



**Primary Health Lists**

**The Tribunal Procedure Rules (First-tier Tribunal) (Health, Education and Social Care) Rules 2008**

**Northamptonshire PCT**

**V**

**Dr Rapinder Adekola**

**[2011]PHL 15437**

**Before** Judge Nancy Hillier  
Dr Douglas Kwan  
Ms Jackie Neylon

**Sitting on** 20 February 2012.

**DECISION**

1. This is an application by Northamptonshire PCT dated 2 November 2011 for National Disqualification of Dr Adekola to be imposed pursuant to Regulation 18A(3) of the National Health Service (Performers Lists) Regulations (as amended) (the Regs).

**Background.**

2. On 2 August 2011 On 2 August 2011 the NHS Milton Keynes and Northamptonshire Reference Committee (the committee) suspended Dr Adekola for 60 days on the grounds of consistent failure to engage with NHS Northamptonshire by her refusal to accept correspondence/respond to alternative means of contact and allegations of unprofessional behaviour, including permitting the use of her name to attempt to procure

scorpion venom, abusive behaviour towards the police and failing to inform her GP appraiser of her engagement in research.

3. On 21 September 2011 the committee decided to remove Dr Adekola from NHS Northamptonshire's Medical Performers List. By letter of 23 September 2011 Dr Adekola was informed of the decision and that an application for National Disqualification would be made.
4. Dr Adekola did not appeal the decision to remove her from the list nor has she engaged in these proceedings.
5. The tribunal administration have attempted to communicate with Dr Adekola by letter, email and telephone. The letters have been unanswered, Dr Adekola responded to the email by saying that it was a personal address and she would not accept Tribunal correspondence on it. When contacted by telephone Dr Adekola confirmed that it was her speaking but as soon as tribunal staff identified themselves she hung up and has refused to accept calls since.
6. The application made for National Disqualification is on the grounds that the PCT wishes to prevent potentially severe consequences arising from the very serious and significant inadequacies in Dr Adekola's conduct and suitability which formed the findings at the removal hearing to be transferred elsewhere.
7. NHS Northamptonshire (NHSN) referred the case to the General Medical Council and Dr Adekola remains suspended by the Interim Orders Panel for a period of 18 months from 30 August 2011.
8. At a telephone case management hearing which was not attended by Dr Adekola on 21 December 2011 the Tribunal Judge confirmed that the case was suitable for hearing on the papers under Rule 23. Dr Adekola was directed to confirm in writing to the Tribunal whether she wished to oppose the application and whether she sought an oral hearing by 5pm on 6 January 2012. No response was received from her.
9. Dr Adekola was also directed to file evidence in response to the application by 5pm on 6 January 2012. A copy of the guidance to statements and evidence was sent to her. No evidence was filed. The PCT filed evidence as directed and prepared a bundle of relevant documents.

## **Relevant Law**

- 10.2.1 Regulations 18A (3) and (4) of the regulations gives a PCT the power to apply to this Tribunal for a national disqualification to be imposed on the practitioner within three months of the date of the removal of the practitioner from the Performers List. Under Regulation 18A(5) a national disqualification is imposed on a person, no PCT may include them in any performers list from which they have been disqualified and if they are included in any such list they must be removed from that list forthwith.
11. Regulations 18A (6) and (7) provide that a person who is nationally disqualified may apply for a review . The review cannot be made before the end of the period of two years beginning with the date on which the national disqualification was imposed or one year beginning with the date of a subsequent review.
12. The former period may be extended to five years if on making a decision to impose national disqualification, the tribunal states that it is of the opinion that the criminal or professional conduct of the practitioner is such that there is no realistic prospect of a further review being successful if held within the two year period.
13. The PCT have brought the case and therefore the burden of proving it on the evidence is borne by them. They must show that an order for national disqualification should be made on the civil standard of proof, known as the balance of probabilities.

## **The evidence**

14. Following a referral from another agency in 2009 NHSN were concerned about Dr Adekola's lack of insight into their concern and an apparent lack of respect towards and understanding of the role of other agencies. The PCT attempted to support her when her employing practice indicated real concerns about Dr Adekola's own health and her severely adverse reactions to any perceived criticism of her.
15. In April 2011 Dr Adekola was arrested with her husband had been following a police visit to their home to enquire about the attempted

acquisition of scorpion/spider venom. The police had been informed by the supplier of this attempted purchase and that the request had come from a company which was no longer trading but had been set up by her husband. The police alleged that both Dr Adekola and her husband had been aggressive to the police when contact was made and they were both interviewed under caution. No charges were brought against them.

16. A multi agency meeting in April 2011 discussed issues of concern including alleged aggression towards police, the attempted acquisition of the venom and potential use of venom for research outside of approved research framework. Dr Adekola had not registered her own children with a separate GP, contrary to basic guidance for GP's not to treat members of their families, and there was consequent concern about potential risks to patients and her own children. Dr Adekola had not identified research into venom at her appraisal nor had she notified her employer of the police arrest.
17. Dr Adekola was suspended by her employers on the 4th April 2011 pending ongoing investigations. At a final disciplinary hearing held on 21 July 2011 she was dismissed for gross misconduct.
18. NHSN referred the matter to their Reference committee, but despite extensive attempts to contact Dr Adekola, she did not attend the hearing on 21 September 2011. At that hearing the following findings were made:
  - That Dr Adekola had failed to cooperate with and engage with the PCT following the referral in 2009.
  - That in March 2011 she had been actively involved in research involving death stalker scorpion and black widow spider venom and had allowed her name to be used to contact "Venomtech" to attempt to procure the same. She had told the police that she and her husband were involved in research using these venoms as a "tincture" and as a "suppository" and extensive material had been discovered in her home on the potential effects of venom.
  - That when the police attended to discuss the referral Dr Adekola she behaved in a "highly aggressive" manner necessitating

other officers to be called) which was not in keeping with her profession.

