dr A stated that she had never worked at the prisons where Dr Wilson said she had been working during the material time.

36. In Dr A's witness statement she stated:

'Dr Wilson's employment dates for the purpose of the reference was September 2020 to February 2022. A brief overview of my employment history during that time period is that I was still working at Oxford Health in September 2020. I retired in October 2021 and worked again from December 2021 to February 2022 as a Locum Consultant with Oxford Health.

On 13 January 2022, I also began working with Southern Health NHS Foundation Trust ('Southern Health') as a part-time Consultant. I continued this role until August 2022...

I have never worked in any prison and I have never worked for Child and Adolescent Mental Health Services ('CAMHS').'

37. Moreover, Dr A could not recall working with Dr Wilson at all. In Dr A's statement she stated:

'...I cannot remember whether or not I have worked with the Dr Natalia Wilson in question here as I have worked with quite a few people called 'Natalia' over my many years of working and I cannot recall their full names. When working I normally call people by their first names and do not often use their full names. I am therefore having trouble recalling a Natalia with the full name 'Dr Natalia Wilson'. Due to this I cannot be certain if I have ever even met this particular Dr Natalia Wilson and in what capacity I may have known her...'

38. In oral evidence, after having seen Dr Wilson, Dr A said she partially recognised Dr Wilson but had no detailed recognition of working with her. She accepted that they might have worked alongside one another. However, she was clear that she had never been Dr Wilson's supervisor. Nevertheless, Dr A recognised the name of two wards and a consultant doctor mentioned by Dr Wilson, and she accepted that on occasions she would have covered for this consultant when they were on holiday. The Tribunal, therefore, considered that Dr A may have worked in a supervisory role to Dr Wilson, on occasions in the past, but it considered that there was no evidence to support that Dr A had worked with Dr Wilson, or had been Dr Wilson's employer/line manager from September 2020 to February 2022.

39. Accordingly, the Tribunal found paragraph 1b proved.

Paragraph 2a

40. The Tribunal considered whether Dr Wilson knew when she submitted the reference purporting to be from Dr A, that Dr A was not her employer or line manager at any time.

41. The Tribunal found that at the material time covered by the reference, from September 2020 to February 2022, Dr A was not Dr Wilson's employer or line manager.

42. However, the Tribunal noted Dr A's evidence that she would sometimes cover the other Consultant's ward when they were on holiday. The Tribunal considered that this could have included supervisory duties and/or line manager duties. This was for a different period of time to that at 1(b) of the allegation.

43. The Tribunal considered that it could not be established on the evidence that Dr A was 'never' Dr Wilson's line manager. It therefore found paragraph 2a not proved.

Paragraph 2b

44. The Tribunal considered whether Dr Wilson knew when she submitted the reference, that Dr A had not completed any part of it.

45. The Tribunal accepted Dr A's evidence that she did not write or send the reference, nor remember setting up the email address or using it in anyway.

46. The Tribunal concluded that it was more likely than not that the email address purporting to be Dr A's, was in fact created by Dr Wilson. There is no evidence that Dr A ever used that email address. The Tribunal has already found that given it was Dr Wilson who stood to gain from the submission of the false reference in order to secure work, it was more likely than not that she created the email address, and wrote and submitted the reference.

47. The Tribunal therefore determined that Dr Wilson knew that Dr A had not completed any part of the reference.

48. The Tribunal therefore found paragraph 2b proved.

Paragraph 2c

49. The Tribunal considered whether Dr Wilson knew when she submitted the reference, that Dr A had no knowledge of Dr Wilson submitting it or using her name.

50. The Tribunal considered that Dr A's evidence was clear that she only became aware of the reference when she was contacted about it by a Counter Fraud Officer for ELFT on 13 July 2022.

51. The Tribunal was satisfied that Dr Wilson knew that Dr A would have had no knowledge of Dr Wilson submitting the reference or using Dr A's name.

52. The Tribunal therefore found paragraph 2c proved.

Paragraph 2d

53. The Tribunal considered whether Dr Wilson knew when she submitted the reference that she had never worked with Dr A.

54. The Tribunal bore in mind Dr A's partial recognition of Dr Wilson and that she was aware of the names of the two wards and a consultant doctor referred to by Dr Wilson, who Dr A stated she would occasionally cover for.

55. The Tribunal determined that Dr A and Dr Wilson on occasion worked together. It considered that the evidence does not support that Dr Wilson 'never' worked with Dr A.

56. In the circumstances, the Tribunal found paragraph 2d not proved.

Paragraph 3

57. The Tribunal considered whether Dr Wilson's conduct as found proved at paragraphs 1a and 1b of the Allegation, was dishonest by reason of paragraphs 2b and 2c of the Allegation.

58. The Tribunal considered Dr Wilson's actual state of knowledge or belief as to the facts. The Tribunal has found that Dr Wilson knew that the reference was false. She also knew that the email address provided for Dr A was not authentic. She created the false email address in order to provide the false reference. The Tribunal agreed that subjectively Dr Wilson did not honestly believe that the reference or other details provided were genuine due to her subjective knowledge that she had provided the email address and wrote and submitted the reference herself. Dr Wilson was therefore dishonest according to the first stage of *Ivey*.

59. The Tribunal found that this would also be considered dishonest by the standards of ordinary decent people, given the actual state of mind of the actor as to the facts.

60. Accordingly, the Tribunal found paragraph 3 of the Allegation proved.

Paragraph 4a

61. The Tribunal considered whether on around 11 February 2022 Dr Wilson submitted a reference to ELFT which falsely purported to have been completed by Dr B.

62. The Tribunal had regard to Dr B's GMC witness statement, dated 9 March 2023. Dr B stated that he had never seen the reference until it was sent to him by the GMC. He stated that: *'Upon review of this, I wish to confirm this reference was never written by me...'*

63. Dr B also clarified in his witness statement that he did not set up the email address provided to ELFT by Dr Wilson, and that he had *'not used or controlled that email address in any way. I was not aware of that email address until I was contacted by the Counter Fraud team...'*

64. The Tribunal also had regard to the Counter Fraud report. It detailed that on 5 April 2022 the IT Server Manager confirmed that there were a few doctors with Dr B's surname when a search was carried out to try to find the Doctor from whom the reference was said to have been sent.

65. Dr B also observed in his witness statement that his name on the reference was the 'wrong way around'; his surname had been put before his forename. He also commented that the reference also indicated:

'that the referee cannot be contacted before the interview, which is worry as I would not indicate this. Additionally, the reference says that the referee is the "employer/line manager" which is incorrect. I am a Consultant Child and Adolescent Psychiatrist. I also note that other than an email address that I have never used, there are no other contact details on the reference form which again is unusual. The form does not make any sense to me at all...'

66. The Tribunal accepted Dr B's evidence that he did not provide the reference. It concluded that the reference was false.

67. The Tribunal was persuaded by Mr Birrell's submission and that as the email address was provided by Dr Wilson and that it was she who stood to gain from the reference, it was more likely than not that Dr Wilson wrote and submitted the reference herself.

68. The Tribunal therefore found paragraph 4a proved.

Paragraph 4b

69. The Tribunal considered whether the reference falsely purporting to have been completed by Dr B, included information which was untrue in the sense that it represented that Dr B was Dr Wilson's 'employer/line manager' during employment dates of November 2019 to May 2020.

70. In Dr B's statement, he stated that it was incorrect that he was Dr Wilson's "employer/line manager". Further, that:

'To my recollection, I have never worked with Dr Wilson anywhere. I note that the reference states that Dr Wilson's employment dates were November 2019 to May 2020, which is why I assumed that she may have been the doctor who took over my position at ELFT in November 2019. However... I did not work with the new psychiatrist and only saw her in passing.

I have also checked my CV to be sure, and I can confirm that between November 2019 to May 2020, after I left ELFT, I was working with Surrey and Borders NHS Partnership Foundation Trust...'

