

**BEFORE THE FITNESS TO PRACTISE COMMITTEE
OF THE GENERAL OPTICAL COUNCIL**

GENERAL OPTICAL COUNCIL

F(25)20

AND

RUMAN DHALIWAL (SO-15863)

**DETERMINATION OF A SUBSTANTIVE HEARING
16-17 FEBRUARY 2026**

Committee Members:	Ms Sarah Hamilton (Chair/Lay) Ms Tasneem Dhanji (Lay) Ms Ann McKechin (Lay) Ms Ann Barrett (Optometrist) Ms Louise Gow (Optometrist)
Legal adviser:	Ms Aaminah Khan
GOC Presenting Officer:	Ms Holly Huxtable
Registrant present/represented:	Yes and represented
Registrant representative:	Ms Eleanor Curzon
Hearings Officer:	Ms Natasha Bance
Facts found proved:	All by virtue of the Registrant's admissions
Facts not found proved:	None
Misconduct:	Found
Impairment:	Impaired on public interest grounds
Sanction:	4 month Suspension – Without Review
Immediate order:	No

ALLEGATION (AS AMENDED)

The Council alleges that you, Ruman Dhaliwal (SO-15863), a student optometrist, whilst working at Specsavers, [redacted]:

1. Created false patient records for Patient A on:

- a. 24 February 2024;*
- b. 12 March 2024;*
- c. 3 April 2024.*

2. Created false patient records for Patient B on:

- a. 18 February 2024;*
- b. 22 February 2024.*

3. Created false patient records for Patient C on:

- a. 3 April 2024.*

4. Your conduct at 1, 2 and 3 above was:

- a. misleading; and/or*
- b. dishonest in that you knowingly created false records to use as evidence of your work-based assessments.*

And by virtue of the facts set out above, your fitness to undertake training is impaired by reason of misconduct.

Preliminary issues

1. Ms Huxtable, on behalf of the General Optical Council ('the Council'), raised as a preliminary issue that there was an error in the Allegation, in that the Registrant's registration number should read 'SO-15863' rather than 'CO-15863', which she applied to amend. Ms Curzon, on behalf of the Registrant, had no objection to this being amended. The Committee was satisfied that this amendment could be made without causing any injustice and made the amendment under Rule 46(20) of the General Optical Council (Fitness to Practise) Rules 2013 ("the Rules").
2. Ms Curzon indicated that at points during the hearing where there would be reference to personal matters, including [redacted] matters relating to the Registrant and his [redacted], she would be inviting the Committee to sit in

private whilst dealing with such matters. Ms Huxtable confirmed that she would have no objection to that course. The Committee, after hearing legal advice from the Legal Adviser on Rule 25, which permits sitting in private session to hear [redacted] and other private matters, granted Ms Curzon's application to sit in private to the extent necessary when required during the hearing.

DETERMINATION

Admissions in relation to the particulars of the allegation

3. The Registrant admitted the facts of the Allegation in their entirety. The Committee therefore found all of the facts proved by reason of the Registrant's admissions under Rule 40(6) of the Rules.

Background to the allegations

4. The Registrant registered with the Council as a student Optometrist on 28 October 2019. The Registrant has no previous fitness to undertake training history. At the material time, the Registrant was employed at Specsavers, [redacted] ("the Practice").
5. On 4 June 2024 the Practice sent a referral notifying the Council that the Registrant had "*falsely created... patient records over several weeks which he presented at his College of Optometrists Stage 1 assessments*".
6. Concerns came to light when a member of staff at the Practice wanted to try contact lenses and a discrepancy in her patient records was noted during her contact lens appointment. Her records showed that she had already received several contact lens trials, having had contact lenses fitted by the Registrant, which was not the case. The Practice investigated the inaccuracies in the patient records and discovered from speaking to the Registrant that he had created false patient records in order to support his College assessments.
7. The Practice referral to the Council raised concerns that false information had been entered into patient records by the Registrant in relation to three separate patients (two of whom were members of staff and the third was a member of the public) on five separate dates between February 2024 and April 2024.

