PUBLIC RECORD

Dates: 21/09/2026 - 02/10/2026
05/11/2026 – 06/11/2026

Doctor: Dr Parmis LAMEI JAVAN

GMC reference number: 8003519

Primary medical qualification: MBBS 2023 University of Central Lancashire

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

Summary of outcome
Suspension 2 months

Tribunal:

Legally Qualified Chair	Mrs Ruth Curtis
Lay Tribunal Member:	Mr Amit Jinabhai
Registrant Tribunal Member:	Dr Andy Cohen

Tribunal Clerk:	Rachel Horkin 21/09/2026 – 01/10/2026 Jack Coupland 02/10/2026 Rachel Horkin 05/11/2026 – 06/11/2026

Attendance and Representation:

Doctor:	**Not present, not represented**
GMC Representative:	Mr Mark Monaghan, 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.

Protecting the Public

Throughout the decision making process the tribunal has borne in mind the statutory duty as set out in s1(1) of the Medical Act 1983 (the 1983 Act) to protect the public. The tribunal has considered the relevance and impact on each of the three distinct parts of public protection to protect, promote and maintain the health, safety and well-being of the public, to promote and maintain public confidence in the medical profession, and to promote and maintain proper professional standards and conduct for members of that profession.

Determination on Facts - 01/10/2026

Background

1. Dr Lamei Javan qualified in 2023 and at the time of the events was practising as a Foundation Year 1, junior doctor in the Paediatrics department with the Women's, Children, and Clinical Services at Northwick Park Hospital in London.

2. The allegations that have led to Dr Lamei Javan's hearing relate to her conduct. It is alleged by the General Medical Council (GMC) that between August 2024 and March 2025, Dr Lamei Javan made posts and comments on social media which were dishonest, inflammatory, seriously offensive and/or motivated by racial/religious hostility and likely to cause alarm to patients and the public. It is also alleged that, on two occasions in 2024, whilst working at Northwick Park Hospital, Dr Lamei Javan failed to follow the Trust's policy in respect of her absences from work, was dishonest about one absence and failed to cooperate with an internal Trust investigation into these matters.

The outcome of applications made during the facts stage

3. On the first day of the hearing the Tribunal agreed to the GMC's application, made pursuant to Rule 31 of the GMC (Fitness to Practise Rules) 2004 as amended (the Rules), that service had been affected and to proceed in Dr Lamei Javan's absence. The Tribunal's full decision on the application is included at Annex A.

4. On day 4 of the hearing, following Dr Lamei Javan not attending to give evidence at the facts stage when she had indicated that she would do so, the Tribunal agreed to the GMC's application made pursuant to Rule 31 of the Rules to proceed in Dr Lamei Javan's absence. The Tribunal's full decision on the application is included at Annex B.

The Allegation and the doctor's response

5. The Allegation made against Dr Lamei Javan is as follows:

That being registered under the Medical Act 1983 (as amended):

1. You had an 'X' account with the username 'Parmis' with the handle 'XXX'.
   To be determined

2. On or around 6 August 2024, you were working as a Foundation Year 1 doctor for London NorthWest University Healthcare NHS Trust ('The Trust') at Northwick Park Hospital ('the Hospital') and you posted the following from the account at paragraph 1:

   a. 'Tonight the hospital I am working at will be targeted and looted by the riots in the UK. I hope the staff and patients are kept safe.'
      To be determined

   b. 'I am getting a lot of hateful comments for simply telling the truth that my hospital has been threatened by the Islamists. Even the local Labour Party gave out a statement saying this. I pray the police will push them away but who knows what will happen. This is NOT a reflection of the British patriots. This is a judgement on those wanting to wage war on the West.'
      To be determined

   c. In response to User A you commented:

      i. 'The security sent the staff a head's up because the organised rioters gave us a warning.'
         To be determined

      ii. 'IDK but the first area they would come across is the maternity ward. It's already stressful enough being pregnant let alone people trashing your ward whilst you are in labor.'
         To be determined

3. You knew when you made the posts at paragraph 2 that:

   a. staff had not been informed there was a warning about threats to the Hospital;
      To be determined

   b. the content was inflammatory and/or may cause alarm to patients and/or the public.
      To be determined

4. Your actions at paragraph 2b in saying the hospital had been threatened by Islamists, and at paragraph 2ci were dishonest by reason of paragraph 3a.
To be determined

5. Your comments at paragraph 2b were:

   a. seriously offensive; and
   To be determined

   b. motivated (in whole or in part) by racial/ religious hostility.
   To be determined

6. On or around 27 September 2024 you posted on X, a statement which included the comment, 'I am a physician and my former employer which is the NHS in the UK just yesterday excluded me from work permanently for simply condemning Hamas on Twitter (x).'
To be determined

7. You knew when you posted the comment at paragraph 6 that:

   a. you had not been excluded from work by the Trust;
   To be determined

   b. the Trust investigation was regarding the posts at paragraph 2.
   To be determined

8. Your actions at paragraph 6 were dishonest by reason of paragraph 7.
To be determined

9. On 9 October 2024 at around 13:30, you attended a meeting with your educational supervisor Dr B ('the Meeting') and you provided an account as to your whereabouts of that morning in that you stated, words to the effect of, that you:

   a. had not attended the morning handover as you had been sent to arrange urgent ultrasounds;
   To be determined

   b. had not attended the ward round as you had several other tasks to complete;
   To be determined

   c. had left the ward early at 11:30 due to anxiety about the Meeting.
   To be determined

10. You knew when you made the statements at paragraph 9 that:

a. you had not attended work prior to the Meeting;
To be determined

b. you had not reported your absence in line with Trust policy.
To be determined

11. Your actions at paragraph 9 were dishonest by reason of paragraph 10.
To be determined

12. A formal Trust investigation ('the Investigation') that commenced on 21 August 2024 considering your posts at paragraph 2, was expanded:

a. on 1 October 2024 to consider the post at paragraph 6;
To be determined

b. on 14 October 2024, to consider the probity concerns as set out at paragraph 9.
To be determined

13. You failed to cooperate with the Investigation in that you stated words to the effect of:

a. you would not attend a disciplinary hearing convened as a result of the Investigation outcome ('the Hearing') on 11 November 2024;
To be determined

b. you would not attend a rearranged Hearing on 20 November 2024 as you preferred not to;
To be determined

c. you would not attend a rearranged Hearing on 5 December 2024 due to sickness.
To be determined

14. In November 2024, you:

a. on 5 November 2024, failed to report your sickness absence in line with Trust policy;
To be determined

b. on 6 November 2024 did not attend work and when Dr B asked you by email to call to report your absences stated, 'I am not required to call you when I am absent from work. Please do not contact me when I am not working.'
To be determined

c. on 12 November 2024 you were due to have a meeting with Dr C and you:

i. failed to respond to the request for the meeting;
To be determined

ii. when Dr C tried to initiate a conversation with you, you refused to engage with them;
To be determined

iii. stated that everyone was annoying you with multiple emails and you had no intention of replying, or words to that effect.
To be determined

d. on 23 November 2024 at a meeting with Dr C you were asked to follow Trust policy and you:

i. stated you were no longer interested in speaking with them, or words to that effect;
To be determined

ii. left the room.
To be determined

15. On or around 24 March 2025, you were interviewed for an episode of 'XXX' which was broadcast on YouTube and you stated words to the effect of:

a. that you were punished by the Trust for condemning Hamas;
To be determined

b. that you were accused by the Trust of having a mental illness for posting about Israel;
To be determined

c. that you had been 'fired' by the Trust;
To be determined

d. that the Trust HR department were 'like Nazis';
To be determined

e. that the Trust HR department were 'true Hamas supporters' and were probably hired by Qatar;
To be determined

f. Qatar definitely had some assets or stakes in the Trust.
To be determined

16. You knew when you made the comments at paragraph 15a – c that:

    a. the Investigation was regarding the posts at paragraph 2;
    To be determined

    b. you had not been accused by the Trust of having a mental illness for posting about Israel;
    To be determined.

    c. you had resigned from the Trust.
    To be determined

17. Your comments at paragraph 15 a – c, were dishonest by reason of paragraph 16.
    To be determined

18. Your comments at paragraphs 15 d – f were:

    a. seriously offensive; and
    To be determined

    b. motivated (in whole or in part) by racial/ religious hostility.
    To be determined

And that by reason of the matters set out above your fitness to practise is impaired because of your misconduct. To be determined

Witness evidence

6. The Tribunal received oral evidence on behalf of the GMC from the following witnesses:

- Dr C, a Consultant Paediatrician at the Trust, virtually on 22 September 2026. Their witness statement was dated 30 June 2026;
- Ms E, HR Business Partner at the Trust, virtually on 23 September 2026. Their witness statements were dated 5 June 2025, 20 May 2026 and 10 July 2026;
- Mr F, the Maintaining High Professional Standards ('MHPS') investigating officer and Head of Nursing for Palliative and End of Life Care at the Trust, virtually on 23 September 2026. Their witness statement was dated 4 June 2025;
- Dr B, Dr Lamei Javan's Educational Supervisor and Consultant Paediatrician at the Trust, virtually on 23 September 2026. Their witness statements were dated 03 July 2025 and 14 May 2026;
- Ms G, Chief People Officer at the Trust, virtually on 24 September 2026. Their witness statement was dated 12 May 2026.

7. The Tribunal also received evidence on behalf of the GMC in the form of witness statements from the following witness who the Tribunal wished to call to give oral evidence, but who was not available to give oral evidence:

- Dr H, Associate Medical Director and Consultant Paediatrician at the Trust. Their witness statement was dated 4 June 2025.

8. Dr Lamei Javan provided a statement entitled '*Response to the allegations*' and a '*Response to the statements of witnesses*' which was provided by her legal representative as part of their remit to assist in the preparation of the hearing. Dr Lamei Javan indicated that she would attend the hearing to give oral evidence but did not do so.

9. In her response to the allegations Dr Lamei Javan made admissions to some of the paragraphs of the Allegation. As she was not present to formalise any admissions at the hearing the Tribunal did not take these written admissions as formal admissions and instead considered each paragraph of the Allegation individually in order to determine whether it had been proved.

10. The Tribunal had regard to the documentary evidence provided by the parties. This evidence included, but was not limited to, the following:

- Screenshots of Dr Lamei Javan's X account and posts dated 6 August 2024;
- Emails between Dr H and Dr Lamei Javan dated between 6 and 7 August 2024;
- Email from Dr Lamei Javan to Ms E dated 07 August 2024;
- Trust statement of Dr H dated 19 August 2024;
- Trust MHPS investigation report and appendices dated 27 November 2024;
- Email from the Trust to Dr Lamei Javan including Terms of Reference for the Investigation dated 22 August 2024;
- Correspondence from Dr I, Divisional Medical Director at the Trust to Dr Lamei Javan dated 11 October 2024 advising of working restrictions;
- Emails between Dr Lamei Javan and the Trust regarding disciplinary meetings dating between September and November 2024;
- Transcript of the YouTube interview on '*XXX*' with Dr Lamei Javan;
- Dr Lamei Javan's resignation letter to the Trust dated 03 December 2024.

The Tribunal's approach

12. In reaching its decision on the facts, the LQC advised that the Tribunal will apply the civil standard of proof. This means that the Tribunal must decide whether, on the balance of probabilities, the GMC is able to prove it is more likely than not that the matters occurred as alleged. The burden of proof rests with the GMC and it is for the GMC to prove the case that it is presenting against the doctor. There is no burden on the doctor to prove or disprove anything.

13. The Tribunal should have regard to the whole of the evidence and form its own judgement about the witnesses, and which evidence is credible and reliable, and which is not. In assessing credibility, the Tribunal should not assess a witness's credibility exclusively on their demeanour when giving evidence, but their veracity should be tested by reference to objective facts proved independently and to the documents in the case. The LQC referred the Tribunal to *R (Gopalkrishnan) v GMC [2016] EWHC 1247* which confirms that lies in themselves, do not necessarily mean that the entirety of the evidence of a witness should be rejected. Credibility can be divisible. Further, the fact that a witness gives inconsistent evidence before a Tribunal is not necessarily fatal to their credibility. Inconsistency is one factor to be weighed in the balance.

11. The LQC advised the Tribunal that they are entitled to draw proper inferences, that is to come to common sense conclusions based upon the evidence which they accept as reliable; but it must not speculate. Similarly, it must not speculate about what other evidence there might have been.

Dishonesty

12. The LQC referred the Tribunal to the case of *Ivey v Genting Casinos (UK) Limited (t/a Crockfords Club) [2017] UKSC 67*, which sets out the legal test for dishonesty:

1. what was the doctor's actual state of knowledge or belief as to the facts; and
2. was their conduct dishonest by the standards of ordinary decent people.

If an ordinary person would call the acts dishonest then the test is met and the acts are dishonest whether or not the doctor realised that.

Seriously Offensive/Racially motivated

13. The Allegations include social media posts which allegedly contain inflammatory or racially motivated language. For allegations of racism, at the facts stage the LQC advised the Tribunal to take the following 4 stepped approach:

1) Identify precisely what was said/done. Consider what were the actual words used and what is the surrounding context, consider the intended audience as well as the broader circumstances within which the conduct occurred. This should be evidence based. Labels are not helpful and should be avoided.

2) Identify whether any protected characteristics are engaged. The Equality Act 2010 protects people from being discriminated against as a result of their race or religion. The Tribunal should identify if the conduct is directed towards a person or a specific group of people who are afforded protection under the Act. If the language is directed towards a government, state or is a political issue then there may be no protected characteristic engaged.

3) Identify the misconduct. The LQC advised the Tribunal to consider what has happened and whether it amounts to discrimination, harassment or some other form of misconduct such as a breach of standards.

   a) Discrimination is the unfair or prejudicial treatment of individuals and groups based on protected characteristics.

   b) Harassment is behaviour, which is intended to, or has the effect of violating a person's dignity or creating an intimidating, hostile, degrading or humiliating or offensive environment.

4) Consider European Convention on Human Rights ('ECHR'). The LQC advised the Tribunal to consider 3 steps:

   a) Are any convention rights engaged? The LQC advised the Tribunal of the relevant rights, namely Article 9, right to hold religious beliefs and Article 10 right to freedom of expression. The law generally protects the belief itself, but as part of the regulatory process the Tribunal may scrutinise the way the belief is expressed and its consequences. Political speech is afforded the highest level of protection under Article 10.

   b) What type of expression is involved? The Tribunal should consider what's the real target of expression, is it directed at religion, ideology, state, or political movement, or is it directed at people with protected characteristics?

   c) If convention rights are engaged, is the interference with the convention rights justified and proportionate? The LQC advised the Tribunal that Article 10 includes the freedom to hold opinions and to receive and impart information and ideas without interference by a public authority. However, this is a qualified right and subject to formalities, conditions, restrictions or penalties as are '*prescribed by law*'. That involves considering whether the interference is in pursuit of a legitimate aim and whether the interference is a proportionate means of achieving that aim. The Tribunal should consider what the legitimate aim of restricting this doctor's expression is. The Tribunal may wish to consider the context, audience and impact of the statement and ask whether it created a hostile environment for colleagues and/or patients. For regulatory intervention to be justified and proportionate the Tribunal should balance Article 10 against discrimination/harassment, professional standards and public confidence.