71. In oral evidence, Dr B stated he thought he recognised Dr Wilson but confirmed he was never her line manager and has not worked with her during the dates referred to in the reference. He said that he never gave a face to face handover to the Doctor who took over his position, but did prepare a handover. He could not recall if this handover list was sent directly to the new Doctor or given to someone else to handover.

72. The Tribunal accepted Dr B's evidence and concluded that it was untrue that Dr B was Dr Wilson's 'employer/line manager' during employment dates of November 2019 to May 2020.

73. The Tribunal therefore found paragraph 4b proved.

Paragraph 5a

74. The Tribunal considered whether Dr Wilson knew when she submitted the reference purporting to be from Dr B, that Dr B was not her employer or line manager at any time.

75. Dr B was clear in his evidence that he had never been Dr Wilson's 'employer/line manager' during the employment dates of November 2019 to May 2020, and he had no recollection of ever having worked with Dr Wilson anywhere.

76. In his evidence, Dr B said he had some recognition of seeing Dr Wilson and '*assumed that she may have been the doctor who took over my position at ELFT in November 2019*', but that he only saw her '*in passing*'. The Tribunal considered that there was no evidence to indicate that Dr B was ever Dr Wilson's line manager.

77. Given that Dr Wilson provided the false reference, the Tribunal concluded that Dr Wilson knew Dr B was not her employer or line manager at any time.

78. Accordingly, the Tribunal found paragraph 5a proved.

Paragraph 5b

79. The Tribunal considered whether Dr Wilson knew when she submitted the reference, that Dr B had not completed any part of it.

80. The Tribunal accepted Dr B's evidence that he did not write the reference.

81. The Tribunal concluded that it was more likely than not that the email address purporting to be Dr B's, was in fact created by Dr Wilson. There is no evidence that Dr B ever used that email address. The Tribunal has already found that given it was Dr Wilson who stood to gain from the submission of the false reference in order to secure work, it was more likely than not that she created the email address, and wrote and submitted the reference.

82. The Tribunal was satisfied that Dr Wilson knew that Dr B had not completed any part of the reference.

83. The Tribunal therefore found paragraph 5b proved.

Paragraph 5c

84. The Tribunal considered whether Dr Wilson knew when she submitted the reference, that Dr B had no knowledge of Dr Wilson submitting it or using his name.

85. The Tribunal considered that Dr B's evidence was clear that he had never seen the reference until it was sent to him by the GMC.

86. The Tribunal was satisfied that Dr Wilson knew that Dr B would have had no knowledge of Dr Wilson submitting the reference or using Dr B's name.

87. The Tribunal therefore found paragraph 5c proved.

Paragraph 5d

88. The Tribunal considered whether Dr Wilson knew when she submitted the reference that she had never worked with Dr B.

89. The Tribunal considered that whilst Dr B had some recollection of seeing Dr Wilson in passing, he had assumed that she may have been the doctor who took over his position at ELFT in November 2019. He had no recollection of ever working with Dr Wilson. The Tribunal accepted Dr B's evidence. It concluded that there was no evidence to suggest he ever worked with Dr B and that a single handover from Dr B to Dr Wilson did not constitute working together.

90. Given that Dr Wilson provided the false reference, the Tribunal concluded that Dr Wilson knew she had never worked with Dr B.

91. Accordingly, the Tribunal found paragraph 5d proved.

Paragraph 6

92. The Tribunal considered whether Dr Wilson's conduct as found proved at paragraph 4 of the Allegation was dishonest by reason of paragraph 5 of the Allegation.

93. The Tribunal considered Dr Wilson's actual state of knowledge or belief as to the facts. The Tribunal has found that Dr Wilson knew that the reference was false. She also knew that the email address provided for Dr B was not authentic. She created the false email address in order to provide the false reference. The Tribunal agreed that subjectively Dr Wilson did not honestly believe that the reference or other details provided were genuine

due to her subjective knowledge that she had provided the email address and wrote and submitted the reference herself. Dr Wilson was therefore dishonest according to the first stage of *Ivey*.

92. The Tribunal found that this would also be considered dishonest by the standards of ordinary decent people, given the actual state of mind of the actor as to the facts.

94. Accordingly, the Tribunal found paragraph 6 of the Allegation proved.

Paragraph 7a

95. The Tribunal considered whether on around 11 February 2022 Dr Wilson submitted a reference to ELFT which falsely purported to have been completed by Dr C.

96. The Tribunal had regard to Dr C's evidence. In his witness statement to the GMC, dated 17 April 2023, Dr C stated that when he was called by ELFT regarding the reference pertaining to Dr Wilson:

'I was aware at the time that I had not provided a reference to ELFT or to any other NHS Trust during 2022, I confirmed to the ELFT member of staff that I had not been approached by ELFT to provide a reference for anyone, nor had I recently provided a reference in respect of any of my colleagues to ELFT in 2022...'

97. Dr C also stated the during the call from ELFT he was asked to confirm the email address that had been provided. He stated that he advised that he had no knowledge of the email address and clarified that he had never used or operated it.

98. The Tribunal also had regard to the Counter Fraud Investigation Report, dated 1 August 2022. It reported that during a call to Ms G on 12 July 2022:

'Dr C confirmed that he was not familiar with the subject, he never provided ELFT a reference for a Dr Natalia WILSON at any point, the reference submitted to ELFT on the 17th February 2022 was not sent by him, his email address is ... He has never had the email address as per the reference ... He was at ELFT for a period of time previously which was to do his training, he was also not a line manager... He last provided a reference for someone about 1½ years ago, he has never undertaken any mental health work, his field is Learning Disabilities. During the period of the reference he was not at the Trust mentioned in the subject's CV.'

99. In his statement, Dr C also confirmed that:

'I have never been approached by a Dr Natalia Wilson to be asked to act as her referee or provide a reference for her, never agreed to provide a reference for Dr Wilson and have never provided such a reference.'

100. Dr C also confirmed, having subsequently received a copy of the reference from the GMC, that *'I had not seen this document before. I confirm that I did not complete the form...'*

101. The Tribunal accepted Dr C's evidence that he did not provide the reference and concluded that the reference was false.

102. The Tribunal was persuaded by Mr Birrell's submission and that as the email address was provided by Dr Wilson and that it was she who stood to gain from the reference, it was more likely than not that Dr Wilson wrote and submitted the reference herself.

103. The Tribunal therefore found paragraph 7a proved.

Paragraph 7b

104. The Tribunal considered whether the reference falsely purporting to have been completed by Dr C, included information which was untrue in the sense that it represented that Dr C was Dr Wilson's *'employer/line manager'* during employment dates of November 2017 to November 2019.

105. In his witness statement, Dr C stated that he could not recall working with a Dr Natalia Wilson, and that if he had worked with a Dr Natalia Wilson he was not aware of her to the extent that he could identify her. He stated that he recalled a Dr Wilson whilst working at Hertfordshire Partnership NHS Foundation Trust a specialist trainee during 2016 – 2017, though he could not recall if her first name was Natalia.

106. In his oral evidence, Dr C, having seen Dr Wilson, was no clearer as to whether he had met or worked with Dr Wilson before, despite Dr Wilson saying that he had been her "favourite supervisor".

107. The Tribunal considered that there was no evidence that Dr C was Dr Wilson's employer or line manager during employment dates of November 2017 to November 2019.

108. The evidence from Dr C was vague as to whether he worked with Dr Wilson.

109. Accordingly, the Tribunal found paragraph 7b not proved.

Paragraph 8a

110. The Tribunal considered whether Dr Wilson knew when she submitted the reference purporting to be from Dr C, that Dr C was not her employer or line manager at any time.