Misconduct

8. As the Registrant admitted the Allegation in its entirety, and the facts were accordingly found proved, the case proceeded directly to the misconduct stage. With the agreement of both parties, the Committee heard submissions

in respect of misconduct and impairment together. However, it considered and decided the two issues separately and in turn.

9. The Committee had before it a bundle from the Council that included witness statements and exhibits relating to the investigation, documents from the College of Optometrists and the relevant patient records. It also had a bundle from the Registrant, which included his witness statement, his CV, references from professional colleagues and Continuing Professional Development ('CPD') Certificates.
10. Following Ms Huxtable opening the case on behalf of the Council, the Registrant gave evidence and was questioned by his representative Ms Curzon, Ms Huxtable, on behalf of the Council and the Committee.
11. In summary, the Registrant acknowledged that his conduct had fallen below the standards to be expected of a student Optometrist, for which he apologised and stated that he was very regretful. He accepted that his conduct was very serious and that he had taken time off to reflect. Having done so, the Registrant stated that he realised that his conduct affects public confidence in the profession and standards. It had damaged the reputation of the profession and trust between him and other clinicians, including the College assessors and the trust of the public.
12. The Registrant accepted that his actions could affect patients in future as clinicians rely upon patient records being accurate and inaccuracies could lead to misdiagnosis or inappropriate treatment. He acknowledged that patients could have been potentially harmed by other clinicians believing that they were competent with contact lenses when they had not been trained in their insertion and removal.
13. When giving evidence regarding his current position, the Registrant explained that from October 2025 he was now employed as an Optical Assistant at a Specsavers in [redacted] and that he disclosed to them at the interview his ongoing fitness to practise case, which they appreciated. He explained that he has been offered a pre-registration position and they are happy to support him and a plan has been developed to re-enrol with the College. The Registrant stated that he has a good relationship with the directors and they foster an environment of openness and honesty, so if he had any issues in future he would have no hesitation in asking for their help and support.
14. The Registrant gave evidence regarding the reflections that he had undertaken during his time away from the profession and explained what further training he had undertaken, which included a University course in Inverness, which filled some gaps in his clinical knowledge and completion of CPD in probity, ethics, insight and remediation. The Registrant expanded upon what he had learnt since the events in question and stated that he now had a greater appreciation for the Standards of practice, which he realised were not there as a hindrance but to support practitioners.
15. The Registrant gave evidence that he had also attended [redacted], which had helped him to address some personal issues that were ongoing at the time of the conduct. He stated that this had helped him to accept and move on from those personal issues and had taught him [redacted] should he encounter stressful situations in the future. The Registrant explained the techniques that he used, such as the STOP technique (stop, take a breath, observe and

- proceed), which helped him make better decisions. He also had learnt the importance of having a work/life balance and keeping on top of his physical and mental health.
16. When questioned by Ms Huxtable, the Registrant accepted that he had watched a College video on cheating on assessments before this conduct took place and that he had realised that his actions would constitute cheating. The Registrant acknowledged that at the time he was running regular weekly contact lens clinics and that he was not short of contact lens patients to fulfil his competencies. When asked if there was any particular reason why he could not have asked his work colleagues whether he could assess them for contact lenses for his competencies, he could not say why he did not ask them but explained that he made the decision to falsify the records abruptly, without thinking. He stated that his mindset at the time was that he was missing some competencies and that he was running out of time for the scheme of registration and did not want to miss the deadline.
 17. When asked about the impact of his conduct upon peers who had completed their assessments properly, the Registrant acknowledged that they would be upset and angry and that by cheating it discredited the assessment scheme and impacted other students. When asked about how he could satisfy the Committee that his conduct would not be repeated, the Registrant stated that it had been a while since the events in question, he had taken time off and went to Scotland to complete his University course. He stated that he had learnt a lot from that course, particularly on the duties of honesty and candour and from the CPD that he had completed and had a different perspective now. The Registrant stated that he understood the trust that the public place in Optometrists and he would never jeopardise that again.
 18. When asked by the Committee about his thought process at the time and why he chose the patients that he did, the Registrant stated that he had an upcoming assessment and made a bad decision to create the records that he needed. In relation to the patient who was not a work colleague, the Registrant explained the patient had been seen for an initial contact lens check by him but did not return for his review appointment, which is what the Registrant falsified to complete his competency. For one of the colleagues, they had a relevant prescription for the required competency. He accepted that he realised that this was cheating but tried to rationalise his behaviour, which showed how naïve and unprofessional he was back then.
 19. The Committee then heard submissions on misconduct from Ms Huxtable, on behalf of the Council, and from Ms Curzon, on behalf of the Registrant. Both parties provided the Committee with written submissions which were expanded upon with oral submissions.
 20. Ms Huxtable in her submissions invited the Committee to find that the facts admitted by the Registrant and found proved by the Committee, amounted to misconduct. She referred the Committee to the case of *Cheatle v General Medical Council* [2009] EWHC 645 (Admin), that it was a two-step process and that the Committee should first decide whether there has been misconduct and then go on to decide whether the Registrant's fitness to practise is impaired.