14. The LQC referred to the case of *Husain v Solicitors Regulation Authority [2025] EWHC 1170* which was a case about antisemitic views**.** It is clear that political speech is protected up to a certain point until it demonstrates hostility towards a person or a group of people.

15. The LQC advised the Tribunal that it is a high bar before a regulator or Tribunal should interfere with the Article 10 rights of a professional. The LQC further referred to the case of *Holbrook v BSB 2025* and that comments should not merely be offensive but should be seriously offensive and/or seriously inappropriate which was stated to be "*gratuitous*

personal abuse, derogatory racist or sexist language" to justify adverse findings that interfere with Article 10 rights.

The Tribunal's analysis of the evidence and findings

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

Paragraph 1

17. As part of the GMC bundle of evidence the Tribunal was provided with screenshots of the X posts which showed the social media handle 'XXX'.

18. Further, in her statement Dr Lamei Javan acknowledged that she, *'operated the account identified in this allegation.'*

19. This paragraph of the Allegation is found proved.

Paragraph 2 (a) – (c) (ii)

20. The Tribunal had regard to the screenshots of the X posts contained in the GMC's evidence bundle and was satisfied that the posts show the words referred to in these paragraphs of the Allegation. It further noted that the posts were from the account 'XXX'.

21. In her statement, Dr Lamei Javan admitted these paragraphs of the Allegation,

'*I accept that I posted these words*.'

22. This paragraph of the Allegation is found proved.

Paragraph 3 (a)

23. In determining what Dr Lamei Javan 'knew' regarding the posts at paragraph 2 of the Allegation, the Tribunal first considered the witness statement of Dr H,

> *'I recall that during our meeting on August 2023 around 13:45 Dr Lamei Javan showed me a WhatsApp message on her phone which I think may have been on a residents WhatsApp group which I think may have been from the local Labour party warning about potential unrest in the Harrow area that night.'*

24. The Tribunal considered this account corroborated Dr Lamei Javan's evidence that she had been sent a WhatsApp.

25. The Tribunal also reminded itself of the statement of Ms G,

On 9 August 2024, the Trust held a staff unity event. There was a lot of concern and apprehension among staff about the civil unrest and riots. The Trust is an extremely diverse organisation, and I believe that approximately 70% of staff are from global majority backgrounds. The staff concerns were not limited to what might happen within the hospital buildings. They included personal safety concerns about travelling to and from work, lone travel, lone working, and incidents occurring in different localities.

26. Further, in her oral evidence Ms G confirmed that the reason for the staff unity event was in reaction to the civil unrest that was happening in the local area during this time. The Tribunal was of the view that this further corroborated Dr Lamei Javan's account as the civil unrest was within the hospital's locality which, coupled with the WhatsApp, could have caused her to believe the hospital was to be targeted.

27. The Tribunal also had regard to the MHPS report in which it was written,

'This incident occurred during a period where nationally there were far-right marches and riots taking place, resulting in miscommunication being circulated on social media.'

28. The Tribunal considered the statement of Dr Lamei Javan in which in response to this allegation she wrote,

'I deny that I knew this when I posted. I had encountered and misunderstood information concerning anticipated disorder and believed there was a genuine possibility that the Hospital might be affected''

29. The Tribunal further considered the statement of Mr F from his meeting with Dr Lamei Javan on 12 September 2024 in which he wrote:

'she stated that it was early in the morning, and she was stressed due to her starting a new job, and not thinking clearly. She stated that once the possible impact of the posts was raised with her, she took the posts down immediately.'

30. The Tribunal noted the evidence from various hospital staff detailing that there was no threat on the Hospital but considered that this did not assist with determining the allegation which was whether Dr Lamei Javan knew this. Taking all of this evidence into account the Tribunal was satisfied that there was a WhatsApp message as detailed in Dr H' statement and that it was more likely than not that Dr Lamei Javan had been sent information via social media which had led her to believe that there was civil unrest in the local area which could target the hospital. Further, the Tribunal was satisfied that Dr Lamei Javan would not have known, early in the morning before her shift for work, what hospital staff had or had not been informed about when she made the posts at paragraph 2 of the Allegation.

31. This paragraph of the Allegation is found not proved.

Paragraph 3 (b)

32. This allegation relates to whether Dr Lamei Javan knew that the posts were inflammatory when she posted them. In determining what Dr Lamei Javan 'knew' regarding the posts at paragraph 2 of the Allegation, the Tribunal first considered the witness statement of Dr H who corroborates that Dr Lamei Javan showed her a WhatsApp and that it was maybe from the local Labour party. She states that Dr Lamei Javan had informed her that:

> *'Without checking the accuracy of the posts, she reposted them onto her X account.'*

33. The Tribunal bore in mind that in Dr H' Trust investigation statement she said about when she was informed about the post on X:

> *'…They appeared to involved reposting messages from Tommy Robinson and also stating that the hospital she was working at was being threatened by Islamists.'*

The Tribunal reminded itself that it was not provided with copies of any reposted posts from 'Tommy Robinson' and did not receive any evidence clarifying who Tommy Robinson was. However, it noted that this evidence supported Dr Lamei Javan's account that she was reposting information without checking its accuracy.

34. The Tribunal reminded itself that Dr Lamei Javan accepted in her statement that:

> *'… that the content was inflammatory and capable of causing alarm.'*

35. The Tribunal reminded itself that the allegation is put that Dr Lamei Javan knew when she made the posts that the content was inflammatory. The Tribunal was of the view that Dr Lamei Javan's acceptance that the content was inflammatory was made in hindsight and this is corroborated by the evidence of Mr F in his interview with Dr Lamei Javan shortly after the posts were put on X. The Tribunal concluded that Dr Lamei Javan did not know that when she made the posts that the content was inflammatory and/or may cause alarm to patients and/or the public, although she later accepted that it did. It was of the view that the evidence suggested that Dr Lamei Javan was reposting information which she believed to be true and did not consider at the time whether the posts could cause alarm to patients and/or the public.

36. Accordingly, this paragraph of the allegation is found not proved.

Paragraph 4

37. Given that the Tribunal has found paragraph 3a of the Allegation not proved, the Tribunal could not establish if Dr Lamei Javan's actions by reason of paragraph 3a were dishonest. This paragraph of the Allegation is, therefore, found not proved.

Paragraph 5 (a)

38. The Tribunal noted that in her statement Dr Lamei Javan accepted that her words were inflammatory, inappropriate and capable of causing serious offence or fear. She apologised and removed them when challenged by Dr H on the date they were posted. She stated that she would leave the Tribunal to determine whether the legal threshold of 'seriously offensive' is established.

39. The Tribunal considered the 4 steps as outlined above in the legal advice.

40. The evidence before the Tribunal indicated that these X posts were made in the context of wider national civil unrest and misinformation about the unrest on social media.

41. The Tribunal had regard to the specific wording of the X posts, it noted that Dr Lamei Javan had used inflammatory words such as '*wage war on the west*'. The post appeared to pass judgement upon '*Islamists'*. The Tribunal noted that there was no legal definition of the word '*Islamists'* and that Mr Monaghan, Counsel for the GMC did not seek to put a specific definition on that term. The Tribunal consulted the Oxford Learners Dictionary definition of the word which stated, *"a person who believes that political systems should be based on the teachings of Islam".* The Tribunal noted Mr Monaghan's submissions that 'Islamist' *"singles out a particular group of people by reference to their religion".* The Tribunal, as three members of the public, had its own collective, subjective view of what the word '*Islamists'* meant. However, given that the meanings of words develop and change over time the Tribunal utilised a reliable public facing source to provide a more objective view. It considered the Home Office website: Statutory guidance, Glossary of terms, Updated 6 March 2024 which states,

> *Islamist terrorism*
> *Is the threat or use of violence as a means to establish a strict interpretation of an Islamic society. For some this is a political ideology which envisions, for example, the creation of a global Islamic caliphate based on strict implementation of shari'ah law. Many adherents believe that violence (or jihad as they conceive it) is not only a necessary strategic tool to achieve their aims, but an individual's religious duty. In the UK the Islamist terrorist threat comes overwhelmingly from those inspired by, but not necessarily affiliated with, Daesh and/or al-Qa'ida, but they operate within a wider landscape of radicalising influences as set out in the government's response to the Independent Review of Prevent. Islamist should not be interpreted as a reference to individuals who follow the religion of Islam.*

42. The Tribunal gave weight to the last sentence that Islamist should not be interpreted as a reference to individuals who follow the religion of Islam. The Tribunal considered that

the word '*Islamists'* would be viewed by different people in different ways however it was satisfied that this definition represents an objective view of how a member of the public may view the word '*Islamist'*.

43. The Tribunal acknowledged that it was unable to question Dr Lamei Javan on her understanding of the word '*Islamists'*. However, it noted that in a subsequent post and interview when referring back to this post, she comments that she had been '*condemning Hamas'*. The Tribunal was of the view that the evidence showed that Dr Lamei Javan's reference to '*Islamists'* was a reference to Islamist terrorists, such as Hamas.

44. The Tribunal next considered if the comments had been directed at a specific group of people afforded protection and determined that, in using the word '*Islamists'* Dr Lamei Javans' posts were not directed at a specific group, that were protected by religion or race under the Equality Act. Looking back at the specific words used in the post. the Tribunal was of the view that this was a political statement by Dr Lamei Javan. It was directed towards a political issue.

45. The Tribunal then proceeded to identify whether the posts amount to discrimination, harassment or some other form of misconduct such as a breach of standards. As there was no protected characteristic engaged the Tribunal was satisfied there was no discrimination or harassment. However, it considered that there could still be misconduct and a breach of the standards of good medical practice.

46. The Tribunal considered if any convention rights were engaged and reminded itself that Article 10 protects an individual's right to hold their own opinions and express them freely without public body interference. The Tribunal considered the reason for Dr Lamei Javan making these posts and considered from the evidence before it that Dr Lamei Javan could have been genuinely worried that there were '*Islamists*' who had threatened the hospital where she worked. She had based her understanding on social media which she had received and there was evidence before the Tribunal to suggest that it was known that there was misinformation on social media around the time. The Tribunal was satisfied that Article 10 was engaged and that these posts were directed towards the political ideology of Islamist terrorists.

47. The Tribunal reminded itself that Article 10 is a qualified right and that interference by a regulator can be legitimate if it is proportionate to maintain professional standards and uphold public confidence.

48. It was clear from the evidence before the Tribunal that the post on X had caused offence. The Tribunal noted that within the posts Dr Lamei Javan stated:

> *'I am getting a lot of hateful comments for simply telling the truth that my hospital has been threatened by the Islamists'*

It was satisfied that the words '*hateful comments'* suggests that some who read the post were offended by it.

49. The Tribunal considered that political speech can often be offensive but that alone is not enough to warrant an interference with an individual's Article 10 rights. It reminded itself of the test as set out in *Holbrook* and that comments should not merely be offensive but should be seriously offensive and/or seriously inappropriate which was stated to be "*gratuitous personal abuse, derogatory racist or sexist language*" to justify adverse findings that interfere with Article 10 rights.

50. The Tribunal determined that, whilst the words may be upsetting or offensive to some, and indeed the evidence suggests that some people did find the X posts offensive, Dr Lamei Javan was not expressing hostility towards Muslims, was not criticising Islamic doctrine and was not posting exclusionary rhetoric targeted at a protected group. Although it clearly did cause offence the Tribunal did not accept that the X posts were seriously offensive because it found that the posts did not go so far as to be derogatory or gratuitously abusive in the words that were used.

51. This paragraph of the Allegation is found not proved.

Paragraph 5 (b)

52. The Tribunal bore in mind its reasoning under Paragraph 5 (a) above and noted that it had not found the post to be directed towards a protected group; race or religion.

53. The Tribunal also reminded itself of its earlier finding that Dr Lamei Javan was reposting posts without checking their accuracy and that her actions were done in the context of wider national civil unrest and its miscommunication on social media.

54. The Tribunal considered Dr Lamei Javan's response to the allegations where she wrote,

> *'I deny that the comment was motivated by hostility toward Muslims, Arabs or any racial or religious group. My intended criticism concerned violent extremism and those I believed were threatening disorder. I recognise that my wording could reasonably have been perceived more broadly and that my intention did not remove its impact.'*

55. The Tribunal noted that this was supported by Dr Lamei Javan later when referring back to these posts during her interview with XXX, Dr Lamei Javan said,

> *'It's a post that said that Hamas is an Islamic death cult. It is. I mean it is, it's nothing else. Hamas is an Islamic death culture…'*

56. Taking all of the evidence into account the Tribunal was satisfied that this post came from a place of judgement made in response to the political actions that were happening

nation-wide at the time rather than being motivated (in whole or in part) by racial/ religious hostility.

57. This paragraph of the allegation is found not proved.

Paragraph 6

58. The Tribunal had regard to the screenshot of the X posts provided by the GMC. It determined that the screenshot displayed a letter to an individual called 'Mr K' which included the statement outlined in paragraph 6 of the allegation. The Tribunal acknowledged that Dr Lamei Javan had accepted that the words were hers and that she had made the posts in her statement.

59. Despite this, the Tribunal questioned the date on which this post is alleged to have been made. Mr F explains in his witness statement Dr J, the MHPS Case Manager, sent him the screenshots on 1 October 2024 and had told him these posts were made on 27 September 2024.

> *'I can confirm the 'Screenshots of posts from X' were dated 27 September 2024. The GMC have asked me to confirm how I became aware of the date of these posts given the screenshots are undated. Dr J sent me screenshots …on 1 October 2024 and explained the posts were made on 27 September 2024.*

60. However, the Tribunal determined it had not been provided with any evidence from Dr J that these posts were made on 27 September 2024.

61. The Tribunal noted that the only evidence it had before it that the post was dated 27 September came from Mr F. Mr F stated that he had been told the posts were dated 27 September and that '*Dr J had screenshotted these posts on X from the account handle XXX.'* The Tribunal determined that it had not received any evidence of this account handle belonging to Dr Lamei Javan, having only received screenshots with the account handle 'XXX' which belonged to Dr Lamei Javan. As the doctor had admitted the post was hers in her statement, this would suggest that Dr J's information that the account handle was '*XXX'* was incorrect. This created a reliability issue in respect of Mr F' witness statement, or in respect of the information provided to him by Dr J. If the account handle had been misinformed, then so too could the date.

62. In his letter sent to Dr Lamei Javan via email on 2 October 2024, expanding the terms of reference for the internal investigation, Mr F wrote

> *On 27 September 2024, it was brought to the attention of the Case Manager, and Associate Medical Director (Education, Research and Development) that Dr Parmis had posted inappropriate and misleading information about the Trust on X.*

63. When questioned by the Tribunal during his oral evidence, Mr F acknowledged that the posts do not explicitly mention the Trust but said that Dr Lamei Javan had made prior posts about where she was training. The inference being that one could ascertain where she was working from reading previous posts and then the current post would bring the Trust into disrepute. The Tribunal noted that it had not been provided with any posts which stated where Dr Lamei Javan was working or training. Given the reliability issues it had already noted with Mr F the Tribunal gave little weight to his assertion. The Tribunal further noted that the same letter of 2 October 2024 states that the post was brought to the attention of the Associate Medical Director, which was Dr H. It noted that there was no mention in Dr H' witness statement of her being alerted to a further post on 27 September which brought the Trust into disrepute.