111. The Tribunal considered that there was insufficient evidence to be satisfied on the balance of probabilities that Dr C was Dr Wilson's line manager at any time. Whilst Dr C had a poor recollection of ever working with Dr Wilson, there is no evidence to suggest that he was or was not Dr Wilson's line manager at any point.

112. Given that Dr Wilson was certain that Dr C was her line manager and that Dr C had poor recall, the Tribunal found paragraph 8a not proved.

Paragraph 8b

113. The Tribunal considered whether Dr Wilson knew when she submitted the reference, that Dr C had not completed any part of it.

114. The Tribunal accepted Dr C's evidence that he did not write the reference.

115. The Tribunal concluded that it was more likely than not that the email address purporting to be Dr C's, was in fact created by Dr Wilson. There is no evidence that Dr C ever used that email address. The Tribunal has already found that given it was Dr Wilson who stood to gain from the submission of the false reference in order to secure work, it was more likely than not that she created the email address, and wrote and submitted the reference.

116. The Tribunal was satisfied that Dr Wilson knew that Dr C had not completed any part of the reference.

117. The Tribunal therefore found paragraph 8b proved.

Paragraph 8c

118. The Tribunal considered whether Dr Wilson knew when she submitted the reference, that Dr C had no knowledge of Dr Wilson submitting it or using his name.

119. The Tribunal considered that Dr C's evidence was clear that he did not provide Dr Wilson a reference and had never been approached by her to be asked to provide a reference, and never he agreed to do so. He was clear that he had not provided a reference for anyone during this period. He also confirmed that he had never seen the reference before.

120. The Tribunal concluded that Dr C had no knowledge of Dr Wilson submitting the reference or using Dr C's name and determined that Dr Wilson knew this when she submitted the reference.

121. The Tribunal therefore found paragraph 8c proved.

Paragraph 8d

122. The Tribunal considered whether Dr Wilson knew when she submitted the reference that she had never worked with Dr C.

123. Whilst Dr C had no recollection of working with Dr Wilson, Dr Wilson stated when Dr C was giving his evidence that he had been her favourite supervisor. The Tribunal considered that there was no evidence to corroborate that Dr Wilson did or did not work with Dr C. Given that Dr C's recall was poor and that Dr Wilson was certain that he had been her supervisor, it determined that, on the balance of probabilities, it is not proved that Dr Wilson knew they had never worked together when submitting the reference.

124. The Tribunal therefore found paragraph 8d not proved.

Paragraph 9

125. The Tribunal considered whether Dr Wilson's conduct as found proved at paragraph 7 of the Allegation was dishonest by reason of paragraph 8 of the Allegation.

126. The Tribunal considered Dr Wilson's actual state of knowledge or belief as to the facts. The Tribunal has found that Dr Wilson knew that the reference was false. She also knew that the email address provided for Dr C was not authentic. She created the false email address in order to provide the false reference. The Tribunal agreed that subjectively Dr Wilson did not honestly believe that the reference or other details provided were genuine due to her subjective knowledge that she had provided the email address and wrote and submitted the reference herself. Dr Wilson was therefore dishonest according to the first stage of *Ivey*.

127. The Tribunal found that this would also be considered dishonest by the standards of ordinary decent people, given the actual state of mind of the actor as to the facts.

128. Accordingly, the Tribunal found paragraph 9 of the Allegation proved.

Paragraph 10a i-iii

129. The Tribunal considered whether on around 2 April 2022 Dr Wilson submitted a reference to Interact Medical Locum Agency which falsely purported to have been completed by Dr D, signed by D, and dated 2 April 2022 by Dr D.

130. The Tribunal had regard to Dr D's evidence. In her witness statement to the GMC, dated 15 March 2023, Dr D stated that when she received an email on 11 August 2022 from Mr F of Interact Medical asking her to confirm whether she had provided the reference for Dr Wilson, Dr D replied to confirm she had no knowledge of the reference. On the same day, Dr D submitted a complaint to the GMC as she was concerned the reference had been forged in her name.

131. With regard to the reference purportedly from her, Dr D stated:

'I had never seen it until it was sent to me by Interact Medical. I confirm that I did not write or send it. The writing on the form is not my handwriting.'

I confirm that I have never been asked by Dr Wilson to provide a reference for her. I do not know who she is. As far as I know, I have never worked with Dr Wilson anywhere.

I confirm that I have never written or provided a reference for Dr Wilson. I usually keep a record of what I do, and I have no record of providing a reference for Dr Wilson. I also confirm that I did not provide any references in April 2022...

The signature.. is absolutely not my signature...'

132. The Tribunal accepted Dr D's evidence that she did not complete, sign and date the reference. The Tribunal concluded that the reference was false.

133. In regard to the email address, Dr D stated:

'I did not set up the email address ... I have not used or controlled that email address in any way. That email address was completely unknown to me until I saw it..'

She also commented:

'I find it very unsettling that a doctor could set up a fake email address, a fake mobile number, and give a fake reference...'

134. The Tribunal noted Dr Wilson had provided the email address for Dr D to Interact Medical by Dr Wilson on 27 March 2022.

135. The Tribunal considered that as the email address for Dr D was provided by Dr Wilson from which the reference was provided, and given that it was Dr Wilson who stood to gain from the reference, it was more likely than not that Dr Wilson wrote and submitted the reference.

136. The Tribunal therefore found paragraph 10a i-iii proved.

Paragraph 10b i-ii

137. The Tribunal considered whether the reference falsely purporting to have been completed by Dr D, included information which was untrue in the sense that it represented that Dr Wilson had worked with Dr D at HMP Woodhill, from February 2021 to February 2022.

138. In her witness statement Dr D stated that between February 2021 and February 2022 she only worked at Warren Court. She stated that she had visited many prisons in her capacity as a Consultant Psychiatrist but *'never worked at HMP Woodhill.'* She stated that she only had one patient in her record who been at HMP Woodhill before but they did not

become her patient whilst they were still at Woodhill and in any case saw that patient remotely as it was during the height of the Covid-19 pandemic.

139. Dr D explained in her witness statement that:

'I used to work at The Mount as a visiting Consultant Psychiatrist, as part of a collaboration scheme due to staff shortages among the HPFT Community Forensic Team. HPFT was subcontracted by West Hertfordshire Teaching Hospitals NHS Trust ('WHT') to provide mental healthcare services to the prisoners at The Mount. I worked there for around two years – my first prison clinic was on 5 June 2018 and my last day there was 28 September 2020..

WHT lost their bid to renew their contract with The Mount, therefore I, along with the rest of my team, had to leave. I believe our team's contract was due to expire on 30 September 2020 and the new team was meant to start work on 1 October 2020. My team was aware that new staff from an agency service were due to visit the prison on 28 September 2020 to get an understanding of the premises, the work carried out, and other related matters. As far as I remember that same day was also my last working day there.'

140. The Tribunal noted that Dr Wilson was present as part the new team of locums taking over and that there would have been some contact between Dr D and Dr Wilson on 28 September 2020. Dr D stated:

'I can confirm that on 28 September 2020, along with my colleagues, I carried out an induction for a visiting team of potential new agency staff who were due to replace us. However, it was not a 1-1 visit between me and Dr Wilson and I was not the only staff member interacting with the group – there was a manager present as well as a group of nurses.

It was simply an induction for the visiting group, we did not work together at all. I do not know if Dr Wilson was part of that group. In any case, it was my first and last meeting with that group...

I cannot recall being personally introduced to Dr Wilson as it was a group of people. I cannot recall how many people were in the group. I cannot remember the faces of the people in the group as this was in 2020 so we were all wearing face masks. To be honest, if a picture of Dr Wilson was put in front of me, I would not know who the person is. I do not know the identity of this doctor; I only know the name due to this situation regarding the reference..'

141. In oral evidence, after seeing Dr Wilson, Dr D confirmed that she did not recognise her.

142. Dr Wilson stated that there would have been CCTV footage showing her and Dr D working together but no footage was requested by her or produced.