21. Ms Huxtable referred the Committee to the case of *Roylance v General Medical Council (No.2)* [2000] 1 A.C. 311, where, at paragraph 35, Lord Clyde stated:
- “Misconduct is a word of general effect, involving some act or omission which falls short of what would be proper in the circumstances. The standard of propriety may often be found by reference to the rules and standards ordinarily required to be followed in the particular circumstances.”*
22. Ms Huxtable highlighted the guidance from the case of *Nandi v GMC* [2004] EWHC 2317 (Admin), where Collins J held that the conduct must be serious and the adjective “serious” must be given its proper weight. This had been described as conduct that fellow practitioners would find deplorable.
23. Ms Huxtable referred the Committee to the Council’s Standards of Practice for Optical Students, effective from April 2016, submitting that the Committee may consider that the Registrant has departed from the following standards by virtue of his conduct:
- a. Standard 7: Maintain adequate patient records;
 - b. Standard 15: Be honest and trustworthy;
 - c. Standard 16: Do not damage the reputation of your profession through your conduct.
24. Ms Curzon, on behalf of the Registrant, when addressing the Committee on the issue of misconduct, stated that the Registrant did not dispute that the facts that had been found proved by virtue of his admissions, amounted to misconduct. She stated that the Registrant understands the seriousness of his conduct and the impact that it has had.
25. The Committee heard and accepted the advice of the Legal Adviser, who reminded the Committee that misconduct was a matter for its own independent judgement and no burden or standard of proof applied at this stage. Further, she advised that the Committee needed to consider whether the conduct was sufficiently serious to amount to professional misconduct.

The Committee’s Findings on Misconduct

26. The Committee proceeded to consider whether the admitted facts, which were found proved, amounted to misconduct, which was serious.
27. In making its findings on misconduct, the Committee had regard to the evidence it had received to date, the submissions made by the parties, and the legal advice given by the Legal Adviser.
28. The Committee agreed that the Registrant’s conduct breached the Council’s Standards of Practice for Optical Students and that the Registrant has departed from the following standards:

- Standard 7: Maintain adequate patient records;
 - Standard 15: Be honest and trustworthy;
 - Standard 16: Do not damage the reputation of your profession through your conduct.
29. The Committee was of the view that the conduct of the Registrant fell far below the standards to be expected of a student Optometrist. The conduct concerned dishonesty which was particularly serious as it related to the accuracy of patient records. The Registrant had accepted in his oral evidence that by falsely creating patient records this had the potential to cause patient harm, as future clinicians rely upon the accuracy of patient records for future treatment. Further, it related to the Registrant's assessment, which went towards his qualification and was not an isolated incident, involving three patients over five separate dates. The Committee was of the opinion that the falsifying of records was premeditated and occurred when his main supervisor was not on the premises.
30. In the circumstances, the Committee was satisfied that the Registrant's conduct was a serious departure of the expected standards for student Optometrists and amounted to misconduct.