64. It had not found Mr F to be a reliable witness when giving oral evidence, he was inconsistent. Whilst answering questions from the Tribunal, it became apparent that some information contained within Mr F' witness statement was found to be inaccurate when compared to other objective evidence. In his witness statement, Mr F had stated,

> *"…it appears from [Dr Lamei Javan's] statement that in the future if several verifying sources outlined that something concerning was happening in the world but posting it on social media may receive a negative reaction, she would post it anyway as several sources were saying the same thing."*

The Tribunal noted that this was not corroborated by the transcript of the meeting between Mr F and Dr Lamei Javan. Mr F conceded in his oral evidence that he had come to the wrong conclusion in his witness statement and accepted that Dr Lamei Javan had actually said she would not post such information in the future.

65. The Tribunal noted a number of other discrepancies with the evidence provided by Mr F including that the exhibits referred to in his witness statement did not evidence the statements in this paragraph and that the X handle referenced was not the account shown in the previous screenshots that Dr Lamei Javan admitted to operating.

66. The Tribunal considered that there was other evidence before it which suggested the date that the post was made was later than 27 September 2024. It had regard to the letter from Dr I outlining formal restrictions on Dr Lamei Javan's employment dated 10th October 2024 by email and 11 October by post and email. The Tribunal was of the view that the post in allegation 6 was more likely than not to be in response to this letter. This was corroborated by the post itself which stated, '*the NHS in the UK just yesterday excluded me from work*.' The Tribunal noted that this conclusion is further supported by evidence from Dr B who, in his notes from a meeting on 9th October, had asked Dr Lamei Javan if there had been any more posts made on social media and she had said there had been none.

67. Nevertheless, the Tribunal determined that the phrasing of the allegation '*on or around 27 September*' allowed it to interpret the date flexibly. It therefore determined that

11 October was close enough to 27 September for paragraph 6 of the Allegation to be found proved.

Paragraph 7 (a)

68. To determine what Dr Lamei Javan 'knew' at the time of posting the Tribunal needed to ascertain when the X post in question (which was undated in the evidence bundle) was posted. It had already considered that the date of this post was likely to have been later than 27 September 2024.

69. It had regard to the letter written by Dr I Divisional Medical Director at the Trust dated 11 October 2024 which stated,

> *'Re: Formal Restriction*
>
> *Thank you for meeting with me yesterday.*
>
> *I am writing to confirm the outcome of our meeting held yesterday, Thursday 10 October 2024…'*

70. The Tribunal took from this letter that there had clearly been a meeting between Dr Lamei Javan and Dr I on 10 October and noted that the Tribunal had not been provided with any information about this meeting in terms of what was said.

71. Mr F's evidence to the Tribunal was that Dr Lamei Javan was not '*berated*' and he pointed the Tribunal to the transcript dated 12 September 2024 which was provided in the evidence bundle. The Tribunal noted that there was no reference to '*blood libels*' or '*antisemitic tropes*' as stated by Dr Lamei Javan in her letter to Mr K

72. In her letter to Mr K, Dr Lamei Javan specified that she had been excluded "*just yesterday*". The Tribunal considered what would have caused Dr Lamei Javan to post this some 15 days after the meeting if the timeline as suggested by the GMC were correct; that this letter was in response to her meeting on 12 September 2024. The Tribunal was of the opinion that Dr Lamei Javan may have been referring to another meeting that has not been evidenced; more likely than not the meeting on the 10 October 2024 with Dr I.

73. The Tribunal looked at all of the available evidence as to when this letter was posted to X. The Tribunal therefore was not satisfied that the GMC had appropriately evidenced the date upon which this screenshot of the letter was posted to X, for the Tribunal to be able to determine what Dr Javan 'knew' at the time of posting.

74. The Tribunal looked at Dr Lamei Javan's defence statement in which she wrote:

> *'I was describing my subjective perception of the practical effect of restrictions placed upon me.'*

75. The Tribunal considered whether Dr Lamei Javan 'knew' she had not been excluded when making this post. It noted that the letter entitled *'Re: Formal Restriction'* Dr I wrote:

> *'I explained that as a result of the above concerns I feel it appropriate to restrict your practice to:*
>
> *• Attendance at outpatient clinics only*
> *• Under the direct supervision of a Consultant, meaning you are not to see any patients without direct supervision*
> *• No out of hours work outside of your normal Monday-Friday working hours*
>
> *[…]*
>
> *You told me that you are due to be working at the weekend. I explained that I did not feel this was appropriate and you should attend work Monday – Friday for outpatient clinics only, as discussed…'*

76. The Tribunal was satisfied that these restrictions considerably changed Dr Lamei Javan's working pattern specifically she was only allowed to attend outpatient clinics and was only allowed to work Monday to Friday daytime hours only. The Tribunal considered this to be a significant restriction on the normal practice of a newly qualified doctor as part of her foundation year training.

77. The Tribunal found it highly likely that the practical implications of these restrictions made Dr Lamei Javan feel excluded from the normal clinical practice of being an FY1 which her peers and colleagues would still be undertaking. The Tribunal was satisfied that, faced with this level of significant restriction on her practice, Dr Lamei Javan may have felt that she had been excluded from her work as a foundation year doctor.

78. The Tribunal considered that in using the word '*permanently'* in her letter to Mr K, Dr Lamei Javan may have been exaggerating but, the Tribunal reasoned that it is fair to infer that the doctor had been given no indication within Dr I's letters as to how long she may be under restrictions for and may have had the perception that this could be a permanent restriction (it noted her contract with the Trust was only for one year).

79. The Tribunal is not satisfied that the GMC has passed the evidential threshold to demonstrate that the letter to Mr K was posted on X on 27 September 2024 and is a result of the meeting with Mr F on 12 September. The Tribunal found that it would make more sense for Dr Lamei Javan to have made this post after the restrictions had been placed on her practise and it had concluded that she could have reasonably believed at the time of making the post that she had been excluded from work by the Trust.

80. This Allegation is found not proved.

Paragraph 7 (b)

81. The Tribunal was satisfied that this is a factual Allegation and in her statement Dr Lamei Javan accepted that she knew the Trust investigation was regarding the posts at paragraph 2 of the Allegation. Subsequently this paragraph of the Allegation is found proved.

Paragraph 8

82. The Tribunal considered its previous findings that the date of the X post in question had not been specifically evidenced and that 7(a) had been found not proved. It further noted that 7(b) was accepted as a matter of fact. It had regard to Dr Lamei Javan's actual state of knowledge at the time and noted that she had accepted that the trust investigation was regarding the posts at paragraph 2 of the Allegation. The Tribunal was of the view that Dr Lamei Javan's reference to '*condemning Hamas'* was a clarification of her original post which referenced '*Islamists.'* The Tribunal considered whether 7(b) would be viewed by ordinary decent people as dishonest and determined that it would not.

83. This paragraph of the Allegation is found not proved.

Paragraph 9 (a)

84. The Tribunal has borne in mind the written and oral evidence of Dr B whom it found to be a credible, reliable and internally consistent witness. The Tribunal had regard to his contemporaneous document, 'Personal notes 09/10/2024 about today's meeting with Parmis Lamei Javan' in which Dr B wrote,

> *'After the meeting, I intended to review one of my patients who had been admitted to the High Dependency Unit. I asked her where [the patient] was assigned today, and [Dr Lamei Javan] indicated [the patient] was on the ward. When I asked if the patient was still on the ward, [Dr Lamei Javan] was unsure. I then inquired whether she had attended the morning handover, and she explained that she been sent to arrange some urgent ultrasounds. I noted this as unfortunate, as handover is an important training opportunity, and I asked if the ultrasounds needed to be arranged immediately at 8:00. She confirmed that they did. I was surprised as ultrasound usually does not open at 8:00 am but did not think any more of this until later.*
>
> *I asked her if she had joined the ward round after arranging the ultrasounds, and she replied that she had not, as she had several other tasks to complete. She mentioned that she also had left the ward early at 11 :30 to attend our meeting at 13:30, citing anxiety about the meeting. I reassured her at that point that I am here to support her, and we are always open to exploring additional support options, so there was no need to feel anxious. I also reiterated again the potential benefit of [XXX] support, as I felt it seemed unusual for an educational supervision meeting to cause her enough stress to leave work a few hours early.'*

85. In her statement Dr Lamei Javan wrote,

> *'I accept that I gave this explanation and that it was inaccurate. I should have explained the family emergency and my absence candidly at the outset.'*

86. This paragraph of the Allegation is found proved.

Paragraph 9 (b) and Paragraph 9 (c)

87. The Tribunal was again assisted by the personal notes by Dr B (as set out above) and noted that Dr Lamei Javan accepts this paragraph of the Allegation and does not challenge Dr B's record,

> *'I do not independently recall the exact words, but I do not dispute Dr B's contemporaneous record. I accept that any suggestion that I had been at work completing other tasks was inaccurate.'*

88. These paragraphs of the Allegation are found proved

Paragraph 10 (a) and Paragraph 10 (b)

89. The Tribunal again had regard to statement of Dr B and reminded itself of its previous findings that he was a credible and reliable witness.

90. In her statement Dr Lamei Javan accepts these paragraphs of the Allegation,

> *'I accept that I knew I had not attended work before the meeting and had not reported my absence in the manner required by the Trust procedure.*
>
> *…*
>
> *I accept that I had not attended work before the meeting.'*

91. This paragraph of the Allegation is found proved.

Paragraph 11

92. The Tribunal reminded itself of Dr B's oral evidence that the matter at Allegation 10 had come to light as a result of a protracted conversation between Dr B and Dr Lamei Javan.

93. In her statement Dr Lamei Javan wrote:

'I should have been candid from the outset. I corrected the account during the same conversation and explained the family emergency. I accept responsibility for the failure of candour and do not seek to minimise it.'

94. The Tribunal was satisfied that Dr Lamei Javan knew that she had not attended work prior to the meeting, had not reported her absence and that she should have done so. The Tribunal considered how ordinary decent people would view her conduct and was of the view that her actions at paragraph 9 were dishonest by reason of paragraph 10

95. This paragraph of the Allegation is found proved.

Paragraph 12 (a)

96. The Tribunal had further regard to the letter sent by Mr F to Dr Lamei Javan dated 2 October 2024 in which it is stated that the Trust had widened the scope of the original investigation and stating that misleading and inappropriate information about the Trust was posted on X.

97. The Tribunal reminded itself of its earlier acceptance that the scope of the Trust investigation was widened. However, given its previous finding that the date of the X post as referenced in paragraph 6 of the Allegation was unlikely to have been the 27 September, the Tribunal did not accept on the evidence before it, that the scope of the Trust investigation was widened due to this specific post on X.

98. In reaching this decision the Tribunal had regard to the fact that Dr Lamei Javan did not refer to the Trust in her letter to Mr K and only mentioned that her employer was the NHS. The Tribunal inferred that there may have been another post which referenced the Trust which was posted and led to the expansion of the Investigation.

99. The Tribunal noted that Dr Lamei Javan admits this paragraph of the Allegation in her response to the allegations but as it was unable to question her about this post and specifically the date of the post, it was only proper and correct that the GMC prove to the requisite threshold that this had occurred and the Tribunal was of the view that the GMC had not evidenced that the investigation was expanded as a result of the post in Allegation 6.

100. The Tribunal found this Allegation not proved.

Paragraph 12 (b)

101. When determining this paragraph of the Allegation the Tribunal considered the letter sent by Mr F to Dr Lamei Javan dated 15 October which informed her that the decision had been made by the Trust to widen the scope of the original investigation:

'On 9 October 2024, in your Educational Supervision meeting with B, Consultant Pediatrician, LNWUHT and RNOHT, your supervisor inquired about a patient, and

during that conversation, you provided several false accounts about your whereabouts before it transpired that you had not attended work at all prior to the meeting on 9 October 2024. You subsequently admitted to not reporting your absence as required.'

102. In her statement Dr Lamei Javan accepted this paragraph of the Allegation.

103. The Tribunal found this paragraph of the Allegation proved.

Paragraph 13 (a), Paragraph 13 (b) and Paragraph 13 (c)

104. The Tribunal had regard to the wording of this Allegation in that the doctor 'failed to cooperate' in the disciplinary hearings scheduled for 11 November; 20 November and 5 December.

105. The Tribunal gave consideration to the emails provided in the GMC evidence bundle. In an email sent 7 November 2024 by Ms E to Dr Lamei Javan the doctor is asked to confirm whether she will be attending the hearing scheduled for 11 November 2024. Dr Lamei Javan responded to this email on 10 November 2024 advising that she would not be attending the meeting but that the meeting could go ahead without her.

106. In a further email sent to Dr Lamei Javan by Ms E dated 10 November it was stated that the hearing had been rescheduled for 20 November and asked the doctor, if she had no intentions of attending that meeting to advise her why. Dr Lamei Javan replied on the same day to advise that she preferred not to attend, '*because I have explained my position on this situation.'* but stated that the meeting could go ahead without her.

107. The Tribunal considered that it was not clear from the emails provided that Dr Lamei Javan *must* attend the hearing and the language used in the emails suggests that attendance was optional.

108. Further, when asked by the Tribunal, Ms E, in her oral evidence agreed that the wording in the email of 7 November 2024 suggests that attendance at the hearing was optional. Ms E also accepted in her oral evidence that it was not made explicitly clear to Dr Lamei Javan why the hearings were being rescheduled and that the doctor may not have appreciated that they were being rescheduled in order to secure her attendance.

109. As Dr Lamei Javan did not attend this MPT hearing, the Tribunal was unable to question her and to understand what her mindset was as to why they were being rescheduled.

110. The Tribunal had regard to the email sent to Dr Lamei Javan dated 11 November 2024 in which it was written,

'As per letter sent to you on 24 October 2024…it was outlined that all reasonable steps must be taken to attend the hearing.'

The Tribunal was not satisfied that this position was outlined in the emails that had been sent to Dr Lamei Javan on 7 and 10 November 2024 and was of the view that the emails negated this position, by suggesting that Dr Lamei Javan merely had to inform of her attendance.

111. The Tribunal took the view that Dr Lamei Javan gave a clear reason why she would not be attending the hearing scheduled for 20 November and that the meeting should go ahead without her. The Tribunal found that the doctor was given opportunities to attend the meeting and chose not to. The Tribunal was satisfied that Dr Lamei Javan engaged with the emails that she was sent and that she responded in a timely manner. The Tribunal has determined that her not attending the scheduled hearing does not equate to a failure to cooperate with the hearing and that Dr Lamei Javan was not obstructing the hearing process as she stated that the hearing could go ahead without her.