143. The Tribunal considered that there was no evidence that Dr Wilson had worked with Dr D at HMP Woodhill from February 2021 to February 2022. It determined that this information which was included in the reference was, therefore, untrue. The only contact between Dr D and Dr Wilson was during the induction handover on 28 September 2020 as described by Dr D.

144. Accordingly, the Tribunal found paragraph 10b i-ii proved.

Paragraph 11a

145. The Tribunal considered whether Dr Wilson knew when she submitted the reference purporting to be from Dr D, that Dr D had not completed any part of the reference.

146. The Tribunal preferred the evidence of Dr D to that of Dr Wilson. The Tribunal accepted Dr D's evidence that she did not complete any part of the reference.

147. The Tribunal determined that Dr Wilson knew that Dr D had not completed any part of the reference when she submitted it.

148. The Tribunal therefore found paragraph 11a proved.

Paragraph 11b

149. The Tribunal considered whether Dr Wilson knew when she submitted the reference purporting to be from Dr D, that Dr D had not signed the reference.

150. Given the Tribunal's finding that Dr D did not complete any part of the reference, it follows she did not sign it. The Tribunal determined that Dr Wilson knew when she submitted the reference from a false email address, that Dr D had not signed the reference. The Tribunal accepted Dr D's evidence that the signature was not hers.

151. The Tribunal therefore found paragraph 11b proved.

Paragraph 11c

152. The Tribunal considered whether Dr Wilson knew when she submitted the reference purporting to be from Dr D, that Dr D had not dated the reference.

153. Given the Tribunal's reasoning above that Dr D did not complete any part of the reference, it follows Dr D did not date the reference. The Tribunal determined that Dr Wilson knew this when she submitted the reference from the email account.

154. Accordingly, the Tribunal found paragraph 11c proved.

Paragraph 11d

155. The Tribunal considered whether Dr Wilson knew when she submitted the reference purporting to be from Dr D, that Dr D had no knowledge of her submitting the reference or using her name.

156. Given the Tribunal's findings above and that it accepted Dr D's evidence that she never completed any part of the reference nor was asked to provide a reference from Dr Wilson, it follows that Dr D had no knowledge that Dr Wilson submitted the reference. That Dr D was unaware that the reference was submitted under her name is further proven by the fact that the Tribunal accepts that Dr D did not create or control the email address in question and that on the balance of probabilities, Dr Wilson created the false email address, in order to submit the reference.

157. The Tribunal found paragraph 11d proved.

Paragraph 11e

158. The Tribunal considered whether Dr Wilson knew when she submitted the reference that she had not worked with Dr D.

159. Given the Tribunal's findings that Dr Wilson and Dr D did not work together at any time (their only contact being during an induction handover on 28 September 2020), the Tribunal concluded that Dr Wilson knew when submitted the reference that she had not worked with Dr D.

160. The Tribunal therefore found paragraph 11e proved.

Paragraph 12

161. The Tribunal considered whether Dr Wilson's conduct as found proved at paragraph 10 of the Allegation was dishonest by reason of paragraph 11 of the Allegation.

162. The Tribunal considered Dr Wilson's actual state of knowledge or belief as to the facts. The Tribunal has found that Dr Wilson knew that the reference was false. She also knew that the email address provided for Dr D was not authentic. She created the false email address in order to provide the false reference. The Tribunal agreed that subjectively Dr Wilson did not honestly believe that the reference or other details provided were genuine due to her subjective knowledge that she had provided the email address and wrote and submitted the reference herself. Dr Wilson was therefore dishonest according to the first stage of *Ivey*.

163. The Tribunal found that this would also be considered dishonest by the standards of ordinary decent people, given the actual state of mind of the actor as to the facts.

164. Accordingly, the Tribunal found paragraph 12 of the Allegation proved.

The Tribunal's Overall Determination on the Facts

165. The Tribunal has determined the facts as follows:

1. On around 11 February 2022 you submitted a Reference (the First Reference) to East London NHS Foundation Trust ('ELFT') which:
 - a. falsely purported to have been completed by Dr A; **Determined and found proved**
 - b. included information which represented that Dr A was your '*employer/line manager*' during your employment dates of September 2020 to February 2022, which was untrue. **Determined and found proved**
2. When you submitted the First Reference, you knew that:
 - a. Dr A was not your employer or line manager at any time; **Not proved**
 - b. Dr A had not completed any part of the First Reference; **Determined and found proved**
 - c. Dr A had no knowledge of your submitting the First Reference, or any reference using ~~his~~ her name; **Determined and found proved**

Amended in accordance with Rule 17(2) of the Rules
 - d. you had never worked with Dr A. **Not proved**
3. Your conduct as described at paragraph 1 was dishonest by reason of paragraph 2. **Determined and found proved**
4. On around 11 February 2022 you submitted a Reference (the Second Reference) to ELFT which:
 - a. falsely purported to have been completed by Dr B; **Determined and found proved**

- b. included information which represented that Dr B was your *'employer/line manager'* during employment dates of November 2019 to May 2020, which was untrue. **Determined and found proved**

5. When you submitted the Second Reference, you knew that:
 - a. Dr B was not your employer or line manager at any time; **Determined and found proved**
 - b. Dr B had not completed any part of the Second Reference; **Determined and found proved**
 - c. Dr B had no knowledge of your submitting the Second Reference, or any reference using his name; **Determined and found proved**
 - d. you had never worked with Dr B. **Determined and found proved**

6. Your conduct as described at paragraph 4 was dishonest by reason of paragraph 5. **Determined and found proved**

7. On around 11 February 2022 you submitted a Reference (the Third Reference) to ELFT which:
 - a. falsely purported to have been completed by Dr C; **Determined and found proved**
 - b. included information which represented that Dr C was your *'employer/line manager'* during employment dates of November 2017 to November 2019, which was untrue. **Not proved**

8. When you submitted the Third Reference, you knew that:
 - a. Dr C was not your employer or line manager at any time; **Not proved**
 - b. Dr C had not completed any part of the Third Reference; **Determined and found proved**
 - c. Dr C had no knowledge of your submitting the Third Reference, or any reference using his name; **Determined and found proved**
 - d. you had never worked with Dr C. **Not proved**

9. Your conduct as described at paragraph 7 was dishonest by reason of paragraph 8. **Determined and found proved**

10. On or around 2 April 2022 you submitted to Interact Medical locum Agency a completed Reference Request form (the Fourth Reference), which:

- a. falsely purported to be:
 - i. completed by Dr D; **Determined and found proved**
 - ii. signed by Dr D; **Determined and found proved**
 - iii. dated 2 April 2022 by Dr D. **Determined and found proved**
- b. included information which represented that you had worked with Dr D:
 - i. at HMP Woodhill; **Determined and found proved**
 - ii. from February 2021 to February 2022; **Determined and found proved**

which was untrue. **Determined and found proved**

11. When you submitted the Fourth Reference, you knew that:

- a. Dr D had not completed any part of the Fourth Reference; **Determined and found proved**
- b. Dr D had not signed the Fourth Reference; **Determined and found proved**
- c. Dr D had not dated the Fourth Reference; **Determined and found proved**
- d. Dr D had no knowledge of your submitting the Fourth Reference, or any reference using her name; **Determined and found proved**
- e. you had not worked with Dr D. **Determined and found proved**

12. Your conduct as described at paragraph 10 was dishonest by reason of paragraph 11. **Determined and found proved**

Determination on Impairment - 30/05/2024

166. The Tribunal now has to decide in accordance with Rule 17(2)(l) of the Rules whether, on the basis of the facts which it has found proved as set out before, Dr Wilson's fitness to practise is impaired by reason of misconduct.