Current impairment

31. The Committee then went on to consider whether the Registrant's fitness to undertake training is currently impaired by virtue of his misconduct.
32. In her submissions on current impairment, Ms Huxtable reminded the Committee that impairment was a forward looking exercise and that the purpose of fitness to practise proceedings is not to punish the Registrant for past wrongdoings but to protect the public from the acts of those who are not fit to practise.
33. Ms Huxtable referred the Committee to the test that was formulated by Dame Janet Smith in the report to the Fifth Shipman Inquiry, which was approved in the case of *CHRE v (1) NMC and (2) Grant* [2011] EWHC 927 (Admin), namely that impairment may be found where a Doctor (but applicable to Optometrists) has either in the past, or is liable in future to:
- a. put a patient(s) at unwarranted risk of harm, and/or
 - b. brought the profession into disrepute, and/or
 - c. breached one of the fundamental tenets of the profession and/or
 - d. acted dishonestly.

34. Ms Huxtable submitted that all four limbs (a), (b), (c) and (d) of the Grant test are engaged in this case. She submitted that the allegations demonstrate a propensity on the part of the Registrant to dishonestly create false patient records, which not only places patients at risk of harm, but brings the profession into disrepute and breaches a fundamental tenet of the profession.
35. Ms Huxtable referred to the cases of *Professional Standards Authority v Health and Care Professions Council and Ajeneye* [2016] EWHC 1237 (Admin), which stated that deliberate dishonesty must come high on the scale of misconduct and *GMC v Armstrong* [2021] EWHC 1658, which suggested that it is rare for a person who has acted dishonestly to escape a finding of impairment. Ms Huxtable submitted that the exceptional circumstances identified in Armstrong, did not apply here, for example, it was not an isolated incident of dishonesty in front-line challenging circumstances.
36. Ms Huxtable submitted that the Registrant's fitness to undertake training is currently impaired as the Registrant knowingly and on multiple occasions, created false patient records to submit for his College of Optometrists assessment. She stated that whilst his conduct occurred over a short period of time, it was repetitive and demonstrates a pattern of behaviour. Ms Huxtable acknowledged that the Registrant's conduct did not impact on any patients in causing actual harm, but they were potentially placed at risk of serious harm.
37. Ms Huxtable acknowledged that the Registrant has undertaken a degree of reflection, targeted remediation by completing appropriate CPD and had positive testimonials. However, she submitted that the conduct was inherently dishonest and attitudinal, which was not easy to remedy. Ms Huxtable submitted that the circumstances of this case are such that a finding of impairment is required to meet the wider public interest, notably to uphold proper professional standards and maintain public confidence in the profession.
38. In relation to the Registrant's evidence given to the Committee today, Ms Huxtable stated that the Committee may be concerned as to whether the Registrant has full insight into his misconduct and whether there remains a risk of repetition. She submitted that of particular concern was that the Registrant did not fully explain why he did what he did and that was because he had no reasonable explanation, given that he ran a weekly contact lens clinic and did not need to resort to falsifying records.
39. Ms Curzon, on behalf of the Registrant, invited the Committee to find that the Registrant's fitness to undertake training is not currently impaired as the misconduct is remediable, has been remedied by the Registrant and there is a low risk of repetition, expanding upon each in turn.
40. Ms Curzon submitted that although dishonesty can be more difficult to remediate, the misconduct is remediable. Furthermore, the Committee can be sure that the Registrant has remediated his misconduct as he has taken full responsibility for his shortcomings, as set out in his detailed witness statement and evidence to the Committee. He has demonstrated the learning from the courses he has undertaken, and how he will apply this to his practice. Ms Curzon submitted that the Registrant has also shown personal growth, as evidenced by his voluntarily organised [redacted]. She submitted that his

additional training has been targeted and extensive, including his University course, which has rebuilt his clinical confidence and strengthened his understanding of ethical and professional obligations.

