Record of Determinations –
Medical Practitioners Tribunal

PUBLIC RECORD

Dates: 20/08/2019
Medical Practitioner’s name: Dr Natalie BLAKELY
GMC reference number: 6120853
Primary medical qualification: MB BS 2005 University of London
Type of case: Review - Misconduct
Outcome on impairment: Not Impaired

Summary of outcome
Suspension revoked

Tribunal:

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<th>Role</th>
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<tr>
<td>Legally Qualified Chair</td>
<td>Mr Martin Jackson</td>
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<tr>
<td>Lay Tribunal Member:</td>
<td>Mr Bernard Carter</td>
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<tr>
<td>Medical Tribunal Member:</td>
<td>Dr Moji Gesinde</td>
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<th>Role</th>
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<tr>
<td>Tribunal Clerk:</td>
<td>Ms Jean Gleeson</td>
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Attendance and Representation:

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<thead>
<tr>
<th>Role</th>
<th>Name / Details</th>
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<tr>
<td>Medical Practitioner:</td>
<td>Present and represented</td>
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<tr>
<td>Medical Practitioner’s Representative:</td>
<td>Ms Catherine Stock, Counsel instructed by Kings View Chambers</td>
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<td>GMC Representative:</td>
<td>Mr Saul Brody, Counsel</td>
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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.
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Overarching Objective

Throughout the decision making process the tribunal has borne in mind the statutory
overarching objective as set out in s1 Medical Act 1983 (the 1983 Act) to protect,
promote and maintain the health, safety and well-being of the public, to promote
and maintain public confidence in the medical profession, and to promote and
maintain proper professional standards and conduct for members of that profession.

Determination on Impairment - 20/08/2019

1. The Tribunal has to decide in accordance with Rule 22(1)(f) of the General
Medical Council ('GMC') (Fitness to Practise) Rules 2004, as amended ('the Rules')
whether Dr Blakely’s fitness to practise is impaired by reason of misconduct.

Background

2. Dr Blakely qualified in 2005 from the University of London and from 2007
specialised in aesthetic cosmetic treatment. At the time of the index events Dr Blakely
was the Medical Director of Light Touch Clinic ('the Clinic') based in Weybridge, Surrey.
The Clinic specialises in cosmetic injectable treatments including Botox and dermal
fillers.

May 2018 Hearing

3. Dr Blakely’s first hearing took place before a Medical Practitioners Tribunal from 8
to 16 May 2018 (‘the May 2018 Tribunal’). At that hearing Dr Blakely admitted that
between January and March 2016, she had caused and/permitted the recording of
consultations (‘the recordings’) between Dr A and several patients at the Clinic. These
recordings were related to alleged accounting fraud. It was also admitted that these
recordings were made without the consent of Dr A, the patients, the GMC and the Care
Quality Commission (‘CQC’).

4. Dr Blakely also admitted that in May 2016 she had engaged in email
correspondence with a number of patients, during which time she asserted that advice
had been sought and taken from the GMC and CQC, following which recordings were
made. The May 2018 Tribunal found her actions in this regard to be misleading and
dishonest.

5. The May 2018 Tribunal found Dr Blakely’s actions breached multiple principles of
Good medical practice 2013 ('GMP'). Whilst accepting that no serious harm was caused
to the health, safety and welfare of the public, it was satisfied that her actions relating
to the recordings would be considered to be deplorable by fellow practitioners. The May
2018 Tribunal further determined that members of the public would be shocked by
Dr Blakely’s dishonesty in her communications with patients in May 2016.
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6. The May 2018 Tribunal determined that Dr Blakely’s actions constituted serious misconduct. It was of the view that, in regard to the recordings, her conduct was remediable, she had demonstrated a level of insight and there was negligible risk of repetition. However, it also determined that her actions were so serious that they did breach a fundamental tenet of the profession and the potential consequences for patient confidentiality were very serious. The May 2018 Tribunal found that Dr Blakely’s insight into her dishonesty was limited and that it could not be satisfied that she would not repeat it if faced with similar circumstances. The May 2018 Tribunal concluded that Dr Blakely’s fitness to practise was impaired by reason of her misconduct.