The Evidence

167. The Tribunal has taken into account all the evidence received during the facts stage of the hearing, both oral and documentary. It received no further evidence and Dr Wilson did not avail herself of the opportunity to give oral evidence at this stage, although she did make submissions to the Tribunal.

Submissions

Submissions on behalf of the GMC

168. On behalf of the GMC, Mr Birrell submitted that Dr Wilson's fitness to practise is impaired by reason of misconduct.

169. Mr Birrell submitted that Dr Wilson's case involves a serious departure from *Good medical practice (GMP)*. He first referred the Tribunal to the current version of *GMP* rather than that applicable at the time of the Allegation, before referring to paragraphs 65 and 66 of *GMP (2013 edition)* which he submitted Dr Wilson had departed from.

170. Mr Birrell submitted that the Tribunal found that Dr Wilson acted dishonestly. He submitted that it was an extremely serious case of dishonesty and made the following eight points.

171. Firstly, the dishonesty was repeated. There were four false references provided to two employers.

172. Second, the dishonesty was sustained for about seven weeks, though he added it might be said it was sustained for two years, right up until today, because, he submitted, Dr Wilson continues to lie.

173. Third, the dishonesty was calculated. Dr Wilson set up the email addresses herself and because they looked official; their authenticity was not checked. He reminded the Tribunal that Mr F in his evidence had said the references were 'taken as read.' Mr Birrell reiterated that the dishonesty was calculated, further by the fact Dr Wilson was careful to use doctors with whom she had some tenuous connection as referees.

174. Fourth, the dishonesty involved a breach of trust. Mr Birrell submitted that Mr E had stated that ELFT did not routinely check references for authenticity because there is a presumption references are authentic because they have been provided by a doctor. Mr Birrell submitted that Dr Wilson abused that trust.

175. Fifth, the dishonesty was for financial gain. Mr Birrell submitted that this was the only logical inference as the false references were put forward to get jobs.

176. Sixth, the dishonesty was in a professional setting.

177. Seventh, the dishonesty could have endangered patient safety.
178. Eighth, the dishonesty could have had adverse consequences for colleagues. Mr Birrell reminded the Tribunal of Dr D's evidence; Dr D had been worried that the false reference would make her employer think she was 'moonlighting'.
179. Mr Birrell submitted that there was a total lack of insight in this case. He submitted that Dr Wilson denied any wrongdoing and that her contention that referees were colluding to get her into trouble was ludicrous.
180. Mr Birrell submitted that the way in which Dr Wilson has run her case suggests that she is beyond remediation.
181. Mr Birrell submitted that the public would be horrified to discover that a doctor had been forging references to get jobs to treat patients.
182. Accordingly, Mr Birrell invited the Tribunal to find that Dr Wilson's fitness to practise is currently impaired.

Dr Wilson's submissions

183. Dr Wilson submitted that the GMC should also act with honesty and integrity. She submitted that the GMC seems to have forgotten about this and submitted that the GMC had previously 'falsified' a decision of the interim tribunal on 10 May 2024.
184. Dr Wilson submitted that the GMC had breached the law more than fifty times during the course of its investigation. She submitted that before the GMC says doctors should act with honesty and integrity, it should act with honesty and integrity itself.
185. Dr Wilson submitted that it was incorrect to say her actions were sustained for two years when she has been sitting at home doing nothing.
186. Dr Wilson submitted that the High Court has advised that the maintenance of innocence is not determinative of a lack of insight.
187. Dr Wilson submitted that the GMC barrister was not well because he continues to use phrases which are used by patients with paranoid schizophrenia. She submitted that for the sake of the public, Mr Birrell should go and see a private psychiatrist and have medication because his condition is getting worse.
188. Dr Wilson submitted that Dr D had given a 'falsified' statement to the Tribunal and should worry about the things she had done herself. She also submitted that a member of the interim tribunal knew Dr D and yet the tribunal went ahead.

189. Dr Wilson submitted that it was wrong for the GMC to submit the misconduct was repeated and questioned Mr Birrell's logic and again submitted he should go see a private psychiatrist because of his fantasy.

190. Dr Wilson submitted that she was innocent and that the GMC has an absolutely wild fantasy because of counsel's mental illness.

191. Dr Wilson submitted that Ms G was not qualified to do her role and questioned how her evidence was accepted when ELFT was breaching government guidelines by employing Mr G. Dr Wilson reiterated Ms G's evidence was, that she could not categorically confirm that she [Dr Wilson] personally created, or controlled the emails which replied to ELFT's requests to provide the references. Dr Wilson said she would report Ms G to the Care Quality Commission.

192. Dr Wilson submitted that there was no evidence of clinical concerns and that Mr Birrell was wrong to submit the actions had the potential to endanger patient safety.

193. Dr Wilson submitted that she graduated from Oxford Psychiatry deanery, has had British Citizenship for 19 years and British rights which she plans to exercise. She submitted that as a graduate from Oxford Psychiatry deanery she knows what she is talking about.

194. Dr Wilson submitted that she did not make any mistakes, was never a risk to patients and has not had any problems with the GMC before. She reminded the Tribunal of a previous appraisal in which was described as a sincere doctor. She submitted that she was more sincere than Mr Birrell and again questioned his honesty and integrity. She submitted that the 360 feedback she has received from colleagues and patients has all been excellent.

195. In response to question from the LQC about whether any CPD had been undertaken and whether she considered the was a risk of repetition, Dr Wilson submitted that she was an honest person with insight and knows she did not do anything wrong. She said she would always follow recommendations and advice from senior organisations she respects. She said that for two years she has been sat at home suspended and therefore prohibited from doing anything.

The Relevant Legal Principles

196. The Tribunal reminded itself that at this stage of proceedings, there is no burden or standard of proof and the decision of impairment is a matter for the Tribunal's judgement alone.

197. In approaching the decision, the Tribunal was mindful of the two stage process to be adopted: first whether the facts as found proved amounted to misconduct and that the misconduct was serious, and then whether the finding of misconduct, which was serious, could lead to a finding of impairment.

198. The Tribunal must determine whether Dr Wilson’s fitness to practise is impaired today, taking into account Dr Wilson’s conduct at the time of the events and any relevant factors since then such as whether the matters are remediable or have been remedied and any likelihood of repetition.

199. When considering misconduct, the Tribunal reminded itself of the relevant case law of *Roylance v GMC*, *Remedy UK v GMC* and *Cheatle v GMC*.

200. With regard to impairment, the Tribunal considered the test laid out by Dame Janet Smith's test in *The Fifth Shipman Report*, cited in *CHRE v NMC and P Grant [2011] EWHC 927 (Admin)*:

- 'a) ...;
- b) *Whether the registrant has in the past brought and/or is liable in the future to bring the profession into disrepute;*
- c) *Whether the registrant has in the past breached and/or is liable in the future to breach one of the fundamental tenets of the profession.*
- d) *Whether the registrant has in the past acted dishonestly and/or is liable to act dishonestly in the future.*

201. The Tribunal also considered the wider public interest in considering impaired fitness to practise and the observations of Mrs Justice Cox, in the Fifth Shipman Report in which she stated that:

"In determining whether or not a practitioner's fitness to practise is impaired by reason of misconduct, the relevant tribunal should generally consider not only whether the practitioner continues to present a risk to members of the public in his or her current role, but also whether the need to uphold proper professional standards and public confidence in the profession would be undermined if a finding of impairment were not made in the particular circumstances".

202. The Tribunal was also mindful of the relevant cases, including the principles obtained in the case of *Meadow v GMC*, *Yeong v GMC*, *Cohen v GMC*, *Karwal*, *Towuaghantse v GMC* and *GMC v Nwachuku*.

The Tribunal’s Determination on Impairment

Misconduct

203. The Tribunal considered whether the facts found proved amount to misconduct.

204. The Tribunal found that Dr Wilson dishonestly submitted four references purporting to be from other clinicians. It found that Dr Wilson had created these references and fake email addresses purporting to belong to the clinicians who she had identified as her referees.

