

## **First-tier Tribunal Primary Health Lists**

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

**2025-01409.PHL**

**Hearing held Remotely.  
on 29<sup>th</sup> May 2025**

**Before  
Tribunal Judge Judith Crisp  
Professional Member Doctor M Stefan  
Specialist Member Ms M Tynan**

**BETWEEN:**

**NHS England**

**Appellant**

**-v-**

**Dr Fhorkan Rakib Uddin**

**Respondent**

### **DECISION**

#### **The Application**

1. The application before the Tribunal is made by NHS England to extend a suspension against Dr. Uddin on the Medical Performers List pursuant to Regulation 12 (6) (a) of the Performers List Regulations. The application to extend pursuant to Regulation 12 (16)(a) is dated the 4<sup>th</sup> March 2025. The application is opposed by the Respondent.
2. This hearing took place remotely as a paper decision. The Tribunal considered the bundle filed which included the written representations of both parties.
3. The suspension was imposed on the 6<sup>th</sup> September 2024 and was an immediate suspension following the arrest of Dr. Uddin on the 19<sup>th</sup> of August 2024 for allegations of fraud by false representation, money laundering and assisting in illegal suspension.
4. The background relates to a self-referral made by Dr. Uddin on the 24<sup>th</sup> of August 2024 regarding a Home Office Investigation into illegal immigration and fraud. It is alleged that Dr. Uddin had signed supporting letters to confirm that he had seen a child/children and their parents at a surgery when he had not done so in the context of patients adding or changing birth certificates to submit

false applications under the Human Rights Act to remain in the United Kingdom.

5. A Performers List Decision Panel (PLDP) was convened for the 6<sup>th</sup> October and the suspension was imposed. It was reviewed on the 9<sup>th</sup> October and the suspension was upheld. Dr Uddin did not request an oral hearing. NHS England remained of the view that, for reasons set out in Notification of suspension letters, the suspension should continue until the outcome of the Home Office Investigation was known.
6. The private practice at Nuffield Parkside Hospital has permitted Dr Uddin to continue to see patients but has reduced the scope of practice and restricted him from carrying out any activity in relation to ID verification or authentication. Patients would continue to be seen for clinical reasons.
7. On the 10<sup>th</sup> September the GMC case examiners made a decision not to refer Dr. Uddin to the Interim Orders Tribunal at that time. The email provided confirms they had spoken to the Chief Immigration Officer who advised that it was not clear if Dr. Uddin had seen the patients before writing letters, the investigation seemed to involve numerous patients or purported patients. The criminal investigation would look into this and attempt to uncover.

### **Legal Framework**

8. National Health Services (Performers Lists) (England) Regulations 2013.
  - 12 (1) If NHS England is satisfied that it is necessary to do so for the protection of patients or members of the public or that it is otherwise in the public interest, it may suspend a Practitioner from a performers list-
    - (a) while NHS England decides whether or not to exercise its powers to remove the Practitioner under regulation 11 (1) (c), 14 (3) or (5), 16 or 17 (6) (b) or to impose conditions on the Practitioners inclusion in a list under regulation 10;
    - (b) while it awaits-
      - (i) the outcome of any criminal or regulatory investigation affecting the Practitioner , or
      - (ii) a decision of a court anywhere in the world, or of any regulatory body, affecting the Practitioner;
  - 12 (15) NHS England may extend the period of suspension under paragraph (12) or impose a further period of suspension under paragraph (13), so long as the aggregate does not exceed 6 months.
  - 12 (16) Any period of suspension referred to in paragraph (13) (a) or (b) may be extended beyond 6 months if-
    - (a) On the application of NHS England, the First-tier Tribunal orders
  - 12 (17) if the First Tier Tribunal makes an order in accordance with paragraph (16)(a), it must specify
    - (a) A date on which the period of suspension is to end;
    - (b) An event beyond which it is not to continue.

### **Evidence**

9. NHS England submit that Dr. Uddin cannot be reinstated on the Performers

List subject to interim conditions, as he requests, whilst the Home Office investigation continues as “the wording under Regulation 10(1) makes it clear that conditions are only to be used in inefficiency cases with any wording around suitability being excluded.”