112. This paragraph of the allegation is found not proved.

Paragraph 14 (a)

113. The Tribunal had regard to the Trust policy, '*Procedure for reporting and certifying absence'* and noted the following paragraph,

> *'6.1.6. Texting or emailing a line manager or leaving messages with colleagues are not normally acceptable methods for an employee to inform his/her manager about absence.'*

114. The Tribunal then considered the statement of Dr B in which he advised that on 5 November 2024 at 06:52 he had received an email from Dr Lamei Javan in which she advised that she was '*on clinic'* but was unwell and would be unable to attend. Dr B wrote,

> *'I responded at 08:17 asking her to call me… I did not receive a phone call from her.'*

115. In her oral evidence, Ms E informed the Tribunal that each department did things differently regarding reporting absences and she stated that in some departments a text or email would be fine. The Tribunal noted that Dr Lamei Javan began her placement in this department on 7 August 2024 and this sickness absence occurred less than three months later.

116. In his written statement, Dr C wrote,

> '*I understand a copy of the sickness and absence policy was provided to Dr Lamei Javan via email on several occasions, however she did not respond to these emails.'*

The Tribunal noted that it had not been provided with any evidence that corroborated this assertion.

117. In her statement Dr Lamei Javan wrote,

> *'At 06:52 on 5 November 2024 I emailed Dr B to report that I was unwell and unable to attend clinic. I accept that I did not subsequently make the telephone call requested under the departmental procedure. I therefore accept failure to use the required method, but I did notify the Trust promptly in writing.'*

118. The Tribunal was satisfied that it was evidenced by Dr B's statement that, whilst Dr Lamei Javan may not have followed the departments preferred approach to absence reporting, she had made timely contact to report her absence and this had been received and acknowledged.

119. Given the evidence provided and Dr Lamei Javan's acceptance, this paragraph of the Allegation is found proved.

Paragraph 14 (b)

120. The Tribunal noted the email between Dr Lamei Javan and Dr B sent on 6 November 2024 at 15.47 by Dr Lamei Javan on which used this language as set out in Allegation 14 (b).

121. In her statement Dr Lamei Javan acknowledged that she had used these words and sent this email. The Tribunal noted that Dr Lamei Javan provided further context behind this statement was that she was on Self Development Time ('SDT')

> *'I was rostered for Self-Development Time, was not sick, was not due in clinic and was not required to be on site. Dr B's supplemental evidence confirms that his initial belief that I was due in clinic was mistaken. I responded to his 15:40 email at 15:47 and clarified that I was on SDT'*

122. This paragraph of the Allegation is found proved

Paragraph 14 (c) (i), 14 (c) (ii) and 14 (c) (iii)

123. The Tribunal had regard to the internal email sent by Dr C to several colleagues including Dr I and Dr B on 12 November 2024 at 12.56. In this email he wrote,

> *'I had emailed her on Friday* (which the Tribunal confirmed with the witness was 8 November 2024) *to schedule a meeting, but I received no response.*
>
> *When I entered the clinic room today to initiate the conversation, she immediately turned away, ignored me, and refused to engage in any discussion. I asked her about the lack of response to my email. She said that we were all annoying her with multiple emails and that she had no intention of replying to anyone.'*

124. The Tribunal considered Dr Lamei Javan's statement in which she wrote,

> *'I accept that I did not engage appropriately and that my response could reasonably have been perceived as a refusal to engage. I was unwell and frustrated, but that does not excuse the manner of my response.'*

125. These paragraphs of the Allegation are found proved.

Paragraph 14 (d) (i) and 14 (d) (ii)

126. In reaching a decision on this Allegation the Tribunal had regard to the letter sent from Dr C to Dr Lamei Javan on 25 November 2024 in which, subsequent to their meeting on 23 November 2024, he wrote,

> *'I clarified that if you continue to disengage and disregard the hospital policy, we will have no choice but to escalate the matter. In response, you stated that you would not attend any further meetings and that we could proceed as we wish. You then said that you are no longer interested in speaking with me and stormed out of the room.'*

127. In her written statement Dr Lamei Javan accepts that she said words to this effect and that she regrets it. Further, she wrote,

> *'I accept that the meeting became difficult and that I should have remained, listened and responded professionally*
> *…*
>
> *I accept that I said this or words to that effect. The statement was abrupt and disrespectful, and I regret it.'*

128. Subsequently these paragraphs of the Allegation are found proved.

Paragraphs 15 (a) – 15 (f)

129. The Tribunal was provided with a transcript of a YouTube video which was transcribed by a third party company. In this transcript Dr Lamei Javan was referred to as PLJ and Ms M, (believed to be the host of this episode) was referred to as Ms M. The Tribunal noted that during the interview it was said:

> 'PLJ *Literally on the second hour of my work, I was called aside by my managers or HR who were saying, "Something extremely serious happened" and I was like, "What's happening? I've not even talked to any patients". I thought in my mind I'd done a mistake or something. They said, "No, it's not like that, it's your social media" and I'm like what did I write that was maybe …? I was freaking out, I was really scared, I was like, "Okay, okay" and then they said, "Show us" and I scrolled down and they said, "This post" and I was like, "What?" It's a post that said that Hamas is an Islamic death*

cult. It is. I mean it is, it's nothing else. Hamas is an Islamic death culture whose role is to only commit atrocities and try to destroy the State of Israel. I was getting punished for condemning Hamas and they were accusing me of being very racist and Islamophobic. Islamophobia is a fake term that was made from the Muslim brotherhood in Egypt to silence any dissident opinions of all the atrocities they do, so no one can speak up, and they accused me of that and it just went downhill. So every day they were making up new excuses. One time they pulled me again in their office, they said, "Oh, you must have a mental illness for just posting about Israel". I said, "No, I don't, that's just something I like to post about" and it got to the point where I would just talk back to them because I was thinking now they are like harassing me and bullying me. So I would say, "Maybe you guys, are the not well people who support Hamas" and it all made sense later on after I left the job. Well they actually ---

[Ms M] *You left the job or they fired you?*

PLJ *So they fired me but it's a bit complicated. They did an investigation. They fired me technically. The outcome was like "you're fired" but I luckily had put in my resignation letter just in the last minute.*

[Ms M] *Okay, good.*

PLJ *So it's both. It's a bit complicated but that's it in a nutshell. After I left it or they fired me – it was both the same outcome, I wasn't going to continue – I later found out that Qatar owns most of the UK, owns most of the public utilities. They don't really own it but they paid for it, so technically they do have a very huge say on it, and HR department was – I have no problems with Arabs so in case this is, like I know this is recorded, I have no problems with Arabs. These are Arabs who support Jihad, they deny anti-Semitism and they were telling me that anti-Semitism is a weapon to unite like for Israel and they were saying complete … I don't want to say these words but they were like Nazis. They were true Hamas supporters, so they were probably hired by Qatar or definitely the hospital or the Trust, which is like a group of hospitals, definitely Qatar had some assets in it or had some stakes in it. So, yeah, that all made sense.'*

130. The Tribunal considered Dr Lamei Javan's statement where she admits to saying these words.

131. Given the evidence before it and the doctors admittance, this paragraph of the Allegation is found proved.

Paragraph 16 (a)

132. The Tribunal noted that, according to the transcript provided, the interview for XXX took place on 24 March 2025. The Tribunal reminded itself that the evidence before it stated that the scope of Trust investigation had been expanded twice in October 2024 and that Dr

Lamei Javan had been put on restricted duties as of 10 October 2024. Therefore, the Tribunal was satisfied that at the time of giving this interview the Trust investigation was not just in relation to the X posts dated on or around 6 August 2024.

133. In her statement of response to the allegations Dr Lamei Javan wrote,

'I perceived the action more broadly at the Time.;'

134. Given that as the evidence before the Tribunal suggest that the Trust investigation had already been expanded by the time that this interview was given and was not solely in relation to the X posts at paragraph 2 of the Allegation, the Tribunal found this paragraph of the Allegation not proved.

Paragraph 16 (b)

135. The Tribunal had regard to the email that Dr H sent to Dr Lamei Javan on 6 August 2024 entitled '*Meeting today about social media posts'*. In this email Dr H wrote,

'You said you had no pre-existing health conditions or emotional concerns…'

136. The Tribunal also noted that in his personal notes, after his meeting with Dr Lamei Javan on 9 October 2024, Dr B wrote,

'I did ask her whether there are any health considerations we should be taking into account and she said there were none.'

137. The Tribunal also saw in Dr B's notes that he had spoken with Dr Lamei Javan about accepting help from XXX but that she had indicated that she preferred to speak to her own family. He stated in his supplemental witness statement that he was concerned with '*XXX',* in respect of Dr Lamei Javan.

138. The Tribunal had regard to the email that Dr B sent to Dr Lamei Javan (and in which several others were CC'd) on 6 November 2024 on the subject of her absence reporting. Dr Lamei Javan had emailed Dr B the day before to advise that she was unwell and would not be attending work that day. In his response email, Dr B wrote

'I will escalate to [XXX] to ensure you are OK."

The Tribunal found the use of the word '*escalate'* to be an odd term to use when referring to a purported concern about someone's wellbeing. The Tribunal was of the view that this was evidence of multiple occasions where Dr Lamei Javan had had her mental health questioned by various Trust staff.

139. The Tribunal considered Dr Lamei Javan's statement in which she wrote, regarding her comments on XXX, that

'It reflected my genuine recollection and interpretation that concerns about my mental health had been raised in connection with my posting'

140. Given the evidence before it the Tribunal determined that it was conceivable for Dr Lamei Javan to have interpreted this situation as having been accused by the Trust of having a mental illness.

141. Subsequently this paragraph of the Allegation is found not proved.

Paragraph 16 (c)

142. The Tribunal was provided with a copy of the email sent from Dr Lamei Javan to Ms E dated 03 December 2024 in which the doctor formally resigned from her FY1 training post in Northwick Park Hospital. A further screenshot provided indicates that the Trust had accepted her resignation by 4 December 2024, some 3 months before the doctor's interview with XXX.

143. In her written statement Dr Lamei Javan accepts that she had resigned from the Trust and she'd had not been dismissed. The Tribunal were therefore of the view that when she made the comments at paragraph 15 a-c (in the interview with XXX) that Dr Lamei Javan did know that she had resigned from the Trust.

144. This paragraph of the Allegation is found proved.

Paragraph 17

145. The Tribunal, having found paragraphs 16 (a) and 16 (b) not proved, only considered whether Dr Lamei Javan had been dishonest in her comments at paragraphs 15 a – c (which were all determined and found proved) by reason of paragraph 16 (c).

146. The Tribunal looked at the wider context to which this paragraph of the Allegation is taken and reminded itself of what Dr Lamei Javan said in the interview. Within the XXX transcript Dr Lamei Javan is recorded to have said,

'PLJ *So they fired me but it's a bit complicated. They did an investigation. They fired me technically. The outcome was like "you're fired" but I luckily had put in my resignation letter just in the last minute.*

[Ms M] Okay, good.

PLJ So it's both. It's a bit complicated but that's it in a nutshell. After I left it or they fired me – it was both the same outcome, I wasn't going to continue…'

147. The Tribunal had regard to Dr Lamei Javan's statement in which she wrote,

> *'I deny that the comments were knowingly dishonest. They were inaccurate, exaggerated and expressed without the care required of a doctor speaking publicly, but they reflected my genuine perception and recollection at the time rather than a deliberate attempt to deceive.'*

148. The Tribunal accepted Dr Lamei Javan's account that she had not been dishonest but that the comments were not an accurate nor full account of the circumstances. The Tribunal then went on to consider whether a member of the public would find that Dr Lamei Javan had been dishonest when stating that she had been 'fired' by the Trust when in fact she had resigned. The Tribunal bore in mind the context of the word 'fired' and that it was qualified in the same segment of the interview that Dr Lamei Javan had 'put her resignation letter' in.

149. The Tribunal reminded itself of its previous findings that in regard to paragraph 7 (a) of the Allegation that Dr Lamei Javan, as a Foundation Year 1 doctor in the Paediatrics department had been effectively excluded from clinical practise on the paediatric ward as a result of the significant restrictions put on her on 10/11 October 2024 and that it had found this allegation not proved. It had accepted that the restrictions could have made Dr Lamei Javan feel excluded. The Tribunal further had regard to the full context and circumstances surrounding Dr Lamei Javan: she was receiving multiple correspondences from various Trust staff in respect of various issues of varying seriousness; she was being asked to attend multiple meetings with various Trust staff to explain and re-explain her behaviour on these issues; she was a newly qualified doctor who had been removed from her recognised foundation year training which would have removed regular contact with her FY 1 peers thereby isolating her from colleagues for an indefinite period of time when she was put on restricted duties. The Tribunal was of the view that an ordinary decent member of the public would not view this as dishonest behaviour.

150. This paragraph of the Allegation is found not proved.

Paragraph 18 (a)

151. In determining whether Dr Lamei Javan's comments that *'the Trust HR department were 'like Nazis'*, *'the Trust HR department were 'true Hamas supporters' and were probably hired by Qatar'* and *'Qatar definitely had some assets or stakes in the Trust'*, were seriously offensive, the Tribunal again adopted the 4 staged approach as outlined in the legal advice. The Tribunal first considered what words were said.

152. The Tribunal reviewed the transcript of the XXX interview and noted that it reports Dr Lamei Javan as saying the following,

> *'These are Arabs who support Jihad, they deny anti- Semitism and they were telling me that anti-Semitism is a weapon to unite like for Israel and they were saying complete…I don't want to say these words but they were like Nazis. They were true Hamas supporters, so they were probably hired by Qatar or definitely the hospital or the Trust,*

which is like a group of hospitals, definitely Qatar had some assets in it or had some stakes in it. So, yeah, that all made sense.

Qatar is an enemy in disguise. I think the mask is off but some people still believe that Qatar is neutral, it's a good mediator and I'm like, "No, no, Qatar is telling Hamas to keep the hostages. It wants to keep it like to continue waging war.'

153. The Tribunal then went on to consider the context in which the specific words were used. There was no evidence before the Tribunal as to what XXX is, who the intended audience is and whether it is intended as a political commentary. The only information that the Tribunal has is that this clip was posted on YouTube which is publicly accessible.

154. The Tribunal moved to stage 2 to consider if the comments made were directed towards a person or specific group who are afforded particular protection under the Equality Act. The Tribunal noted that the comments at paragraph 15 (d) and (e) of the Allegation were made towards the HR department at the Trust. The HR staff members were not identifiable as a result of their race or religion or any other protected characteristic under the Equality Act.

155. As there was no protected characteristics engaged the Tribunal concluded that this was not discrimination nor harassment, but that it could still amount to misconduct. The Tribunal was of the view that 15 (f) was a political statement and that the reference to Qatar in 15 (e) was directed towards a government and political issue.

156. Moving to stage 4, the Tribunal considered that Dr Lamei Javan's Article 10 rights were engaged and reminded itself that a regulator should only interfere with Convention rights if the words used are '*seriously offensive'* in accordance with the case of *Holbrook*.