205. The Tribunal agreed with Mr Birrell's characterisation of the dishonesty but accepted that there was no evidence Dr Wilson put patients at harm. The Tribunal considered that the dishonesty was calculated and sustained. It was done in a professional setting for Dr Wilson to secure roles. She put her own interests above those of others, and her dishonesty also had the potential to implicate other practitioners.

206. The Tribunal considered that Dr Wilson's actions breached the following paragraphs of GMP.

1 Patients need good doctors. Good doctors make the care of their patients their first concern: they are competent, keep their knowledge and skills up to date, establish and maintain good relationships with patients and colleagues, are honest and trustworthy, and act with integrity ...

36 You must treat colleagues fairly and with respect.

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

66 You must always be honest about your experience, qualifications and current role.

71 You must be honest and trustworthy when writing reports, and when completing or signing forms, reports and other documents. You must make sure that any documents you write or sign are not false or misleading.

a You must take reasonable steps to check the information is correct.

b You must not deliberately leave out relevant information.

207. The Tribunal considered that Dr Wilson's dishonesty breached fundamental tenets of the profession and that she was disrespectful to other clinicians by creating false or misleading documents, namely the references purporting to be made by the Doctors concerned.

208. The Tribunal has concluded that Dr Wilson's conduct fell so far short of the standards of conduct reasonably to be expected of a doctor as to amount to misconduct. It also considered that Dr Wilson's conduct would be considered deplorable by fellow practitioners.

209. Accordingly, the Tribunal found that the facts found proved amounted to misconduct.

Impairment

210. The Tribunal having found that the facts found proved amounted to misconduct, went on to consider whether, as a result of that misconduct, Dr Wilson's fitness to practise is currently impaired.

211. The Tribunal considered whether the misconduct was remediable, whether it had been remedied and whether there was a risk of repetition. It was mindful that dishonesty is difficult but not impossible to remediate.

212. The Tribunal considered that there was no insight in this case. Dr Wilson did not provide any evidence at this stage of the hearing or express how the findings of dishonesty could impact on public confidence in the profession. Dr Wilson continues to maintain that it is ELFT and the GMC who are in the wrong.

213. The Tribunal accepts that the fact that Dr Wilson denied the allegations, does not necessarily mean that there will be no insight. However Dr Wilson continued to maintain her innocence at this stage and did not express any insight in relation to the gravity of the findings of fact, including dishonesty, that the Tribunal has made.

214. The Tribunal also considered that there was no evidence of remediation.

215. Given that the Tribunal considered that there is no insight nor remediation, the Tribunal concluded that there was a real risk of repetition of the misconduct if Dr Wilson found herself in similar circumstances in the future.

216. The Tribunal also considered that limbs (b) – (d) of the Dame Janet Smith test in the case of *Grant* were met in this case, namely that Dr Wilson:

- a) ...
- b) *has in the past brought and/or is liable in the future to bring the profession into disrepute;*
- c) *has in the past breached and/or is liable in the future to breach one of the fundamental tenets of the profession.*
- d) *has in the past acted dishonestly and/or is liable to act dishonestly in the future.*

217. The Tribunal has therefore determined that Dr Wilson's fitness to practise is impaired by reason of misconduct. It considered that a finding of impairment by reason of misconduct was necessary in order 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 Sanction - 31/05/2024

218. Having determined that Dr Wilson's fitness to practise is impaired by reason of misconduct, the Tribunal now has to decide in accordance with Rule 17(2)(n) of the Rules on the appropriate sanction, if any, to impose.

The Outcome of Applications Made during the Sanction Stage

219. The Tribunal refused an application made by Dr Wilson to adjourn the hearing until 4pm. She made this application after receiving a legal authority (*Khan v General Medical Council [2015] EWHC 301 (Admin), 2015 WL 55979*) from the GMC just prior to the hearing commencing to which the GMC intended to refer to in submissions. The Tribunal considered that a short adjournment of half an hour was sufficient time for Dr Wilson to read the document. The Tribunal considered that both parties had referred to cases during the course of the hearing, as well as the LQC when giving legal advice, and it was not always necessary to provide a copy of every case referred to. The Tribunal considered that Mr Birrell was trying to be helpful but considered it was fair to grant a short adjournment for Dr Wilson to read the material prior to hearing submissions.

The Evidence

220. The Tribunal has taken into account evidence received during the earlier stages of the hearing where relevant to reaching a decision on sanction. It received no further evidence at this stage.

Submissions

GMC Submissions

221. On behalf of the GMC, Mr Birrell submitted the appropriate sanction was erasure.

222. Mr Birrell submitted that the Tribunal had accepted his characterisation of Dr Wilson's dishonesty at paragraph 40 of its determination of impairment, and he adopted the eight points he had made and reiterated them to the Tribunal.

223. Mr Birrell directed the Tribunal to paragraph 120 – 128 of the Sanctions Guidance (February 2024 version)('SG'). In particular, he highlighted paragraph 124 of the SG which advises:

124 Although it may not result in direct harm to patients, dishonesty related to matters outside the doctor's clinical responsibility (eg providing false statements or fraudulent claims for monies) is particularly serious. This is because it can undermine the trust the public place in the medical profession. Health authorities should be able to trust the integrity of doctors, and where a doctor undermines that trust there is a risk to public confidence in the profession. Evidence of clinical competence cannot mitigate serious and/or persistent dishonesty.

224. Mr Birrell stressed the evidence of clinical competence affords Dr Wilson no mitigation.

225. Mr Birrell also drew the Tribunal's attention to paragraph 125c of the SG:

125 Examples of dishonesty in professional practice could include:

c submitting or providing false references

226. Mr Birrell reminded the Tribunal that it must consider the aggravating and mitigating features.

227. In regard to aggravating features, Mr Birrell referred the Tribunal to the aggravating factors listed at paragraphs 55 and 56 of the SG. He submitted that the absence of insight was an aggravating feature. Further, he submitted that Dr Wilson had abused her professional position. In regard to mitigating factors, he accepted that this was the first time Dr Wilson has come before her regulator and had good character. He submitted that there was no insight nor evidence that Dr Wilson had kept up-to-date. Furthermore, he submitted that the misconduct was not related to inexperience or a lack of training and that Dr Wilson was not relying on stress as a mitigating factor. He added that there has been a short lapse of time since the misconduct but that this was not overly long and there has been no evidence of progress or remediation in that period. He further observed that there are no references or testimonials, nor an expression of regret or apology.

228. Mr Birrell submitted that there are no exceptional circumstances for the Tribunal to take no action. He submitted that the public would be outraged if no action were taken.

229. Mr Birrell submitted that it was too serious a case for conditions to be appropriate, and that any conditions would not be workable and it would be difficult to formulate conditions in relation to the dishonesty found.

230. Mr Birrell then addressed the Tribunal in relation to the sanction of suspension and referred the Tribunal to paragraph 93 of the SG.

'93 Suspension may be appropriate, for example, where there may have been acknowledgement of fault and where the tribunal is satisfied that the behaviour or incident is unlikely to be repeated. The tribunal may wish to see evidence that the doctor has taken steps to mitigate their actions'

231. Mr Birrell stressed that there has been no acknowledgement of fault in this case and that the Tribunal had found that there was a risk of repetition.

232. Mr Birrell also highlighted factors set out at paragraph 97 of the SG which outline when suspension may appropriate, including:

e No evidence that demonstrates remediation is unlikely to be successful, eg because of previous unsuccessful attempts or a doctor's unwillingness to engage.

g The tribunal is satisfied the doctor has insight and does not pose a significant risk of repeating behaviour.

233. Mr Birrell submitted that these factors were not applicable in this case; he submitted that Dr Wilson's attitude during the hearing has been very troubling and that there was simply no prospect of successful remediation. He added that the Tribunal has found that Dr Wilson has no insight and that there is a risk of repetition.