10. Under 13.4 of the Policy on Managing the NHS Performers Lists (“the Policy”) states that:  
Conditions cannot be used as a substantive measure in an unsuitability case. The effect of the law is that a performer is either suitable or unsuitable. The only exception to this may be where conditions are used as an interim measure as an alternative to suspension.
11. NHS England further submit that conditions are not applicable as they can only be offered by the Applicant at an oral hearing.
12. In any event, they submit that the threshold for what the Applicant and by extension the Tribunal might consider to be exceptional circumstances is in no way met in this case.
13. The Tribunal should consider the evidence objectively, it is not within the remit of either body to determine the strength of the evidence being considered as part of the criminal investigation.
14. The Respondent is facing allegations of fraud. Working in primary care under the NHS means working for public funds and this requires an extra level of scrutiny from the Applicant. The Respondent has to demonstrate that they are safe and capable of working independently in an NHS primary care setting.
15. Dr Uddin submits that he has been interviewed and has denied the allegations. He maintains that he had seen patients on a private basis as a GP and in some circumstances provided letters which he believed to contain factual information. He had no reason to believe that the information was being used in unlawful immigration applications.
16. The Home Office had produced no evidence that either Dr Uddin had not seen the patients nor that he knew the documentation he produced was being used in fraudulent applications.
17. He was released from bail conditions on the 19<sup>th</sup> of November after a period of 3 months and was released under investigation.
18. He obtained his MBBS from the University of London in 2000 and his MRCGP in August 2008. He has been working as a GP Partner since 2012 at Chartfield Surgery. He qualified as a GP Trainer in 2014.
19. He has never been the subject of any criminal investigation, nor has he been subject to a GMC or NHS referral. He has stepped back from his private practice.
20. Dr Uddin submits that interim conditions could adequately mitigate the reputational risk to NHS England and the wider profession as the allegations

do not relate to his clinical practice and the allegations only relate to his private practice.

21. "The Policy" –

"a decision to suspend a performer is one of last resort where it is judged necessary to manage risk. Suspension should be considered as a last resort, where it is deemed that the risk cannot be managed by any other means.

Further "the Policy "requires NHS England to ensure that "other action, for example restriction of duties or supervision, has been considered and deemed not appropriate".

22. The Senior GP Partner has provided an email to confirm that they would be happy to provide clinical supervision if necessary. They had undertaken a thorough risk assessment and had digitalised the records of all private patient notes and correspondence to protect the integrity of any future investigation, should they be required.

23. Dr Uddin was considered one of the best clinicians in the Practice, he was an integral part of their team and was considered trustworthy.

**The Tribunal's conclusions with reasons**

24. The application before the Tribunal is to permit an extension to a suspension. The only orders which this Tribunal can make are to allow or refuse the application for an extension. The application is not an appeal.

25. Dr Uddin was first suspended on the 6<sup>th</sup> of September. That decision was later ratified on the 9<sup>th</sup> October. The Tribunal has not seen any evidence to indicate that NHS England has since enquired with the Home Office as to whether any aspect of the case can be investigated whilst considering whether it was necessary to apply to extend the suspension. There does not appear to be any evidence from NHS England that this case has been kept under review, as is required in "the Policy". They seek to await the outcome of the Home Office investigation. There is no evidence before the Tribunal as to how long that investigation could take. There does not appear to be any plan or active management by NHS England and it does not appear to the Tribunal that any review of whether it is necessary to continue the suspension has been made since the 9<sup>th</sup> October a period of some 7 months, that in itself is longer than the period of suspension can be imposed.

26. Any period of suspension can be extended for a period of up to 6 months, that period was deemed sufficient, in legislation, to enable NHS England to make any enquiries they believed necessary and to take any further protective action as required.

27. The purpose of a suspension is to protect patients or members of the public when necessary. It is not a sanction, it is a neutral act and put in place while NHS England decides, what action, if any, to take. Suspension should be considered as a last resort, where it is deemed that the risk cannot be managed by any other means. The Tribunal does not accept that the risks could not be

managed by anything other than suspension.

28. We accept as a Tribunal it is not our remit to consider the strength of the evidence which has led to the suspension following the arrest of Dr. Uddin. Similarly whilst both parties have set out in submissions whether Dr Uddin could return to work with conditions, we as a Tribunal cannot impose those conditions.
29. We have to decide whether it is necessary to extend the suspension bearing in mind the guidance and law. NHS England says that suspension is required to manage the reputational risk to NHS England and the wider profession.
30. Dr Uddin has in place at his private practice restrictions to prevent any completion of identification checks and associated documentation. He has been assessed by his NHS practice as low risk who have also offered to provide supervision as required, if thought to be necessary.
31. Importantly in this case when considering continued access to patients might risk or prejudice the ongoing investigation by the Home Office, the GP practice has confirmed all private notes have been digitalised and they have undertaken a thorough risk assessment.
32. Dr Uddin has never been the subject of any previous referrals to the GMC or NHS England and there is no suggestion that his clinical care is anything other than excellent. His senior GP Partner said he was the best clinician in his practice.
33. The GMC has not made an interim order and whilst the Tribunal accept that we are not bound by that decision, it is another factor when considering risk.
34. We accept that the offences for which Dr Uddin was arrested are serious and could undermine public trust and as such reputational risk to NHS England. However when considering whether it is necessary to extend the suspension, we have to consider the level of the risk and whether it can be managed safely.
35. We are satisfied on the basis of the arrangements currently in place and those offered by his senior GP Partner that the risks which appear to be primarily reputational, rather than risks to patient safety can be managed safely so as to protect NHS England and any patients.

**Decision:**

36. The application to extend the suspension is refused.

**Judge Judith Crisp**  
**First-tier Tribunal (Health, Education and Social Care)**

**Date Issued: 09 June 2025**