7. The May 2018 Tribunal having balanced the aggravating and mitigating factors in Dr Blakely’s case determined to suspend Dr Blakely’s registration for a period of six months. It considered this was an appropriate and proportionate sanction, which would send a clear message to Dr Blakely, the public and the profession that her actions were unacceptable. Further, it considered that this period of time would give Dr Blakely sufficient time and opportunity to reflect on and gain insight into her dishonesty, such that she would not repeat it. The May 2018 Tribunal determined that her case should be reviewed and set out some suggestions that it considered might assist the reviewing Tribunal.

November 2018 Tribunal

8. Dr Blakely’s case was reviewed on 19 November 2018 (‘the November 2018 Tribunal’). At that hearing Dr Blakely provided a witness statement and gave oral evidence. However, the November 2018 Tribunal found that there was a discrepancy between these parts of her evidence. In her written statement Dr Blakely asserted that: ‘I accept the tribunal’s findings and have done my best to learn from them’, but in her oral evidence she made it clear that she did not accept the May 2018 Tribunal’s finding that she had been dishonest. Further, that Tribunal found that whilst she did express remorse for her actions this seemed to be restricted to the personal impact on her. The November 2018 Tribunal saw no evidence that she understood the seriousness of her actions, nor their impact on public confidence in the medical profession and its reputation. The November 2018 Tribunal found that the documentary evidence that Dr Blakely provided for the hearing lacked detail. It concluded it could attach little weight to her oral evidence that she had engaged in online learning, as there was no documentary evidence provided of that. The November 2018 Tribunal determined that there remained serious concerns about Dr Blakely’s insight; that the evidence in support of her remediation was insufficient; and that there remained a risk that Dr Blakely could repeat her dishonest misconduct if similar circumstances arose in the future. It determined that a finding of impairment by reason of misconduct was necessary in order to uphold public confidence in the medical profession, and proper professional standards and conduct for the medical profession.
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9. The November 2018 Tribunal determined that there remained a risk to the public confidence and reputation of the profession where a doctor has shown inadequate insight into dishonest misconduct and thus could repeat it should similar circumstances arise in the future. As such, the November 2018 Tribunal determined that a further period of suspension was required in order for Dr Blakely to engage in meaningful reflection on her actions, not just for the impact they have had on her, but for the wider profession and public confidence. Additionally, it was of the view that Dr Blakely should be afforded the opportunity to gather documentary evidence of the type suggested by the May 2018 Tribunal. The November 2018 Tribunal determined to direct a review of this case and was of the view that it may assist the reviewing Tribunal if Dr Blakely provided:

- Evidence that she has reflected on the findings of the May 2018 Tribunal and this Tribunal, and that she has developed further insight into her misconduct (specifically in relation to the dishonest sending of emails to the patients in May 2016)
- Evidence that she has reflected on the impact her misconduct has had on public confidence in the medical profession and the reputation of that profession
- Evidence of relevant continuing professional development activities, for example: appraisals, courses on professional ethics, confidentiality, data protection and complaint handling
- Evidence that she has kept her medical knowledge and skills up to date; and
- Any other information that Dr Blakely considers will assist.

Today’s Review Hearing

The Evidence

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

11. Dr Blakely provided her own reflections document dated 6 August 2019 and provided oral evidence to the Tribunal.

12. This Tribunal has considered all the evidence provided by the GMC and Dr Blakely which includes:

- A Record of Determinations of the MPT hearing dated 16 May 2018
- A Record of Determinations of the MPT Review hearing dated 19 November 2018
- Correspondence between the MPTS and Dr Blakely, including a letter dated 27 December 2018 acknowledging Dr Blakely’s appeal against the November
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2018 Tribunal’s decision and subsequent letter dated 1 May 2019 which confirmed that the High Court had dismissed Dr Blakely’s appeal
- Correspondence between the GMC and Dr Blakely
- Certificate of attendance at a course on maintaining professional ethics on 24 July 2019
- Certificates of Achievement in Data Protection and Complaint Handling
- List of CPD completed
- Appraisal Document 11 August 2019
- Character references.