234. Mr Birrell submitted, therefore, that the only means of maintaining public confidence in the profession is by imposing the sanction of erasure. He referred the Tribunal to various paragraphs of the SG, including:

108 Erasure may be appropriate even where the doctor does not present a risk to patient safety, but where this action is necessary to maintain public confidence in the profession. For example, if a doctor has shown a blatant disregard for the safeguards designed to protect members of the public and maintain high standards within the profession that is incompatible with continued registration as a doctor.

109 Any of the following factors being present may indicate erasure is appropriate (this list is not exhaustive).

a A particularly serious departure from the principles set out in Good medical practice where the behaviour is difficult to remediate.

b A deliberate or reckless disregard for the principles set out in Good medical practice and/or patient safety.

...

d Abuse of position/trust

...

h Dishonesty, especially where persistent and/or covered up

i Putting their own interests before those of their patients

j Persistent lack of insight into the seriousness of their actions or the consequences.

235. In summary, Mr Birrell submitted the guidance and authorities show that nothing short of erasure would be appropriate.

Dr Wilson's submissions

236. Dr Wilson submitted that Mr Birrell had breached various rules and the doctrine of precedent.

237. Dr Wilson questioned Mr Birrell's insight and addressed the Tribunal in relation to a client he had represented in the criminal court who was acquitted. She submitted that it was double standards on the part of the GMC to say that she did not have insight.

238. Dr Wilson submitted that the GMC's sanction request was based solely on the persecutory delusions of Mr Birrell due to his untreated mental illness.

239. Dr Wilson submitted that that there had been over 50 breaches of law by the GMC during its investigation, including Civil Procedures Rules and the Human Rights Act 1998.

240. Dr Wilson submitted that Mr Birrell presents a high risk to the public, especially to vulnerable and protected groups like female litigants in person.

241. Dr Wilson submitted that that there has been no case to answer from the beginning. She again submitted that there were double standards.

242. Dr Wilson also submitted that for the last two years she has been suspended so could not do anything in this period and questioned what progress she could have made in this period.

243. Dr Wilson concluded by stating there has been no case to answer from the beginning and that she was innocent in this case.

The Tribunal's Determination on Sanction

244. The decision as to the appropriate sanction, if any, to impose is a matter for the Tribunal exercising its own judgement. In reaching its decision, the Tribunal has taken the SG into account and has borne in mind the overarching objective.

245. The Tribunal reminded itself that the main reason for imposing any sanction is to protect the public and that sanctions are not imposed to punish or discipline doctors, even though they may have a punitive effect. Throughout its deliberations, the Tribunal has applied the principle of proportionality, balancing Dr Wilson's interests with the public interest.

246. The Tribunal first considered and balanced the aggravating and mitigating factors in this case.

Aggravating Factors

247. The Tribunal considered that there were various aggravating factors in this case.

248. The Tribunal considered that there had been a serious departure from the standards expected of a doctor. Dr Wilson created false email addresses and gave names of clinicians whom she had not approached for a reference but with whom she had had some contact in the past. From these email addresses she provided fake references purporting to be from those clinicians. The Tribunal considered that her dishonesty was premeditated, sophisticated and sustained. It considered that there had been a serious breach of trust of the public's confidence in doctors, as well as the confidence of the clinicians in their fellow professionals.

249. The Tribunal also considered the lack of insight to be seriously aggravating. There has been no insight shown in respect to the gravity of the findings made and she has used her submissions to direct criticism at GMC counsel rather than addressing the pertinent issues which the Tribunal must consider.

Mitigating Factors

250. The Tribunal then considered the mitigating factors in this case.

251. The Tribunal noted that there has been no previous fitness to practice concerns. It also had regard to the positive appraisals provided in the hearing documentation which show

there were no clinical concerns, albeit the Tribunal consider that this was not germane to the nature of this case.

252. The Tribunal concluded that the aggravating factors in this case significantly outweigh the mitigating factors.

253. The Tribunal went on to consider each sanction in ascending order of severity, starting with the least restrictive.

No action

254. The Tribunal first considered whether to conclude the case by taking no action.

255. The Tribunal was mindful that where a doctor's fitness to practise is found to be impaired, there must be exceptional circumstances to justify taking no action. The Tribunal considered that there were no exceptional circumstances in this case. It determined that taking no action would seriously undermine public confidence in the profession.

Conditions

256. The Tribunal next considered whether conditions on Dr Wilson's registration would be appropriate.

257. The Tribunal noted the types of cases outlined in the SG which advise when conditions might be appropriate. The SG also advises that conditions may be workable where a doctor has insight. The Tribunal concluded that this was not a case where conditions would be appropriate nor workable, and in any event it considered that it would be difficult to formulate conditions that address dishonesty.

Suspension

258. The Tribunal then went on to consider whether a sanction of suspension would be appropriate. The Tribunal acknowledged that suspension has a deterrent effect and can be used to send a signal to the doctor, the profession and the public about what is regarded as conduct unbecoming a registered doctor.

259. The Tribunal noted paragraph 92 of the SG which provides that:

92 Suspension will be an appropriate response to misconduct that is so serious that action must be taken to protect members of the public and maintain public confidence in the profession. A period of suspension will be appropriate for conduct that is serious but falls short of being fundamentally incompatible with continued registration (ie for which erasure is more likely to be the appropriate sanction because the tribunal considers that the doctor should not practise again either for public safety reasons or to protect the reputation of the profession).

260. The Tribunal considered that misconduct was so serious in this case that it is fundamentally incompatible with continued registration.

261. The Tribunal noted paragraph 97e of the SG as referred to by Mr Birrell which advises that suspension may be appropriate when there is no evidence that demonstrates remediation is unlikely to be successful. The Tribunal bore in mind that there is no evidence of remediation of the misconduct. The Tribunal noted that Dr Wilson during the period of suspension has not been precluded from undertaking courses or learning.

262. The Tribunal also noted that paragraph 97g of the SG as referred to by Mr Birrell advises that suspension may be appropriate where the Tribunal is satisfied that the doctor has insight and does not pose a significant risk of repeating behaviour. However, the Tribunal found and expressed in its determination on impairment that there is no insight nor remediation and that there was a real risk of repetition of the misconduct if Dr Wilson found herself in similar circumstances in the future.

263. The Tribunal determined that suspension would not be appropriate and would not sufficiently mark the gravity of its findings.

Erasure

264. The Tribunal therefore determined that erasure was the appropriate and proportionate sanction.

265. In arriving at this view, the Tribunal considered that the following paragraphs of the SG were engaged.

109 Any of the following factors being present may indicate erasure is appropriate (this list is not exhaustive).

a A particularly serious departure from the principles set out in Good medical practice where the behaviour is difficult to remediate.

b deliberate or reckless disregard for the principles set out in Good medical practice and/or patient safety.

...

d Abuse of position/trust (see Good medical practice, paragraph 81: ‘You must make sure that your conduct justifies your patients’ trust in you and the public’s trust in the profession’).

...

h Dishonesty, especially where persistent and/or covered up

...

j Persistent lack of insight into the seriousness of their actions or the consequences.

...

128 Dishonesty, if persistent and/or covered up, is likely to result in erasure

266. Accordingly, the Tribunal has directed that Dr Wilson’s name be erased from the medical register. It considered that this was the only sanction which promotes and maintains public confidence in the profession, and promotes and maintains proper professional standards and conduct for members of the profession.

Determination on Immediate Order - 31/05/2024

267. Having determined that Dr Wilson’s name be erased from the medical register, the Tribunal has considered, in accordance with Rule 17(2)(o) of the Rules, whether Dr Wilson’s registration should be subject to an immediate order.

Submissions

268. On behalf of the GMC, Mr Birrell submitted that an immediate order of suspension should be imposed, and he invited the Tribunal to revoke the interim order currently in place.