157. The Tribunal was satisfied that likening the HR department to '*Nazis'* is offensive and is a gratuitously abusive statement in and of itself. The Tribunal noted that Dr Lamei Javan had stated in her statement that:

'I accept that the comments were unsupported, inflammatory, inappropriate and capable of causing serious offence. I retract them and apologise for their impact. I leave the Tribunal to determine whether the legal threshold of 'seriously offensive' is established.'

158. The Tribunal determined that the comments at 15 (d) demonstrate hostility towards a group of her former colleagues, the Trust HR department, and that they are seriously offensive.

159. Regarding paragraph 15 (e) of the Allegation the Tribunal noted that in referring to the Trust HR department as '*true Hamas supporters'*, Dr Lamei Javan had made comments which compared a group Trust staff members to Hamas Supporters. The Tribunal again had its own collective subjective view on 'Hamas' but utilised a reliable public facing source to

determine how an ordinary member of the public would view this term. It referred to the Home Office website which states that Hamas is a 'proscribed terrorist group or organisation'.

160. The Tribunal determined that the comments at 15 (e) demonstrate hostility towards a group of her colleagues, the Trust HR department, and that they are gratuitously abusive and seriously offensive and it is therefore justified and appropriate in these circumstances to interfere with Dr Lamei Javan's Article 10 rights.

161. Regarding paragraph 15 (f) of the Allegation, the Tribunal took the view that the words used could be seen as inflammatory, but they were not directed at a particular individual or group of people and were not seriously offensive but were a political statement about Qatar. It determined that it would not be justified or proportionate to interfere with Dr Lamei Javan's rights under Article 10 in respect of this paragraph of the Allegation.

162. Accordingly paragraph 18 (a) of the Allegation is found proved in regards to paragraph 15 (d) and 15 (e) but not found proved in regard to paragraph 15 (f) of the Allegation.

Paragraph 18 (b)

163. The Tribunal reminded itself that it had not found that the words expressed in 15 (d) – (f) were directed towards a group of people with protected characteristics.

164. It had regard to Dr Lamei Javan's statement in which she said:

> *'I deny that the comments were motivated by hostility toward Arabs, Muslims or any racial or religious group. My intended criticism concerned Hamas, political actors and what I perceived to be state influence.'*

165. Having regard to its previous finding that Dr Lamei Javan's comments at paragraph 15(e) and 15 (f) were political statements, the Tribunal was not satisfied that the GMC has provided evidence that the comments in 15 (d) – (f) were motivated by racial/religious hostility. The evidence from Dr Lamei Javan denied such motivation.

166. Accordingly this paragraph of the Allegation is found not proved.

The Tribunal's overall determination on the facts

167. The Tribunal has determined the facts as follows,

That being registered under the Medical Act 1983 (as amended):

1. You had an 'X' account with the username 'Parmis' with the handle ''XXX".
   Determined and found proved

2. On or around 6 August 2024, you were working as a Foundation Year 1 doctor for London NorthWest University Healthcare NHS Trust ('The Trust') at Northwick Park Hospital ('the Hospital') and you posted the following from the account at paragraph 1:

    a. 'Tonight the hospital I am working at will be targeted and looted by the riots in the UK. I hope the staff and patients are kept safe.'
    Determined and found proved

    b. 'I am getting a lot of hateful comments for simply telling the truth that my hospital has been threatened by the Islamists. Even the local Labour Party gave out a statement saying this. I pray the police will push them away but who knows what will happen. This is NOT a reflection of the British patriots. This is a judgement on those wanting to wage war on the West.'
    Determined and found proved

    c. In response to User A you commented:

        i. 'The security sent the staff a head's up because the organised rioters gave us a warning.'
        Determined and found proved

        ii. 'IDK but the first area they would come across is the maternity ward. It's already stressful enough being pregnant let alone people trashing your ward whilst you are in labor.'
        Determined and found proved

3. You knew when you made the posts at paragraph 2 that:

    a. staff had not been informed there was a warning about threats to the Hospital;
    Determined and found not proved

    b. the content was inflammatory and/or may cause alarm to patients and/or the public.
    Determined and found not proved

4. Your actions at paragraph 2b in saying the hospital had been threatened by Islamists, and at paragraph 2ci were dishonest by reason of paragraph 3a.
Determined and found not proved

5. Your comments at paragraph 2b were:

    seriously offensive; and
    Determined and found not proved

a. motivated (in whole or in part) by racial/ religious hostility.
Determined and found not proved

6. On or around 27 September 2024 you posted on X, a statement which included the comment, 'I am a physician and my former employer which is the NHS in the UK just yesterday excluded me from work permanently for simply condemning Hamas on Twitter (x).'
Determined and found proved

7. You knew when you posted the comment at paragraph 6 that:

a. you had not been excluded from work by the Trust;
Determined and found not proved

b. the Trust investigation was regarding the posts at paragraph 2.
Determined and found proved

8. Your actions at paragraph 6 were dishonest by reason of paragraph 7.
Determined and found not proved

9. On 9 October 2024 at around 13:30, you attended a meeting with your educational supervisor Dr B ('the Meeting') and you provided an account as to your whereabouts of that morning in that you stated, words to the effect of, that you:

a. had not attended the morning handover as you had been sent to arrange urgent ultrasounds;
Determined and found proved

b. had not attended the ward round as you had several other tasks to complete;
Determined and found proved

c. had left the ward early at 11:30 due to anxiety about the Meeting.
Determined and found proved

10. You knew when you made the statements at paragraph 9 that:

a. you had not attended work prior to the Meeting;
Determined and found proved

b. you had not reported your absence in line with Trust policy.
Determined and found proved

11. Your actions at paragraph 9 were dishonest by reason of paragraph 10.
Determined and found proved

12. A formal Trust investigation ('the Investigation') that commenced on 21 August 2024 considering your posts at paragraph 2, was expanded:

    a. on 1 October 2024 to consider the post at paragraph 6;
    Determined and found not proved

    b. on 14 October 2024, to consider the probity concerns as set out at paragraph 9.
    Determined and found proved

13. You failed to cooperate with the Investigation in that you stated words to the effect of:

    a. you would not attend a disciplinary hearing convened as a result of the Investigation outcome ('the Hearing') on 11 November 2024;
    Determined and found not proved

    b. you would not attend a rearranged Hearing on 20 November 2024 as you preferred not to;
    Determined and found not proved

    c. you would not attend a rearranged Hearing on 5 December 2024 due to sickness.
    Determined and found not proved

14. In November 2024, you:

    a. on 5 November 2024, failed to report your sickness absence in line with Trust policy;
    Determined and found proved

    b. on 6 November 2024 did not attend work and when Dr B asked you by email to call to report your absences stated, 'I am not required to call you when I am absent from work. Please do not contact me when I am not working.'
    Determined and found proved

    c. on 12 November 2024 you were due to have a meeting with Dr C and you:

        i. failed to respond to the request for the meeting;
        Determined and found proved

        ii. when Dr C tried to initiate a conversation with you, you refused to engage with them;
        Determined and found proved

iii. stated that everyone was annoying you with multiple emails and you had no intention of replying, or words to that effect.
Determined and found proved

d. on 23 November 2024 at a meeting with Dr C you were asked to follow Trust policy and you:

i. stated you were no longer interested in speaking with them, or words to that effect;
Determined and found proved

ii. left the room.
Determined and found proved

15. On or around 24 March 2025, you were interviewed for an episode of 'XXX' which was broadcast on YouTube and you stated words to the effect of:

a. that you were punished by the Trust for condemning Hamas;
Determined and found proved

b. that you were accused by the Trust of having a mental illness for posting about Israel;
Determined and found proved

c. that you had been 'fired' by the Trust;
Determined and found proved

d. that the Trust HR department were 'like Nazis';
Determined and found proved

e. that the Trust HR department were 'true Hamas supporters' and were probably hired by Qatar;
Determined and found proved

f. Qatar definitely had some assets or stakes in the Trust.
Determined and found proved

16. You knew when you made the comments at paragraph 15a – c that:

a. the Investigation was regarding the posts at paragraph 2;
Determined and found not proved

b. you had not been accused by the Trust of having a mental illness for posting about Israel;
Determined and found not proved

c. you had resigned from the Trust.
Determined and found proved

17. Your comments at paragraph 15 a – c, were dishonest by reason of paragraph 16.
Determined and found not proved

18. Your comments at paragraphs 15 d – f were:

a. seriously offensive;
found proved in regards to paragraph 15 (d) and 15 (e)
found not proved in regard to paragraph 15 (f) of the Allegation.

b. motivated (in whole or in part) by racial/ religious hostility.
Determined and found not proved

And that by reason of the matters set out above your fitness to practise is impaired because of your misconduct. To be determined

Determination on Impairment - 05/11/2026

168. 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 Lamei Javan's fitness to practise is impaired by reason of her misconduct.

169. This determination was handed down in public.

Submissions

170. On behalf of the GMC Mr Monaghan, Counsel, submitted that the Tribunal should consider if Dr Lamei Javan's fitness to practise is impaired on the legal basis of misconduct. Mr Monaghan submitted that her dishonest behaviour towards Dr B, seriously offensive comments made on YouTube, and failure to properly and appropriately communicate with colleagues, amounts to serious misconduct either in isolation or in combination.

171. Mr Monaghan submitted that the GMC does not seek to suggest there is any relevant fitness to practise history.

172. Mr Monaghan reminded the Tribunal that Dr Lamei Javan does not accept that what she told Dr B was dishonest. Mr Monaghan submitted that the circumstances of what was said and the context make it clear that it was dishonest by ordinary decent people's standards. Mr Monaghan stated that the doctor has never given any proper explanation for why she chose to behave in that way. The conduct is capable of amounting to both a lack of candour and a lack of insight. Such issues are relevant and significant because the Tribunal should bear in mind that the question of whether the doctor's fitness to practise is impaired,

is posed and is answered in the present tense. Mr Monaghan reminded the Tribunal of the test set out in the case of *General Medical Council v Meadow [2006] EWCA Civ 1390 (26 October 2006)* that the Tribunal looks forward, not back, but in order to form a view as to the fitness of a person to practise today, the Tribunal will have to take into account the way the doctor has acted in the past.

173. Mr Monaghan submitted that it must be highly relevant in determining if a doctor's fitness to practise is impaired, that first his or her conduct which led to the charge is easily remediable, second, it has been remedied and third that it is highly unlikely to be repeated. Mr Monaghan submitted that the attitude of Dr Lamei Javan to the matters which gave rise to the specific allegations against her is, in principle, something which can be taken into account either in her favour or against her by the Tribunal.

174. Mr Monaghan submitted that in terms of Dr Lamei Javan's behaviour towards others, such as Dr B and Dr C, and in relation to what is proved in terms of the seriously offensive posts, the doctor's attitude in those respects is a matter for the Tribunal to have regard to.

175. Mr Monaghan submitted that it would be an unusual case where dishonesty is not found to impair fitness and that it is the GMC's submission that this is not such an unusual case. Mr Monaghan acknowledged that these are not the most serious matters of dishonesty with which the GMC must deal. Nevertheless, they were matters of dishonesty. Dr Lamei Javan's explanation for failure to take part or be present in a clinical setting was dishonest and that in turn leads to a question whether the doctor, by her failure to comply with Trust policies about absence, creates a situation where patient safety is potentially compromised. Further, Mr Monaghan reminded the Tribunal that there is no explanation for the doctor's choice to tell a series of lies to her educational supervisor.

176. Mr Monaghan reminded the tribunal that it will have to consider whether the doctor is capable of remediation in any significant degree and capable of insight and reflection such as would lead her not to commit dishonest acts in the future. He stated that this assessment is not assisted and is potentially hampered by the fact that the doctor has never given any explanation for her choice to make three false assertions about what had happened that morning, rather than to say that there had been a family emergency, if indeed there had been.

177. In considering the question of impairment more generally, Mr Monaghan submitted that the Tribunal should bear in mind that any approach to that issue must take into account the need to protect the individual patient and the collective need to maintain confidence in the profession as well as declaring and upholding proper standards of conduct and behaviour.

178. Mr Monaghan also submitted that there are occasions when a finding of impairment of fitness to practise may be justified on the grounds that it is necessary to reaffirm clear standards of professional conduct so as to maintain public confidence in the practitioner and in the profession.

179. In the context of the allegations that were found proved, some of those allegations dealt with her interaction with her colleagues, and another allegation features in the context of a very public display of inappropriate behaviour on a wide-ranging social media platform in which a doctor, having prefaced this by saying that she was a doctor made observations about her former Trust which were seriously offensive and are matters which may create a situation where it is necessary to affirm clear standards of professional conduct.

180. Mr Monaghan referred the Tribunal to Dr Lamei Javan's reflections on probity, and he submitted that they are short, anodyne and include no indication on how the reflections which are derived from that course impact on her or how she would avoid doing this again.

181. Mr Monaghan reminded the Tribunal of its finding that Dr Lamei Javan made posts which breached tenets of the social media guidance in respect of the Trust's HR department which amounted to social media posts which were seriously offensive and that level of offensiveness is consistent with the concept of a finding of misconduct.

182. Mr Monaghan submitted that Dr Lamei Javan's failure to properly report her absences was clearly thought to be a serious issue by Dr B and has a potential impact on patient safety, because it means that a clinic or ward is going to be understaffed. Mr Monaghan submitted that a failure to communicate which a doctor knows may have an effect on the safety and efficiency of the running of a ward or clinic is serious and should be appreciated by a doctor that it is serious. The other parts of those allegations are Dr Lamei Javan's failure to respond to Dr C's attempts to engage with her in relation to the meeting. Mr Monaghan submitted that these perhaps are not the most serious failings that may be levelled at a doctor, but it is clear that Dr C was surprised and concerned to be met with the level of resistance and hostility that he had, which, Mr Monaghan submitted is seriously inappropriate.

183. Accordingly, Mr Monaghan submitted that Dr Lamei Javan's fitness to practise is currently impaired and that a finding of impairment is required, given all of the individually and cumulatively serious circumstances of this case. That finding would not be to punish Dr Lamei Javan but to protect the public, declare and uphold the standards of the medical profession and ensure that the public confidence in the profession is maintained.

The relevant legal principles

184. There is no burden or standard of proof at this stage of the proceedings and the decision of impairment is a matter for the Tribunal's judgment alone. The Tribunal will only make a finding of impairment where there is a legal basis for doing so and where a decision is reached that the doctor poses a current and ongoing risk to one or more of the three parts of public protection which is likely to require restrictive action in response. The three parts of public protection 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 the profession.

185. 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 then whether the finding of that misconduct poses a current and ongoing risk to public protection requiring restrictive action in response and therefore could lead to a finding of impairment.

186. The LQC advised the Tribunal that misconduct has been defined in the case of *Roylance v GMC (No.2) [2000] 1 AC 311* as 'a word of general effect, involving some act or omission which falls short of what would be proper in the circumstances.' The Tribunal is reminded that misconduct must be serious rather than mere misconduct *Cheatle v GMC [2009] EWHC 645 (Admin)*. The Tribunal should consider whether the conduct represents a sufficiently serious departure from professional standards, as set out in Good Medical Practice ('GMP').