Dr Blakely’s Reflections and Evidence

13. In her reflections statement, Dr Blakely outlined the particular circumstances which led to her making the covert recordings. She outlined that she had been advised by the legal advisors of a firm of private investigators to record conversations with Dr A (a partner in her practice, whom she believed may have been involved in an accounting fraud) and some of his patients. Dr A later contacted the GMC and complained that she had recorded some of his consultations. Dr Blakely stated that she was ‘distraught and horrified’ when she was informed that the matter was being investigated and that dishonesty was being alleged as ‘I truly believed at the time I had sought their (GMC and CQC’s) advice prior to doing anything’. She stated that, when writing the emails, it was not her intention to mislead patients but to allay their fears.

14. Dr Blakely said that she was shocked at the outcome of the May 2018 Tribunal as at the time she could not see that she had been dishonest. She described her review hearing as a ‘complete disaster’. She had believed that supporting documents for her case had been submitted digitally which they had not been. She stated that she could not believe that she had been ‘so foolish’ not to ensure the documents had been sent and received. She acknowledged that the written statement that she had prepared for the Tribunal did not demonstrate any reflection. She stated that she realises that she made grave mistakes and put her own interests ahead of those of her patients. Further she stated that:

‘I have spent a lot of time thinking about my actions and how they may have affected people. When I was advised to make recordings between my ex-colleague and his patients, I felt inherently uncomfortable. It was not a decision I took lightly because I had to fight my own natural urge not to do it. I took the advice of other professionals which I allowed to override my own morals and ethics. At the time, I felt that because I had taken advice, then I couldn’t be seen as having done anything wrong.

On reflection, none of this has ever sat well with me, I have felt embarrassed and ashamed and I am horrified that my actions have caused pain to others, especially patients who placed trust in me.’
15. She further stated that she realises that she should have stood by her principles and not been talked into recording patient consultations. She accepted that:

'I have only myself to blame as in the end it was my decision. The whole situation was stressful and confusing, and I made the wrong decisions at a critical time.

I am truly sorry for any hurt or pain I may have caused my patients. I have always been sensitive to the responsibility of patient confidentiality.’

16. She acknowledged that it has taken her a long time to come to terms with the Tribunal’s findings in regard to the emails and that she could:

'... honestly say that it was at the time never my intention to mislead or be dishonest.

Up until recently, I did not appreciate these emails may have been interpreted differently to how I intended....

I realise now that my emails in essence state that the GMC and CQC were integral to the decision-making process. This is not correct, and I am deeply sorry for this. I understand now that the words used in these emails were not a true reflection of the conversation with the GMC and were therefore untrue.

... I can understand where it all went wrong and the fact that on reflection, I have been misleading and dishonest cuts to my core.’

17. Dr Blakely outlined that she had attended a maintaining professional boundaries course and had gained a great deal from it:

'It was a very challenging experience. Up until the course I had not acknowledged that I had behaved dishonestly because I did not see that there could be another interpretation of the emails. In my eyes, they were never intended to mislead. I had some difficult conversations with the course tutor and through these, I was able to see how a patient might have read my emails and why they would feel misled by them. I was forced to come to terms with my role in this awful situation.

The course really helped me finally understand the impact of my actions on others including, colleagues, the profession and the public, and I should have attended this sooner.
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I can assure everyone that this was a one off at a time of extreme stress. I do not consider myself a dishonest person and this will not be something ever to be repeated.’

18. In her oral evidence Dr Blakely confirmed the contents of her reflections document. She provided a summary of what has occurred since her review hearing in November 2018. She said that she had to do some real soul searching to understand what had happened. She said that she started this in earnest in the new year, by reading some books, and began to understand that what she had done was wrong and that she needed to explore this further. Dr Blakely said she recognised that she had allowed her ego to cloud her judgement and to try and protect herself and that she had got into an ‘unbelievable mess’ because of it. She told the Tribunal that the one to one maintaining professional boundaries course was both the worst and best day of her life. She described the tutor pushing her hard during the course. It helped her to accept that her actions around making the recordings and writing to the patients could be interpreted as not being an honest representation. Dr Blakely said she accepts that the contents of those emails were not true. She said she now understands how serious her actions were, and she would be ‘horrified’ if someone recorded her consultations with patients. She said that such actions are damaging to the medical profession and it is ‘awful when someone like me’ erodes the trust that the public has in the medical profession.