41. Ms Curzon highlighted that after taking time to reflect, the Registrant has returned to the profession as an Optical Assistant, for which he has received universally positive references and that he has improved his ability to undertake training. Ms Curzon referred the Committee to some of the positive comments regarding the Registrant set out in the references.
42. Further, Ms Curzon submitted that the Registrant had demonstrated significant and deep insight into his misconduct and that his evidence showed that he has thoroughly absorbed the lessons and fully appreciated the gravity of his misconduct and understood the effect of it upon his colleagues, patients and the wider profession. Ms Curzon submitted that the Committee can be satisfied that the Registrant's insight is genuine and that he has taken all reasonable steps to remediate.
43. Ms Curzon submitted that it was highly unlikely that the Registrant would repeat the misconduct as there has been no repetition in the past two years since the events even though he was working in a similar environment as an Optical Assistant, he had fully reflected on how he will ensure he does not find himself in a similar situation again and he has demonstrated that he has grown and matured since the events.
44. Furthermore, Ms Curzon submitted that the context that the misconduct occurred in was so unusual, referring to his difficult personal circumstances as a "perfect storm" [redacted] which is highly unlikely to be repeated. Additionally, Ms Curzon submitted that for the Registrant to be involved in significant regulatory proceedings so early in his career would shape and define his career for years to come and will act as a constant reminder of the high standards that he must hold himself to at all times.
45. Ms Curzon invited the Committee to find that the Registrant had fully remediated his misconduct. In relation to the wider public interest, Ms Curzon submitted that in a dishonesty case, a finding of impairment was not an inevitability and referred the Committee to the case of *PSA v Uppal* [2015] EWHC 1304 (Admin), which sets out that not all instances of dishonesty will necessarily lead to a finding of impairment. Ms Curzon also highlighted the case of *Nicholas-Pillai v GMC* [2009] EWHC 1048 (Admin) and that the attitude of a practitioner can be taken into account when considering impairment.
46. Ms Curzon submitted that given the low likelihood of repetition, in light of the genuine and deep insight and remediation, the Committee should also consider that there is no ongoing risk which would make a finding of impairment on the basis of public interest necessary. Ms Curzon submitted that public confidence in the profession can be satisfied by the regulatory process itself, which has rigorously assessed the issues and the Registrant has engaged with. Ms Curzon submitted that an informed member of the public, in full knowledge of the facts of this case, would understand if a finding of no impairment was made.
47. Ms Curzon reminded the Committee that it had the power to impose a warning if no impairment is found, referring the Committee to the relevant factors to

consider in the Hearings and Indicative Sanctions Guidance ('the Guidance'). Ms Curzon invited the Committee to find that the factors that indicate that a warning may be appropriate were all present in this case.

48. The Committee heard and accepted the advice of the Legal Adviser who advised the Committee that the question of impairment was a matter for its independent judgement taking into account all of the evidence it has seen and heard so far. She reminded the Committee that a finding of impairment does not automatically follow a finding of misconduct. She outlined the relevant principles set out in the case of *Cohen v GMC* [2008] EWHC 581 (Admin), namely that the Committee ought to consider whether the misconduct is remediable, has been remedied and the risk of repetition.
49. The Legal Adviser referred the Committee to the case of *GMC v Armstrong* [2021] EWHC 1658 (Admin), which sets out that dishonesty can arise in a variety of circumstances and in a range of seriousness and that Committees must have proper regard to the nature and extent of the dishonesty and engage with the weight of the public interest factors tending towards a finding of impairment. The Legal Adviser advised that the case of *Armstrong* also sets out that, in cases of dishonesty, the impact on public confidence in the profession is not diminished by a low risk of repetition and that the Committee must consider the weight that it puts on personal mitigation as this may have a more limited role in cases of dishonesty. It also sets out that it is a rare or unusual case where dishonesty does not lead to a finding of impairment.