- That Dr Adekola had not discussed this research interest with her appraiser.
- That she failed to cooperate with NHSN following an initial engagement, thereby demonstrating an unwillingness to be regulated.
- Failing to keep NHSN apprised of her current address as required by Regulation 17 and of her current telephone number under Regulation 4.
- Failing to notify NHSN of her employment disciplinary proceedings and subsequent dismissal as required by Regulation 9
- Failing to accept normal, recorded and special delivery mail from NHSN from July 2011 to January 2012.

19. The committee concluded that there was sufficient evidence as a result of these findings for Dr Adekola to be removed from the list on Regulation 10 “unsuitability” grounds. Contingent removal was found to be inappropriate on the grounds that these were serious issues relating to professional conduct and probity. Further, although the quantities of venom requested were insufficient to be given in a lethal dose the venom was not sterile or licensed for clinical use and could have had health effects if administered. The committee also concluded that failure to engage in both 2009 and 2011 indicated a pattern of non cooperation demonstrating an unwillingness to be regulated and breach of the GMC Good Medical Practice guidelines.

### **Tribunals conclusions with reasons**

20. We had regard to the 226 bundle of relevant documents provided by the PCT and to the Regulations and relevant guidance. We concluded that on the balance of the evidence that we were satisfied to the relevant standard

that National Disqualification is appropriate and proportionate in this case. Our main reasons, expanded below, are that consistent failure to engage with NHS Northamptonshire, ignoring the basic regulations by refusing to accept correspondence/respond to alternative means of contact together with the potential seriousness of permitting the use of her name to attempt to procure scorpion venom with the intention of conducting unregulated research, abusive behaviour towards the police and the un appealed findings of the Referral Committee mean that these issues are not simply local matters and that Dr Adekola should not be included on the list of any other PCT.

21. We took into account the Department of Health's guidance for PCTs entitled "Primary Medical Performers Lists - Delivering Quality in Primary Care" which sets out some of the issues to be taken into account in considering an application for a National Disqualification. We had particular regard to the statement in the document that we "should recognise the benefits of a national disqualification both for protecting the interests of the patients and for saving NHS resources". In this respect we concluded that a great deal of resources had been expended in trying to engage Dr Adekola in both 2009 and 2011 and she had refused to engage for more than a short time. That Dr Adekola had not discussed this research interest with her appraiser. These failures in our view demonstrate an unwillingness to be regulated. Her failures to supply information under Regulations 4, 9 and 17 and of her current telephone number under Regulation 4 and her refusal to accept normal, recorded and special delivery mail from NHSN from July 2011 to January 2012 also demonstrate significant resource issues.
22. We also considered the seriousness of the facts which gave rise to the original removal and to whether the reasons for the removal were "essentially local". We concluded that the findings that Dr Adekola had been actively involved in research involving death stalker scorpion and black widow spider venom and had allowed her name to be used to contact "Venomtech" to attempt to procure the same were very serious.

23. Finally, we considered the position overall and the proportionality of making an order for national disqualification in this case and concluded that the seriousness of the reasons for removal, including potential risks to patients, and the very limited explanations and mitigation submitted by Dr Adekola, meant that the decision was proportionate and balanced. The potential risks to patients were potentially serious if Dr Adekola had obtained the venom and used it in unlicensed research.
24. We were hampered by the lack of evidence filed by Dr Adekola in considering how she might remedy the position in the future. We had no evidence about the extent to which the concerns have been addressed by her or could be remedied by her or of any insight shown by her into the seriousness of her conduct and her failure to acknowledge the PCT's legitimate concerns. All the evidence points to failure by her throughout to cooperate or to sustain engagement with the PCT, which gives us no confidence that she would cooperate with a different PCT in the future.
25. We also took into account the interests of Dr Adekola in being able to pursue her profession. It is of course a very strong measure to impose a National Disqualification thereby preventing Dr Adekola from working for the NHS, but we have concluded that given there is little evidence to counter the application due to Dr Adekola's failure to engage with these proceedings her interest in pursuing her career must be denied in the interest of efficiency and of patient safety.
26. We considered extending the period within which an application for a review may not be made to 5 years under Regulation 19. The PCT had not applied for this and in the circumstances that Dr Adekola has not been convicted of a serious crime we did not conclude that such an extension was warranted.

It is ordered

That an order for national disqualification from any of the lists set out in Regulation 18(1) of the 2004 Regulations be made in respect of Dr Adekola

No order to be made under Regulation 19 of the 2004 Regulations.

Tribunal Judge Nancy Hillier  
Lead Judge Care Standards and Primary Health Lists

Date Issued: February 23 2012.