269. Mr Birrell referred the Tribunal to paragraph 172 onwards of the SG. He submitted that paragraph 173 of the SG was relevant. He submitted that this was a very serious case where immediate action must be taken to protect public confidence in the profession. He submitted that the public would be very surprised to learn that a doctor who has been suspended for approaching two years and who had then been struck off were permitted to

return to practice pending an appeal period. Mr Birrell also added that this was not a case where the doctor needs to put their clinical affairs in order.

270. Dr Wilson submitted that the rules should be followed and that if there is to be an immediate order she would like written confirmation immediately.

The Tribunal's Determination

271. The Tribunal had regard to the relevant paragraphs of the SG from 172 – 178, particularly:

172 The tribunal may impose an immediate order if it determines that it is necessary to protect members of the public, or is otherwise in the public interest, or is in the best interests of the doctor. The interests of the doctor include avoiding putting them in a position where they may come under pressure from patients, and/or may repeat the misconduct, particularly where this may also put them at risk of committing a criminal offence. Tribunals should balance these factors against other interests of the doctor, which may be to return to work pending the appeal, and against the wider public interest, which may require an immediate order.

173 An immediate order might be particularly appropriate in cases where.. they have abused a doctor's special position of trust, or where immediate action must be taken to protect public confidence in the medical profession.

178 Having considered the matter, the decision whether to impose an immediate order will be at the discretion of the tribunal based on the facts of each case. The tribunal should consider the seriousness of the matter that led to the substantive direction being made and whether it is appropriate for the doctor to continue in unrestricted practice before the substantive order takes effect.

272. The Tribunal considered that given the seriousness of its findings and that it had found that Dr Wilson's conduct was fundamentally incompatible with continued registration and that there is a risk of repetition, an immediate order of suspension is necessary to uphold public confidence in the profession.

273. This means that Dr Wilson's registration will be suspended from today. The substantive direction of erasure will take effect 28 days from the date on which written notification of this decision is deemed to have been served, unless an appeal is made in the interim. If an appeal is made, the immediate order will remain in force until the appeal has concluded.

274. The interim order is hereby revoked.

275. That concludes the case.

ANNEX A – 29/05/2024

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ANNEX B – 29/05/2024

Application to admit supplementary witness of Mr F

GMC submissions

276. On Day 1 of the hearing, Mr Birrell made an application to submit into evidence a supplemental witness statement from Mr F, in accordance with Rule 34 of the Rules. He also provided a written skeleton argument to the Tribunal in advance of making the application.

277. Mr Birrell submitted that the supplemental statement was disclosed to Dr Wilson on 15 December 2023 but left out of the hearing bundle due to an administrative error. He submitted that it was fair to correct this mistake. He submitted that the supplemental statement was relevant and that it was fair to admit it into evidence.

278. In his skeleton argument, Mr Birrell submitted that the supplemental statement was clearly relevant as it directly relates to paragraphs 10 and 12 of the Allegation and the bogus reference purporting to come from Dr D which was provided to Interact Medical Ltd. He submitted that paragraph 3 of the statement makes it clear that Dr Wilson provided a bogus email address for Dr D, and paragraphs 7 to 9 make it clear that Interact Medical corresponded with 'Dr D' using the bogus email address and that 'Dr D' provided a reference on 4 April 2022.

279. Mr Birrell submitted that there is no unfairness because the statement was disclosed to Dr Wilson on 15 December 2023 in accordance with case management directions. Furthermore, Dr Wilson would have the opportunity to test the evidence of Mr F when he attends for cross examination. He submitted that Dr Wilson was seeking to exploit a simple administrative oversight to her advantage.

Submissions on behalf of Dr Wilson

280. Dr Wilson submitted that the supplemental statement of Mr F should not be admitted into evidence.

281. Dr Wilson submitted that Case Management deadlines were set in February 2024 and that the GMC has missed these deadlines. She submitted that the GMC has breached Case Management directions and the Civil Procedure Rules 1998.

282. Dr Wilson submitted that she was directly discriminated against by Mr Birrell by suggesting she was seeking to exploit an administrative oversight to her advantage. She

commented that it was in the Code of Conduct for barristers not to abuse their position and duty and said his comments were abusive and discriminatory towards her.

283. Dr Wilson submitted that to admit the supplemental statement after the deadline for documents was a GMC attempt to breach Article 6 of the Human Right Act 1998.

284. Dr Wilson submitted that this was not the only breach the GMC had committed and submitted that it had failed to meet the deadline set by Case Management for skeleton arguments. She submitted that the GMC then changed the deadline suddenly without her agreement. Dr Wilson went on to submit that the GMC ‘falsificated’ the original decision of the last interim orders tribunal from 10 May 2024 and addressed the Tribunal in relation to what she submitted were various procedural irregularities and breaches. She submitted it was illegal to change decisions after the date of the tribunal and that it was also a breach of Section 4 of the Fraud Act 2006, by abuse of position, as well as a breach of ‘Supreme Court’ Rules.

285. Dr Wilson submitted that there was a term in war known as the ‘doctrine of clean hands’ and submitted that this means the GMC should have clean hands themselves before making any allegations towards other parties.

286. Dr Wilson submitted that there were no clinical concerns raised about her. She submitted that her hearing was a clear case of victimisation, harassment and bullying by the GMC and EFLT.

The Tribunal’s Decision

287. The Tribunal had regard to Rule 34 of the Rules, which provides:

‘The Committee or a Tribunal may admit any evidence they consider fair and relevant to the case before them, whether or not such evidence would be admissible in a court of law.’

288. The Tribunal was mindful that the supplemental witness statement was disclosed to Dr Wilson in December 2023 and that its exclusion from the hearing bundle arose due to an administrative error. It noted that Mr Birrell confirmed that there were no new matters contained within the supplemental statement of which Dr Wilson was not aware, and that it was a statement provided for further clarification.

289. The Tribunal determined that it was fair to admit the supplemental statement into evidence as it was relevant to the case. It considered that there would be no unfairness to Dr Wilson as she has had it for some time.

290. The Tribunal therefore granted the application.

ANNEX C – 29/05/2024

Application that Mr Birrell be replaced as GMC Counsel

Dr Wilson's submissions

291. On Day 3 of the hearing, Dr Wilson submitted that Mr Birrell should be replaced as counsel for the GMC.

292. In summary, Dr Wilson submitted that Mr Birrell had shouted at her on Day 2 of the hearing, in front of everybody. She submitted that he had used discriminatory and abusive language towards her and breached numerous Civil Procedure Rules 1998. She submitted that Mr Birrell's further participation would risk a real possibility of an unfair trial and would breach her Article 6 rights under the Human Rights Act. She submitted that she had made a formal complaint about Mr Birrell.

GMC submissions

293. Mr Birrell told the Tribunal that he had considered his professional duties and submitted that he believed he could continue acting in this case, notwithstanding the complaint made by Dr Wilson about him. He submitted that if it were the case that a doctor or any registrant could derail proceedings by complaining about the advocate for the other side, then this would set a dangerous precedent.

The Tribunal's decision

294. On Day 2 of the hearing, when Dr Wilson said that Mr Birrell had shouted at her, the Legally Qualified Chair put on record that the Tribunal had not heard such language from Mr Birrell. It considered that Mr Birrell simply asked in a polite way not to be interrupted by Dr Wilson. At no time did Mr Birrell shout at Dr Wilson.

295. The LQC also reminded Dr Wilson that the only language that the Tribunal has had to address was one comment made by Dr Wilson to a witness.

296. The Tribunal noted that Dr Wilson had advised she had made a formal complaint about Mr Birrell, which she is entitled to do so. However, the Tribunal did not see or hear anything to warrant such a complaint.

297. Accordingly, the Tribunal refused the application.