187. In respect of the You Tube comments the Tribunal needs to balance the Article 10 rights of the doctor and should consider whether regulatory intervention is proportionate.

188. If serious misconduct is found, the Tribunal must then consider whether that misconduct poses a current and ongoing risk to one or more of the three parts of public protection which is likely to require restrictive action in response.

189. To assess whether Dr Lamei Javan poses any current and ongoing risk to public protection which may require restrictive action in response, the Tribunal will consider:

- where on the spectrum of seriousness the allegation lies, based on the facts found proved;
- the impact of any relevant context known about Dr Lamei Javan and/or their working environment; and
- how Dr Lamei Javan has responded to the allegations.

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

The Tribunal's determination on impairment

Is there a legal basis for considering impairment?

191. Whilst the Tribunal had found paragraphs 1, 2, 6, 7(b) and 12 (b) of the allegations proved, it determined that Dr Lamei Javan's conduct outlined in these paragraphs did not breach any standards of GMP and could not amount to misconduct. The Tribunal grouped the remaining proved allegations into three categories of conduct to assess the seriousness

and make a finding on impairment: Acting Dishonestly; Policies and Communication; and Social Media Comments.

Acting Dishonestly

192. The Tribunal determined that paragraphs 9, 10, and 11 of the Allegation had breached the following standard of GMP:

> *Acting with honesty and integrity*
> *'81. You must make sure that your conduct justifies patients' trust in you and the public's trust in your profession.'*

As the Tribunal had determined that Dr Lamei Javan's statements to Dr B were dishonest, it was satisfied that Dr Lamei Javan's conduct had breached GMP and could therefore be considered misconduct.

193. The Tribunal determined that Dr Lamei Javan's statements were made in the workplace and involved telling Dr B multiple lies relating to not attending a ward round. It determined that another doctor of Dr Lamei Javan's level of training would consider it unacceptable to lie multiple times to an educational supervisor. Whist the Tribunal acknowledged this as a single conversation involving dishonest comments, it considered that the multiple lies told about not attending a ward round would be considered serious misconduct by a reasonable member of the public.

Policies and Communication

194. The Tribunal determined that paragraph 14 of the Allegation had breached the following standards of GMP:

> *'48. You must treat colleagues with kindness, courtesy and respect.*
>
> *49. To develop and maintain effective teamworking and interpersonal relationships you must:*
> *a. listen to colleagues*
> *b. communicate clearly, politely and considerately*
> *c. recognise and show respect for colleagues' skills and contributions*
> *d. work collaboratively with colleagues and be willing to lead or follow as the circumstances require.'*

The Tribunal noted that Dr Lamei Javan had not acted with kindness, courtesy or respect towards Dr B or Dr C and determined that this breach had constituted misconduct.

195. However, the Tribunal questioned whether Dr Lamei Javan's actions at paragraph 14 amounted to serious misconduct. It determined that, whilst this had breached GMP, her actions were in the context of a number of departments and individuals repeatedly

attempting to contact her for broadly the same reason. The Tribunal noted that this would have been a time of significant stress for the doctor and that there were multiple mitigations as to why she behaved the way she did. The Tribunal were of the view that, although her conduct was a breach of the standards of GMP, it was not so serious that it would be considered a 'serious departure' from the standards. The Tribunal therefore determined that Allegation 14 did not amount to serious misconduct.

Social Media Comments

196. With regards to paragraph 18(a) (in respect of 15(d) and 15(e)) of the Allegation, the Tribunal determined that Dr Lamei Javan had breached paragraphs 48 and 49 of GMP, as set out above, as well as the following paragraphs of GMP:

> *'56. You must not abuse, discriminate against, bully, or harass anyone based on their personal characteristics, or for any other reason. By 'personal characteristics' we mean someone's appearance, lifestyle, culture, their social or economic status, or any of the characteristics protected by legislation – age, disability, gender reassignment, race, marriage and civil partnership, pregnancy and maternity, religion or belief, sex and sexual orientation.*
>
> […]
>
> *90. When communicating publicly as a medical professional – including using social media, advertising your services, and promoting or endorsing any services or products:*
>
> *a. you must follow the guidance in paragraph 88 and 89*
> *b. you must declare any conflicts of interest*
> *c. you must not exploit people's vulnerability or lack of medical knowledge*
> *d. you must make sure what you communicate is in line with your duty to promote and protect the health of patients and the public.*
>
> *91. You must follow our more detailed guidance on Using social media as a medical professional.'*

197. The Tribunal determined that Dr Lamei Javan's conduct had breached the following paragraphs of *Using social media as a medical professional*:

> *Maintaining Public Trust*
> *'7. How you behave when using social media matters. Medical professionals, like everyone else, have rights to freedom of belief, privacy, and expression. But exercising these rights when using social media as a medical professional has to be balanced with the possible impact on other people's rights and interests.*
>
> […]

14. You must not use social media to abuse, discriminate against, bully, harass or deliberately target any individual or group.'

The Tribunal therefore determined that Dr Lamei Javan's actions at paragraph 18(a) (in respect of 15(d) and 15(e)) amounted to misconduct.

198. As the Tribunal had determined that Dr Lamei Javan's comments made in the XXX interview were seriously offensive, it determined that it would be perverse to consider the making of these comments to not amount to serious misconduct. It had determined that the nature of the language used to be gratuitously abusive. It therefore determined that Dr Lamei Javan's comments made in the interview amounted to serious misconduct.

199. In finding serious misconduct with regards to 'Acting Dishonestly' (paragraphs 9, 10 and 11) and the 'Social Media Comments' (paragraph 18(a) in respect of 15 (d) and 15(e) only) the Tribunal determined there to be a legal basis of misconduct for considering impairment.

Where on the spectrum of seriousness does the allegation lie?

200. The starting point for assessing the level of current and ongoing risk to public protection posed by a doctor (low, medium or high) is based on where on the spectrum of seriousness the allegation lies. The Tribunal assessed the nature of each of the allegations it had found amounted to serious misconduct.

Acting Dishonestly

201. In asessing where on the spectrum of seriousness the allegation lies, the Tribunal had regard to the *'Guidance for MPTS tribunals - Guidance introduction'.* The Tribunal considered Dr Lamei Javan's dishonesty and the conduct which led to her misconduct.

202. The Tribunal were mindful the Guidance suggests that dishonesty is recommended to fall at the higher end of the spectrum of seriousness. The Tribunal had regard to paragraph 33 of the Guidance:

"Although cases of … dishonesty will often fall at the higher end of the spectrum of seriousness, they can involve a range of behaviour with the circumstances giving rise to the allegation often occurring outside the doctor's professional practice. In these cases, the MPT will need to decide where on the spectrum of seriousness the … dishonesty sits"

203. The Tribunal considered the nature of the dishonesty and noted that this occurred on one day where Dr Lamei Javan had lied during the course of a protracted conversation with Dr B but then quickly rectified her lie. The Tribunal accepted that even a single act of dishonesty can impact on public confidence in the profession as the public put its trust in doctors with their health and their lives and therefore require doctors to act with honesty

and integrity at all times. Telling multiple lies to a senior doctor clearly puts upholding the professional standards at risk.

204. The Tribunal noted that it had not been presented with any evidence that Dr Lamei Javan's dishonesty led to actual harm of any patients. However, her actions in paragraph 9 of the Allegation which led to her dishonesty caused the ward to be a member of staff down and this could have impacted on patient care.

205. The Tribunal considered that Dr Lamei Javan's dishonesty was not at the highest end on the spectrum of seriousness and therefore concluded the starting point for Dr Lamei Javan's conduct in paragraphs 9, 10 and 11 of the Allegation would be at a mid-range on the spectrum of seriousness.

Social Media Comments

206. When considering the starting point for seriousness with regards to Dr Lamei Javan's comments made on social media, the Tribunal determined that the starting point given the nature of this allegation, fell at the low end of the spectrum of seriousness.

207. The Tribunal noted that, whilst YouTube is a public domain platform, it had not been provided with any evidence of the viewership or traffic which the XXX episode received and therefore could not determine how large the audience of Dr Lamei Javan's comments were. It noted that Dr Lamei Javan had not identified any specific individuals in the comments she had made and had made no mention of which hospital 'Trust' she had worked for during her interview she had only mentioned a non-specific Trust HR department. The Tribunal was of the view that the impact on public confidence would be very low.

208. The Tribunal had determined that Dr Lamei Javan's comments, whilst gratuitously abusive and seriously offensive, were not discriminatory or motivated by racial or religious hostility. It noted that these comments were made in relation to Dr Lamei Javan's political views and how she felt she had been treated in response to her comments on political extremism (which had been perceived by the Trust staff as racially hostile). Although her comments were a breach of the standards, the Tribunal noted that it had not received any evidence that any members of the Trust HR department were made aware of her comments or that Dr Lamei Javan had repeated her comments.

209. The Tribunal determined that there was no impact on patient care, and Dr Lamei Javan's comments had not put any patients at risk.

210. When assessing whether there were any factors present which increased the level of seriousness as set out in paragraph 33 of the *MPT Hearings Guidance Part B*, the Tribunal determined that the only relevant factor was the undermining of collaborative working. However, the Tribunal determined that Dr Lamei Javan had not been working at the Trust for several months by the time that she made these comments, and therefore the Tribunal were of the view that this did not increase the seriousness of the Allegation.

211. The Tribunal therefore determined that Dr Lamei Javan's comments made on YouTube fell at the lower end of the spectrum of seriousness.

What is the impact of any relevant context known about Dr Lamei Javan and/or their working environment?

Acting Dishonestly

212. Regarding the allegation of dishonesty, the Tribunal was of the view that there were numerous relevant contextual factors.

213. The Tribunal noted that Dr Lamei Javan was a junior doctor and had been under investigation by the Trust from the first day of her contract, it appreciated that this would have caused severe stress and anxiety. Additionally, the Tribunal acknowledged that various Trust staff members had repeatedly contacted Dr Lamei Javan in respect of this investigation even after she had apologised, accepted her failings, and removed the posts when asked to do so demonstrating compliance, insight and acceptance.

214. The Tribunal further noted that, in corroboration of her original account to Dr B, Dr Lamei Javan stated in her written response to the allegations that she had experienced a family emergency on the morning that she lied to Dr B. It had not received any evidence to suggest that this was a fabrication.

215. The Tribunal further noted that the evidence suggested that Dr Lamei Javan had a Trust investigation meeting scheduled on the morning that she did not attend ward round, which the Tribunal considered could have impacted on why she had not come into work on the morning in question.

216. The Tribunal considered that her personal context would have impacted heavily on her actions and therefore when taking this context into consideration, this reduced the ongoing risk to public protection given that it was a specific set of circumstances which would no longer be in existence.

217. The Tribunal had regard to Dr Lamei Javan's working environment and although it appreciated and accepted Dr B's evidence that he was in a role to help and support her, it noted that Dr Lamei Javan may have already formed a distrust for her department and stated that she felt harassed and bullied as a result of the ongoing investigations and multiple requests for meetings from different departments. The Tribunal considered that in addition to having an investigation into her conduct commenced on her first day in the department, the investigation was expanded upon at the start of October. Dr Lamei Javan may not have felt that there was someone she could confide in about her family emergency that morning, for fear of further criticism. The Tribunal was of the view that this could have impacted her behaviour. As Dr Lamei Javan is no longer working in that hospital Trust, and thus the

particular context which contributed to her behaviour is no longer ongoing, this reduces the risk of the conduct occurring again.

Social Media Comments

218. In regard to Dr Lamei Javan's comments made on YouTube, the Tribunal was of the view that whilst certainly not condoning in any way the choice of language used, there was some merit to Dr Lamei Javan's objections and that it was understandable that she had felt aggrieved and that this had coloured her responses in the interview.

219. The context of the incident was that Dr Lamei Javan had initially posted on X on the morning of her first day of work, and that even though she explained she didn't mean to cause offence, apologised, accepted responsibility for her actions and removed the post this cascaded into a Trust wide investigation. The Tribunal had determined in its facts determination that there was nothing untoward about these posts; they were political expressions of speech and were not racially motivated.

220. The Tribunal also noted that this Trust investigation had expanded to encompass other X posts which the Tribunal had also determined to not be racially or religiously hostile and therefore not a significant issue. It had determined that these posts displayed political statements which, under Article 10 of the European Convention of Human Rights, Dr Lamei Javan was free to make.

221. The Tribunal noted that as a newly qualified doctor Dr Lamei Javan would have required significant support from educational leads and senior members of staff. It determined that instead Dr Lamei Javan had been picked up on a number of minor indiscretions, such as emailing rather than calling when she was sick. On this basis, the Tribunal determined that Dr Lamei Javan's comments, whilst seriously offensive, came about as a result of a series of events. A reasonable member of the public, with knowledge of this context would likely view the comments in a different way. This was not an attack on the public confidence in the profession but a personal grievance which was articulated in an unprofessional way.

222. The Tribunal noted that Dr Lamei Javan is no longer working for this Trust and, in accordance with paragraph 49 of the Guidance concluded this reduced the likelihood of the allegation being repeated,

> *49. However, where the context is not ongoing, either because the circumstances have changed, or because steps are now in place to mitigate the impact that the type of context had on the doctor, the MPT may consider that this reduces the likelihood of the allegation being repeated. This may in turn decrease the level of current and ongoing risk the doctor poses to one or more parts of public protection depending on the weight the MPT decide to attach to it.*

<u>How has Dr Lamei Javan responded to the allegations?</u>

Acting Dishonestly

223. The Tribunal acknowledged that Dr Lamei Javan was caught out in her lie, however it noted that this occurred within a single conversation and that her dishonesty was not repeated and the lies did not span a lengthy period of time as she rectified the lies quickly.

224. The Tribunal reminded itself that there was no evidence of an apology from Dr Lamei Javan for her lying. It noted the contemporaneous notes of Dr B who it had considered to be a credible and reliable witness and noted that there was no mention of Dr Lamei Javan apologising for her actions at the time.

225. The Tribunal determined that Dr Lamei Javan's response to the allegation of dishonesty was not timely as her *Doctors with Probity: Healthcare Ethics and Standards* course was dated 19 September 2026. It further determined that her reflective paragraph was limited as she remained silent on the matter of an apology and merely noted that she had *'learned the importance of being honest.'*

226. The Tribunal acknowledged that Dr Lamei Javan accepted (in paragraph 32 of her response to the allegations) that she should have been candid to Dr B from the outset and understood that she should have behaved differently. However, the Tribunal determined that due to the limited insight and efforts towards remediation, it could not be satisfied that there was no risk of her repeating her dishonest behaviour.

Social Media Comments

227. The Tribunal noted that, in her response to the allegations, Dr Lamei Javan had apologised for her activity on social media. It determined that the insight she had shown with her reflective paragraph and *Social Media Safety and Intelligence* course had been genuine.