19. Dr Blakely stated that she is a different person now than she was in November 2018 and that she now wishes to live her life in a ‘better and more positive way’. She provided examples of how her clinic deals with data protection and confidentiality and confirmed that she has attended courses on these subjects.

20. Dr Blakely also informed the Tribunal about how she has kept her medical skills and knowledge up to date. She stated that she felt positive about her recent appraisal. She said she was really sorry for everything that has happened, and that she made a series of poor decisions. She expressed remorse about having affected patient confidentiality and for the impact that the case had on her colleagues. She said she now deals with stress in a very different way and she has made positive changes in her life. She said that she will be a far better doctor going forwards if allowed to return to practice.

21. In response to Tribunal questions she said if patients have asked her about her status as a doctor she has been honest. She estimated that ‘10 or 20 patients’ have asked her about her status, and she has told them that she was not on the register as she was found to have been dishonest. She confirmed that nowhere on her website does she describe herself as a medical doctor. When questioned about her appraisal, she told the Tribunal that she and her appraiser, Dr B, had discussed how to uphold the expectations of being doctors in the community. She provided examples of how she now deals with stressors. She told the Tribunal that her insurers have requested a rebate on the fees that had been spent on her original
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case, which is money that she does not have. She said she has not allowed the stress of this to derail her as she once might have done. She said previously she had avoided confrontation but now no longer worries about confrontation, instead dealing with situations more directly. When asked how her approach to her practice would change she said that she would follow her complaints procedure, and understands that there can be time for reflection before responding, rather than respond urgently. She said she would try and take emotion out of decision-making. Dr Blakely said if advising a doctor who was in the same situation as she was she would advise them to seek advice from their medical defence association and be factual and truthful in any correspondence with patients. She told the Tribunal that she would be able to seek advice from other, more senior, medical colleagues if she needed advice on what to do in certain circumstances.

Submissions

22. On behalf of the GMC, Mr Brody submitted that the GMC is neutral on the issue of current impairment. He accepted that the reflective statement provided by Dr Blakely does cover points the November 2018 Tribunal said would assist the Tribunal. He said that the GMC accepts that this reflective statement demonstrates a degree of insight of the impact of Dr Blakely’s actions on her patients, colleagues and the wider profession and there is at this stage a recognition that, although she had not recognised her dishonesty to begin with, she does now recognise, with hindsight, that her actions were dishonest. He accepted that the doctor’s attendance at the Maintaining Professional Boundaries Course and the completion of courses relating to complaints handling and data protection go some way to demonstrate that the doctor has sought to provide this Tribunal with evidence that she has kept her medical skills and knowledge up to date and remediated her misconduct.

23. On behalf of Dr Blakely, Ms Stock submitted that Dr Blakely’s fitness to practise is no longer impaired. She said that Dr Blakely has tried to do her best to be open and honest and tried her best to answer questions posed to her when giving her evidence this morning. Ms Stock submitted that Dr Blakely has been on a long journey, that she had been defrauded by the doctor who had referred her to the GMC and for a long time felt angry about this. At the November 2018 hearing Dr Blakely was upset and unable to give her best evidence. Ms Stock submitted Dr Blakely has found it difficult to come to terms with her actions but the maintaining professional boundaries course made her do so. Ms Stock told the Tribunal that Dr Blakely has demonstrated remorse both in her written reflections document and in her oral evidence; that she has done a huge amount of work to develop insight; and fully appreciates the gravity of her misconduct. She submitted that Dr Blakely has done all she can to remediate her misconduct, and drew the Tribunal’s attention to the steps Dr Blakely had taken and the courses that she has attended. She said that there is no risk of repetition of similar conduct.
The Relevant Legal Principles

24. The Tribunal reminded itself that the decision of impairment is a matter for the Tribunal’s judgement alone. As noted above, the previous Tribunal set out the matters that a future Tribunal may be assisted by. This Tribunal is aware that it is for Dr Blakely to satisfy it that she would be safe to return to unrestricted practice.