228. The Tribunal noted that Dr Lamei Javan had acted with integrity and responsibility when she was initially approached in respect of the posts she made on 6 August 2024. Likewise in her response to the allegations she had accepted and apologised for her comments on the episode of XXX:

> *'56. I accept that I used these words. The comparison was inflammatory, offensive and unacceptable. I retract it and apologise.*
>
> […]
>
> *57. I accept that I used these words. The statements were unsupported, speculative, inflammatory and capable of causing serious offence. I retract them and apologise.*
>
> […]

65. I accept that the comments were unsupported, inflammatory, inappropriate and capable of causing serious offence. I retract them and apologise for their impact. I leave the Tribunal to determine whether the legal threshold of 'seriously offensive' is established.'

229. The Tribunal determined that Dr Lamei Javan's comments were remediable and had been remedied. Due to the impact which these events had on hindering her progression as a junior doctor, the Tribunal determined that the risk of repetition with regards to comments like these is extremely low.

Tribunal's decision as to whether Dr Lamei Javan poses any current and ongoing risk to public protection which may require restrictive action in response and its finding on impairment

Acting Dishonestly

230. The Tribunal determined that, having regard to its findings on seriousness and the relevant context that due to Dr Lamei Javans lack of remediation and developing insight, there is a risk of repetition of dishonest behaviour. Dr Lamei Javan does pose a current and ongoing risk to public confidence and upholding professional standards.

231. In relation to public confidence, the Tribunal determined that a fully informed reasonable member of the public would be concerned by Dr Lamei Javan's dishonest conduct within a workplace setting. Although the nature of the conduct was at the mid-range of seriousness, the context reduced the seriousness to a low level. The Tribunal considered that patients and members of the public must have confidence in doctors to act with honesty and integrity. A single incident of dishonesty can undermine public confidence in the profession and a finding of impairment was required to maintain public confidence in the profession.

232. In relation to upholding proper professional standards and conduct, the Tribunal determined that dishonesty undermines the doctor's integrity and amounts to a significant breach of professional standards, bringing the profession into disrepute. The Tribunal determined that a finding of impairment is necessary to uphold the standards expected of a registered medical practitioner.

Social Media Comments

233. With regards to her comments on social media, the Tribunal determined that, due to specific set of circumstances in which they were made, Dr Lamei Javan was not currently impaired.

234. The Tribunal noted that it had not received any evidence that Dr Lamei Javan has repeated this behaviour since March 2025 and therefore determined that this was a one-off incident born out of a specific set of circumstances and that the risk of repetition is extremely low. It determined that she was of no risk to patient safety in this regard, and that public

confidence would not be undermined by these comments, which were not discriminatory, not aimed at a particular individual and were not motivated by racial or religious hostility.

235. The Tribunal was satisfied from Dr Lamei Javan's insight and remediation, that she had taken steps to ensure that this behaviour would not be repeated. It determined that there is no current and ongoing risk to public protection regarding her comments on social media in her XXX interview.

Outcome

236. The Tribunal has therefore determined that Dr Lamei Javan's fitness to practise is impaired by reason of her dishonest misconduct in paragraphs 9, 10 and 11 of the Allegation only.

Determination on Sanction - 05/11/2026

237. Having determined that Dr Lamei Javan's fitness to practise is impaired by reason of her misconduct, the Tribunal was then required to decide, in accordance with Rule 17(2)(n) of the Rules, what action, if any, it should take with regard to Dr Lamei Javan's registration.

238. The Tribunal has reviewed its findings at the facts and impairment stages and taken into account evidence received during the earlier stages of the hearing where relevant to reaching a decision on sanction. The Tribunal received no further evidence at this stage of the hearing.

Submissions

239. Mr Monaghan referred the Tribunal to the relevant paragraphs of the Guidance for MPTS Tribunals ('the guidance') and reminded the Tribunal that it should impose the least restrictive sanction and have regard to the principles of proportionality.

240. Mr Monaghan submitted that there is nothing in the circumstances of this case that make it so unusual, special or uncommon that the Tribunal could properly conclude that an appropriate course of action would be to take no action. Mr Monaghan submitted that Dr Lamei Javan is not currently in the jurisdiction and her future plans are unknown to the GMC. Whilst she is out of the jurisdiction conditions are neither workable nor appropriate.

241. Mr Monaghan submitted that a sanction of suspension is the appropriate course. He reminded the Tribunal of its findings at the impairment stage that Dr Lamei Javan does pose a current and ongoing risk to public confidence and upholding professional standards. Mr Monaghan observed that suspension can have a deterrent effect and can send a signal to the doctor, the public and the profession about what is regarded as behaviour appropriate or inappropriate for a registered doctor.

242. Mr Monaghan reminded the Tribunal that Dr Lamei Javan took a probity course very shortly before the hearing started and he submitted that may lead the Tribunal to conclude that no efforts to develop insight or to remediate were taken until after a significant period had passed. He also submitted that the reflections developed from the course, a single paragraph, are short, anodyne and lacking in any indication of how the doctor feels that the learning from the course would help her to avoid the same conduct in the future given that the Tribunal has decided she does pose a current and ongoing risk.

243. Mr Monaghan submitted that Dr Lamei Javan did not accept in her written submissions that her actions were dishonest which they clearly were, and it must have been apparent to her that this was the case. He also reminded the Tribunal that there has never been any explanation given by the doctor for her conduct. He stated that the Tribunal should be very careful before attributing a particular reason for the conduct of the doctor in circumstances where she deliberately chose not to attend the hearing and not to expose herself to questioning. He said that such questioning would undoubtedly have included questions about the circumstances preceding her behaviour that morning in failing to attend a ward round without informing anybody and then following that up with a conversation in which she told three identifiable lies to Dr B.

244. Mr Monaghan submitted that there is a lack of insight, a lack of candour and a lack, thus far, of any genuine or effective remediation.

245. Mr Monaghan submitted that a suspension at the lowest level is not sufficient as there needs to be sufficient time for there to be appropriate and effective remediation. Mr Monaghan submitted that a period in the middle banding of suspension would be appropriate to allow sufficient time and for a review to be directed in the context of the continuing risk posed by the doctor and the need for effective remediation.

246. Mr Monaghan submitted that this is a doctor who is outside the jurisdiction, who is not engaged in terms of attendance at the hearing and has provided limited information. He stated that it is not possible for the GMC to identify the way in which the doctor is complying with GMP in terms of keeping her skills and knowledge up to date and this itself, is a potential issue which he asked the Tribunal to have regard to when considering the appropriate sanction.

Legal advice on sanction

247. The LQC advised the Tribunal that the procedure to be adopted is set out under the MPTS Guidance (*MPT Hearings > Part C: stage three – sanction > Step 3: decide on sanction*). The Tribunal should have regard to the sanctions bandings as set out in the MPTS Guidance (*Introduction > Case Type 2: Dishonesty*). The LQC reminded the Tribunal that the sanctions bandings provide a guide, and there may be evidence relevant to the individual circumstances of the case that indicates the appropriate action should be lower or higher than that indicated by the bandings.

248. The Tribunal should remind itself of the level of current and ongoing risk which it found at impairment and consider what sanction is proportionate to protect the public interest. The Tribunal should have regard to the overarching objective and ask itself what is required but is no more than necessary to achieve public protection. In making its determination the Tribunal should consider the least restrictive sanction first, before moving on to consider the other available sanctions in ascending order of severity.

249. The Tribunal's decision as to the appropriate sanction, if any, is a matter for the Tribunal's own independent judgment. Whilst the Tribunal will consider the interests of the doctor, case law has made it clear that the need to protect the public always outweighs the interests of any individual medical professional and whilst restrictive action is not put in place to punish or discipline a doctor, a sanction may have a punitive effect.

The Tribunal's determination on sanction

250. In making its decision on sanction, the Tribunal has reviewed its decision on facts and impairment and has considered the level of current and ongoing risk the doctor poses to public protection.

251. The Tribunal reminded itself of the serious nature of Dr Lamei Javan's conduct and its finding that the conduct was initially at the medium level on the spectrum of seriousness but that the relevant context reduced the seriousness to low. It also reminded itself that two of the three parts of public protection were engaged in this case namely maintaining public confidence and upholding professional standards and conduct.

252. The Tribunal considered all the available sanctions, beginning with the least restrictive. Throughout its deliberations it had regard to the relevant paragraphs of the Guidance.

No action

253. In reaching its decision as to the appropriate sanction, if any, to impose, the Tribunal first considered whether to take no action. It noted that there were no exceptional circumstances in this case. Given the findings against Dr Lamei Javan the Tribunal considered that taking no action would not be an appropriate nor proportionate response and would fail to maintain public confidence or uphold professional standards and conduct.

Conditions

254. The Tribunal next considered whether to impose conditions on Dr Lamei Javan's registration. It bore in mind that any conditions imposed would need to be appropriate, proportionate, workable and measurable.

255. The Tribunal considered that where there has been a finding of dishonesty for which measurable and workable conditions are difficult to formulate. The Tribunal reminded itself that Dr Lamei Javan had indicated that she was going to engage with these proceedings but then chose not to without explanation, she further had not engaged with any contact from the GMC or MPTS in respect of this hearing and this gave the Tribunal concerns that she would not comply with any conditions imposed.

Suspension

256. The Tribunal then went on to consider if suspension was the appropriate sanction. The Tribunal was assisted in reaching its decision by the following paragraphs of the guidance;

> *45. Suspension may be proportionate in cases where some, or all, of the following factors are present:*
>
> > *a. conditions are not appropriate, measurable and/or workable*
> > *…*
> >
> > *c. the level of current and ongoing risk to public protection is such that, although patient safety is not an issue, suspension is needed to maintain public confidence in the profession and/or maintain professional standards.*
>
> *46. The MPT will need to decide the appropriate length of time that suspension should be put in place for, up to the maximum of 12 months. The following factors will be relevant:*
>
> > *a. the assessment of the level of current and ongoing risk to public protection posed by the doctor*
> > *b. the reasons for assessing suspension as being the proportionate response*
> > *c. the amount of time the doctor is likely to need to remediate, complete treatment for and/or recover from a health condition that is having, or is likely to have, an impact on their ability to practise safely and effectively, and/or d. the amount of time the parties will reasonably need to prepare for any review of whether the doctor continues to pose a current and ongoing risk to public protection requiring restrictive action in response or is safe to return to unrestricted practice.*

257. The Tribunal bore in mind that at the time of her dishonest conduct Dr Lamei Javan had not admitted her dishonest behaviour. Dr B said in his witness statement that Dr Lamei Javan had,

> *Provided several false accounts about your whereabouts before it became evident that you had not come to work at all prior to our meeting. You admitted that you had not reported your absence as required*

258. The Tribunal bore in mind that, in her written response to the allegations, Dr Lamei Javan had partially accepted her dishonesty towards Dr B:

> *I accept that the initial account was inaccurate and that I should have been candid from the outset. I corrected the account during the same conversation and explained the family emergency. I accept responsibility for the failure of candour and do not seek to minimise it.*

However, the Tribunal had no evidence before it that Dr Lamei Javan offered an apology to Dr B for lying to him about her whereabouts on that morning. It further noted that Dr Lamei Javan had not addressed the impact of her lie on Dr B nor the impact on the ward round being left one member of staff down by her non-attendance. The Tribunal concluded that the remediation of Dr Lamei Javan was limited.

259. The Tribunal acknowledged that Dr Lamei Javan attended a probity course, *Doctors with Probity: Healthcare Ethics and Standards* on 19 September 2026. However, the Tribunal found that the reflection provided was limited and that Dr Lamei Javan had not articulated what measures she had put in place to ensure that there would be no repetition of any dishonest behaviour when faced with a stressful situation. It considered that there was no evidence of what Dr Lamei Javan has learned from the probity course in respect of her behaviour that morning with Dr B. The Tribunal concluded that the insight of the doctor was limited.

260. The Tribunal could not be satisfied that Dr Lamei Javan fully understood the seriousness of her dishonesty, the implications that her behaviour had on the ward and the wider implications of being dishonest to a senior colleague within a workplace setting. The Tribunal found that she had not explained or demonstrated how she would act differently in the future.

261. The Tribunal reminded itself of its findings at the impairment stage that these were lies that occurred during a protracted conversation with a senior colleague but that it could not be satisfied that there was no risk of repetition.

262. The Tribunal also reminded itself that it has no evidence before it today regarding where Dr Lamei Javan is currently working and no evidence that she has kept her skills and knowledge up to date.

263. In light of its findings the Tribunal determined that a period of suspension is an appropriate and proportionate response to maintain public confidence in the profession and to uphold professional standards and conduct.

Erasure

264. The Tribunal considered that erasure would be disproportionate, inappropriate and unnecessary in this case.

Period of suspension

265. The Tribunal had regard to the Guidance and its finding at the impairment stage that as a result of the context surrounding this dishonesty, that it was conduct that fell at the lower end of the spectrum of seriousness. It noted the sanctions bandings that such conduct fell within the lower band with a period of suspension of up to 3 months.

266. The Tribunal determined that although Dr Lamei Javan had completed a probity course she had not provided adequate evidence of her learning and insight from this course. As indicated previously, the Tribunal further determined that Dr Lamei Javan has not demonstrated that she has remediated her actions.

267. The Tribunal noted its previous findings that this was not the most serious act of dishonesty and wanted to allow Dr Lamei Javan a proportionate period of time to make good her shortcomings. The Tribunal further wanted to mark the seriousness of any form of dishonesty so that the public could maintain their confidence in the profession and in the regulation of the profession. The Tribunal concluded that a period of 2 months suspension was appropriate in this case.

Review

268. The Tribunal considered paragraph 52 of the Guidance which states,

> *52. The question of whether the doctor can safely return to unrestricted practice will need to be considered before a period of suspension concludes and so a review should be directed.*

The Tribunal determined to direct a review of Dr Lamei Javan's case. A review hearing will convene shortly before the end of the period of suspension. The Tribunal wishes to clarify that at the review hearing, the onus will be on Dr Lamei Javan to demonstrate how she has developed insight into and remediated her dishonest conduct. It therefore may assist the reviewing Tribunal if Dr Lamei Javan provided,

- A reflective statement including evidence of insight and remediation;
- Evidence that she has kept her skills and knowledge up to date.

Dr Lamei Javan will also be able to provide any other information that she wishes the reviewing Tribunal to consider.

Determination on Immediate Order – 06/11/2026

269. Having determined to suspend Dr Lamei Javan for a period of 2 months the Tribunal has considered, in accordance with Rule 17(2)(o) of the Rules, whether her registration should be subject to an immediate order.

Submissions

270. Mr Monaghan submitted that the GMC does not ask for an immediate order in the circumstances where this doctor is not currently practising and is not in the jurisdiction. He submitted that an immediate order is not proportionate or necessary.

The Tribunal's decision

271. The Tribunal was assisted by Mr Monaghan's submissions and considered that there is a public interest in this case as it involves dishonesty. However, it noted that there are no patient safety issues and that Dr Lamei Javan is currently not known to be practising in this jurisdiction.

272. The Tribunal determined that it would be disproportionate to impose an immediate order in this case and that it is not necessary to impose an immediate order to protect patient safety or uphold public confidence or maintain proper professional standards and conduct. The Tribunal is satisfied that the sanction imposed upholds the public interest.

273. This means that Dr Lamei Javan's registration will be suspended 28 days from the date on which written notification of this decision is deemed to have been served upon her, unless she lodges an appeal. If Dr Lamei Javan does lodge an appeal, she will remain free to practise unrestricted until the outcome of any appeal is known.

274. There is no interim order to revoke

275. This concludes the case.

ANNEX A – 22/09/2026

Service and Proceeding in Absence

276. This determination was handed down in public.

277. Dr Lamei Javan is not legally represented at this hearing and indicated she will only attend to provide oral evidence. The Tribunal noted Rule 31 that in order to proceed with the hearing in Dr Lamei Javan's absence, it needed to be satisfied that she had been properly served with the Notice of Hearing (NoH) and whether it was appropriate for the hearing to proceed in her absence.

278. The Tribunal was provided with a service bundle which contained

- Dr Lamei Javan's email and postal address on the GMC register
- Email from GMC to Mr L attaching the notice of allegation dated 27 July 2026
- Email from GMC to Mr L attaching the notice of hearing dated 29 July 2026
- Email from GMC to Mr L attaching further documents dated 30 July 2026
- Notice of hearing Letter from GMC sent by first class post to Dr Lamei Javan's registered postal address
- Notice of hearing Letter from GMC sent by registered post to Dr Lamei Javan's registered postal address
- Series of emails between Mr L and GMC dated 27 August 2026
- Telephone note of a conversation between GMC and Mr L dated 27 August 2026

279. After reviewing the service bundle the Tribunal requested some further documentation and was additionally provided with:

- Email delivery receipt of the message sent to Mr L dated 27 July 2026
- Copy of email forwarded by Mr L to Dr Lamei Javan's registered email address on 29 July containing the notice of hearing email sent by the GMC
- PMHD record dated 9 June 2026 stating that Mr L had been instructed and could take delivery of notices.

Submissions

280. Mr Monaghan, Counsel, referred the Tribunal to Rule 31 of the rules and submitted that the GMC efforts to make the doctor aware of this hearing have been successful. Mr Monaghan also referred the Tribunal to the principles as set out in the cases of *R v F [2003] 1 AC 1* and in *General Medical Council v Adeogba* [2016] EWCA Civ 162 (18 March 2016). Mr Monaghan also submitted that Dr Lamei Javan has engaged to a degree, is aware of this hearing, has provided written representations, has made it clear she does not wish to cross-examine witnesses and only wishes to attend at the facts stage at which she can give evidence. Mr Monaghan submitted that all of this taken together provides a fairly clear picture and does not provide a good reason not to proceed. Accordingly, Mr Monaghan submitted that the hearing should proceed.

281. Mr Monaghan indicated that, had the Tribunal heard this case where the doctor had not had notice of this hearing or all reasonable efforts were not made to properly serve her then this matter may have been appealed.

282. Mr Monaghan submitted that if there is an issue over whether the doctor has had notice of the hearing served on her then Rule 31 allows the Tribunal to proceed in absence if it is satisfied that all reasonable attempts have been made to affect service. Mr Monaghan drew the Tribunal's attention to the email from Mr L dated 29 July 2026 confirming receipt of the NoH and forwarding a copy of the same. Mr Monaghan submitted that the MPTS efforts to serve the doctor have been successful. Dr Lamei Javan is aware of the hearing dates and times and she has been aware of this since 29 July 2026. Mr Monaghan submitted that it is not necessary for the Tribunal to consider whether reasonable efforts have been made as there is no issue whether Dr Lamei Javan has had notice of this hearing.

283. Mr Monaghan drew the Tribunal's attention to the PHMD which confirms that Mr L was acting for the doctor and that this note indicates that the draft allegations have been served on Mr L. Mr Monaghan submitted that is not normal practice to copy the doctor into an e-mail to her legal representative unless the GMC or MPTS have been asked to do so in advance.

284. Mr Monaghan was asked by the Tribunal to confirm that Dr Lamei Javan had been provided with the updated notice of allegation and to address discrepancies that the Tribunal had observed between Dr Lamei Javan's written response to the paragraphs of the allegation and the paragraph numbers of the Allegation which the Tribunal had before it.

285. Mr Monaghan informed the Tribunal that one of the attachments of the allegations sent to Mr L on 27 July 2026 was the final rule 15 Allegations and the delivery receipt of this email. Mr Monaghan drew the Tribunal's attention to the supplementary witness statements of Dr B which clarifies that Dr Lamei Javan was not sick on 6 November but was in fact on SDT (self-development time) and this led to the revision of Allegations 14(b)(i) and 14(b)(ii). Mr Monaghan submitted that the final draft and supplemental statements were received and the registrant and her representative responded to the Allegations as set out in the draft and not the final Allegations.

286. Mr Monaghan submitted that an adjournment is not necessary as Dr Lamei Javan has said that she intends to attend these proceedings at a later date but simply does not wish to be here today. Therefore, an adjournment would not make any difference. Mr Monaghan reminded the Tribunal that Mr L confirmed that he was now disengaged in accordance with the registrants wishes. Mr Monaghan submitted that there is no disadvantage to Dr Lemai Javan because she is intending to be here on the link at a later date. Therefore, there's no risk of any improper conclusion being drawn about her absence. Mr Monaghan submitted that there is no issue with proceeding at this stage.

The Tribunal's determination

Service

287. The Tribunal had regard to the screenshot of Dr Lamei Javan's postal address as registered with the GMC and reminded itself the notice of hearing ('the NoH') was sent to her registered postal address but was returned.

288. The Tribunal considered Rule 40 (2) and (4) of the rules

(2) Subject to paragraph (1), any notice or document required to be served upon the practitioner under these Rules may be served—

(a) by ordinary post; or

(b) by electronic mail to an electronic mail address that the practitioner has notified to the Registrar as an address for communications.

(4) The service of any notice or document under these Rules may be proved by—

(a) a confirmation of posting issued by or on behalf of the Post Office, or other postal operator or delivery service;

(b) a confirmation of receipt of the notice or document sent by electronic mail; or

(c) a signed statement from any person serving the notice or document confirming that the notice or document was delivered to, sent to or left at—

(i) the practitioner's proper address;
(ii) the practising address or electronic mail address of the practitioner's solicitor; or
(iii) the business address or electronic mail address of the practitioner's trade union or defence organisation.

289. The Tribunal also bore in mind schedule 4 paragraph 8 (2) of the Act,

'Any such notice may be so served –

…
(c) by leaving it at his proper address;
(d) by sending it by a registered post service;
…'

290. The Tribunal noted that hard copies of the NoH were sent to the doctor's registered postal address on 4 August 2026 by both first class and recorded delivery. The NoH that was sent by first class delivery was returned marked 'returned to sender' and received by the GMC on 14 August 2026 and the NoH sent by recorded delivery was returned and received by the GMC on 18 August 2026 for the same reason. The Tribunal noted that Dr Lamei Javan had an obligation to keep the GMC register up to date with her current contact details.

291. The Tribunal noted the copy of the pre-hearing meeting minutes ('PHMD') dated 9 June 2026 in which Mr L confirmed that he was instructed to accept service of the NoH on behalf of Dr Lamei Javan.

292. The Tribunal noted that the email dated 29 July showed that notice of this hearing was sent by the Medical Practitioners Tribunal Service (MPTS) in accordance with Rule 15 and 40 of the Rules and Paragraph 8 Schedule 4 of the Medical Act 1983 as amended (The Act), to Dr Lamei Javan's legal representative, Mr L, Counsel (who was instructed to assist with the preparation of this hearing only). Mr L forwarded a copy of the NoH to Dr Lamei Javan via email to her registered email address on that same day. The Tribunal was satisfied that it was clear from the PHMD that Mr L was appointed as Dr Lamei Javan's registered representative at the relevant time.

293. The Tribunal was also satisfied that the final notice of Allegation was sent by email to Mr L on 27 July 2026 and a delivery receipt was received.

294. The Tribunal was of the view that service had been effected in accordance with the Rules.

Proceeding in absence

295. The Tribunal must now decide whether to proceed in Dr Lamei Javan's absence pursuant to Rule 31.

296. The Tribunal was conscious that the discretion to proceed in the absence of a doctor should be exercised with great care, that fairness to both sides must be taken into account, balancing the interests of the doctor with the wider public interest.

297. The Tribunal considered the nature and circumstances of Dr Lamei Javan's absence. It noted the email from Mr L dated 27 August 2026 in which he advised that the doctor would not be represented at this hearing and would not be in attendance for the entire hearing but will need notice of when she is required to give evidence.

298. The Tribunal further noted the copy of a telephone note of a call between Mr L and the GMC on 27 August 2026 in which Mr L is reported to have said that Dr Lamei Javan will not cross-examine any witnesses.

299. The Tribunal also considered the email from Dr Lamei Javan's legal representative dated 4 September 2026 which advised that the doctor is aware of these proceedings and confirmed that she would be unrepresented.

300. The Tribunal considered whether an adjournment would result in Dr Lamei Javan's attending the hearing. The Tribunal had regard to the correspondence provided which advised that Dr Lamei Javan does not intend to attend this hearing until she is required to give evidence at the facts stage. The Tribunal was satisfied there was no evidence before it to suggest that an adjournment would result in the doctor attending at a future date and to adjourn today would serve no useful purpose.

301. The Tribunal was satisfied that Dr Lamei Javan has voluntarily absented herself from this part of the proceedings, that she has voluntarily chosen not to cross-examine the GMC's witnesses. The Tribunal had regard to the fact that there are witnesses on standby who would be impacted if the hearing was adjourned. The Tribunal was satisfied that, given the serious nature of the allegations to be considered, it is in the public interest to proceed in the doctor's absence. The Tribunal determined that it was appropriate and fair to proceed in her absence in accordance with Rule 31 of the Rules.

302. Given Dr Lamei Javan's intention to attend this hearing to give evidence at the facts stage, the Tribunal noted that all decisions made during the course of the hearing would be sent out to Dr Lamei Javan's registered email address at all material times.

ANNEX B – 24/09/2026

Proceeding in Absence

303. This determination was handed down in public.

304. Dr Lamei Javan is not legally represented at this hearing and indicated she will only attend to provide oral evidence at the facts stage. She was notified on Tuesday 22 September 2026 that the Tribunal was proceeding with the case and hearing the GMC's evidence in her absence and that she was required to attend the Tribunal at 10:00 on Thursday 24 September 2026 to provide her oral evidence. Dr Lamei Javan did not attend the hearing at this time. The Tribunal noted Rule 31 that in order to proceed with the hearing in Dr Lamei Javan's absence, it needed to be satisfied that it was appropriate and fair for the hearing to proceed in her absence. It had previously determined that Dr Lamei Javan had been served effective notice of hearing (NoH).

Submissions

305. Mr Monaghan submitted that Dr Lamei Javan had confirmed through her legal representative (engaged for preparation of the hearing only) that she had notice of the

hearing but would only attend to give evidence. He submitted that the earlier expectation that she would attend to give evidence on 24 September 2026 has not been achieved.

306. Mr Monaghan submitted Dr Lamei Javan is under an obligation to keep her registered details up to date which she had failed to do. He submitted that the MPTS and GMC have used her registered email address, which was also used as recently as 20 September 2026 in correspondence with her legal representative.

307. Mr Monaghan submitted that previous email correspondence and the proceeding in absence decision had shown Dr Lamei Javan is aware of the date of the hearing and referred the Tribunal to Rule 31 of the Rules.

308. Mr Monaghan reminded the Tribunal that Dr Lamei Javan has been contacted repeatedly by the GMC and the MPTS and that she has not responded to either. Mr Monaghan further submitted that it is therefore appropriate to proceed in her absence on the premise that she knows of the hearing and that she was notified that 24 September 2026 was the date she was due to give evidence.

309. Mr Monaghan submitted that the Tribunal must give proper consideration to the cases of *R v F [2003] 1 AC 1* and *General Medical Council v Adeogba [2016] EWCA Civ 162.* He submitted that the Tribunal has no reason to believe that a further adjournment would aid the process of the hearing, given that Dr Lamei Javan initially engaged to a limited extent and has subsequently disengaged.

310. Mr Monaghan submitted that Dr Lamei Javan has had the opportunity to present her own defence bundle to the Tribunal and expand on any evidence in as much detail as she wishes but has decided to absent herself from these proceedings.

311. Mr Monaghan further submitted that the Tribunal must have regard to the public interest and that it upsets these proceedings for the registrant to partially engage in this process and then disengaged with no explanation. He submits that the Tribunal should proceed with the hearing in Dr Lamei Javan's absence.

The Tribunal's determination

312. The Tribunal acknowledged that Dr Lamei Javan's case may be weakened due to her absence and she may be put at a disadvantage were the hearing to proceed in her absence. It noted that she had made it clear through her legal representative that she would attend to give evidence at the facts stage. The Tribunal considered that the doctor had not responded to the MPTS request to attend the hearing, nor had she responded to the previous determination to proceed with the case in her absence up until that point. It further noted that the doctor had not responded to the GMC's emails requesting when she would be available to give evidence sent before the hearing commenced.

313. The Tribunal determined that no evidence had been presented as to why the doctor had chosen to absent herself from providing her evidence at these proceedings, given her lack of communication with the MPTS and the GMC.

314. The Tribunal was mindful that this is a complex case and could not guarantee that an adjournment would not impact on the case management of this hearing which would not be in the public interest. It determined that, whilst Dr Lamei Javan may be at a disadvantage were the hearing to continue in her absence, an adjournment may put the GMC at a similar disadvantage when considering the evidence and the seriousness of the allegations.

315. Having regard to the cases of *F* and *Adeogba,* the Tribunal determined that it had not been presented with any evidence that Dr Lamei Javan would engage in the future, were the hearing to adjourn. There was no identifiable reason for her absence or lack of engagement and therefore it was difficult to identify how any adjournment could extract a different outcome. Further there was no identifiable length of adjournment which could assist the doctor in attending to give her evidence, given her lack of communication with the MPTS in response to the email sent requiring her to attend on 24 September 2026. The Tribunal noted that Dr Lamei Javan has had multiple opportunities to engage or provide an account of why she would not be attending, or to request an adjournment to enable her to attend.

316. The Tribunal considered that Dr Lamei Javan had had the benefit of being legally represented prior to the commencement of the hearing and would therefore understand the process of an MPT Hearing. The Tribunal gave weight to the fact that Dr Lamei Javan had provided a defence bundle and response to the allegations via her legal representative and noted that this bundle contained a '*reflection on courses'* statement from Dr Lamei Javan dated 20 September 2026. The Tribunal accepted Mr Monaghan's submission that Dr Lamei Javan's registered email address was used to communicate between her and her legal representative, and this is the same email address which the MPTS used to notify her of the initial proceeding in absence determination and the requirement to attend to give evidence on 24 September 2026.

317. The Tribunal balanced the fairness to the doctor with the overarching objective and the public interest in conducting hearings in an efficient, expeditious and fair manner. It determined that it was in the public interest to proceed in the absence of Dr Lamei Javan, given that she has seemingly voluntarily absented herself from the proceedings and giving evidence at the facts stage.

318. The Tribunal therefore determined to proceed in Dr Lamei Javan's absence.