25. This Tribunal must determine whether Dr Blakely’s fitness to practise is impaired today, taking into account Dr Blakely’s conduct at the time of the events and any relevant factors since then such as whether the matters are remediable, have been remedied and any likelihood of repetition. The Tribunal also reminded itself of paragraph 164 of the Sanctions Guidance, February 2018 which sets out the need for the doctor to show on a review hearing that:

   a) They fully appreciate the gravity of their misconduct;
   b) They have not reoffended;
   c) They have maintained their skills and knowledge; and
   d) Patients will not be placed at risk by resumption of unrestricted practice.

The Tribunal’s Determination on Impairment

26. In reaching its decision on impairment, the Tribunal first considered whether Dr Blakely fully appreciates the gravity of her misconduct. The Tribunal noted that it has taken some time for Dr Blakely to admit that her actions could be seen as dishonest. In her evidence she told the Tribunal that her attendance at the day long, one to one, Maintaining Professional Boundaries course, which she described as being ‘brutal’, was instrumental in her coming to terms with her dishonest conduct. This intensive and demanding course made her challenge her thinking and helped her to understand the impact that her actions had on others, including patients and colleagues, as well as forcing her to consider the impact that her actions had on the medical profession. The Tribunal was of the view that this course seemed have been very helpful to Dr Blakely and that she has used principles that she has learnt on it to shape her reflective statement. The Tribunal determined that Dr Blakely does now seem to appreciate the gravity of her misconduct as evidenced by her appraisal, her reflective statement and the evidence that she has provided to the Tribunal.

27. The Tribunal noted that there was no evidence placed before it that Dr Blakely has reoffended since the index events in this case.

28. In relation to Dr Blakely maintaining her skills and knowledge, the Tribunal noted that she seems to have been undertaking consistent continuous professional development. She has completed independent study and attended relevant courses such as the courses on data protection and complaint handling, together with CPD relevant to the clinical area in which she has practised. The Tribunal noted that she has provided summaries of what she had learnt from these courses which was very helpful in its assessment of her learning. The Tribunal was of the view that Dr
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Blakely has maintained her skills and knowledge during the time she has been suspended.

29. When considering if patients could be placed at risk by her resumption of unrestricted practice, the Tribunal noted that this is not a case where there are clinical concerns about a doctor whose practice may pose a risk to patients through clinical incompetence. Dr Blakely’s failings were related to her conduct and dishonest communications. In all the circumstances the Tribunal was of the view that Dr Blakely has dealt with these elements of her practice in such a way that patients would not be placed at risk of harm if she were allowed to return to unrestricted practice.

30. In relation to the issues of insight, remediation and repetition the Tribunal noted Dr Blakely’s evidence that she now understands that when making decisions in stressful circumstances she needs to step back and take time to reflect before deciding what to do. The Tribunal was satisfied that Dr Blakely now has insight into her actions and their impact on the reputation of the profession. It considers that her insight has developed such that the risk of repetition of similar dishonest conduct is low. Having regard to its statutory overarching objective, The Tribunal was of the view that, although not easily remediable, this misconduct is capable of being remediated and that Dr Blakely has addressed the issues raised by the 2018 Tribunals. On the basis of the evidence placed before it this Tribunal has concluded that she has sufficiently addressed the concerns raised in the previous findings of impairment.

31. Dr Blakely has now been suspended for 15 months. The Tribunal was satisfied that the period of suspension served marks the seriousness of Dr Blakely’s behaviour, and considered that the public interest is now best served by allowing Dr Blakely to return to unrestricted practice.

32. Bearing all of the above in mind, the Tribunal determined that Dr Blakely’s fitness to practise is no longer impaired by reason of her misconduct.

33. Having reached this decision, the Tribunal determined to revoke the order of suspension in place on her registration with immediate effect.

34. That concludes Dr Blakely’s case.

Confirmed
Date 20 August 2019

Mr Martin Jackson, Chair