The Committee's findings on current impairment

50. In making its findings on impairment, the Committee had regard to the evidence it had received to date, the submissions made by the parties, and the legal advice given by the Legal Adviser.
51. The Committee considered whether the Registrant's conduct was capable of being remediated, whether it had been remediated and whether there is a risk of repetition of the conduct in future. The Committee considered that whilst dishonesty can be difficult to remediate, it was not impossible to do so. The Committee bore in mind that there were six separate incidents of dishonesty, involving three patients. It also had regard to the Registrant's relatively young age and that he was a student Optometrist at the time of the misconduct.
52. The Committee considered the level of insight and remediation that had been demonstrated in this case by the Registrant and the steps that he has taken to address his misconduct since it occurred in February to April 2024.
53. The Committee considered the Registrant's insight, as shown by his reflections in his witness statement and his oral evidence to the Committee. The Committee noted that the Registrant had apologised, made admissions at an early stage and made full admissions to the Allegation in these proceedings. The Committee considered that the Registrant had taken full responsibility for his actions and reflected deeply, during his break from the profession. The Committee was of the view that he has reflected upon the impact of his misconduct upon his peers, patients, and the profession.

54. The Committee was impressed by the range of targeted CPD courses that the Registrant had undertaken, as well as the positive references provided from colleagues. The Committee considered that the Registrant had developed a good level of insight and undertaken appropriate remediation, by attending targeted and relevant CPD courses, undertaking a further University course to fill clinical gaps in his knowledge and increase his confidence and by undergoing [redacted].
55. The Committee formed the view that the Registrant had made serious errors of judgment in committing the dishonesty, but that he had since adequately reflected, developed insight and had adequately remediated. There had been no repetition of concerns since the misconduct occurred, albeit the Registrant had been working in a role with less responsibility as an Optical Assistant. The Registrant had learnt [redacted], matured since the events in question and had explained how he would act differently in future if in a similar situation.
56. The Committee concluded that the Registrant had remediated as fully as was possible in the circumstances. The Committee therefore took the view that, in all the circumstances, the risk of repetition of similar conduct in future was very low. The Committee was satisfied that the Registrant was not a risk to the public and it decided that a finding of current impairment was not required on public protection grounds.
57. The Committee next considered the wider public interest and the guidance in the case of *CHRE v (1) NMC and (2) Grant* [2011] EWHC 927 (admin). In particular, the Committee had regard to the test that was formulated by Dame Janet Smith in the report to the Fifth Shipman Inquiry, as approved in the case of *Grant*, which is as follows:

“Do our findings of fact in respect of misconduct... show that his fitness to practise is impaired in the sense that he:

- (a) Has in the past acted and/or is liable in the future to so act so as to put a patient or patients at unwarranted risk of harm and/or;*
- (b) Has in the past brought and/or is liable in future to bring the medical profession into disrepute and/or;*
- (c) Has in the past breached and/or is liable in the future to breach one of the fundamental tenants of the medical profession and/or;*
- (d) Has in the past acted dishonestly and/or is liable to act dishonestly in future.”*

58. The Committee was satisfied that limbs (a)-(d) of this test are engaged in this case, namely that the Registrant’s conduct put patients at unwarranted risk of harm, brought the profession into disrepute, breached one of the fundamental tenets of the profession and was dishonest. The Committee considered that these limbs of the test were engaged on the Registrant’s past conduct in relation to the misconduct found proved, rather than being ‘liable in future’ given its findings on there being a very low risk of repetition.

59. The Committee considered whether a finding of impairment was necessary on the basis of the wider public interest, in order to uphold proper professional standards and public confidence in the profession. It considered the submissions of Ms Curzon, on behalf of the Registrant, that a finding of impairment may not be necessary in the public interest.
60. However, the Committee was of the view that despite the extent of the remediation that had been undertaken by the Registrant and his young age at the time of the misconduct, given the seriousness of the conduct, the public would be concerned and public confidence in the profession would be undermined, if a finding of impairment was not made. The Committee bore in mind that this was serious misconduct concerning multiple acts of dishonesty, relating essentially to cheating in the assessment process, to qualify as an Optometrist. The Committee considered that it would also fail to uphold proper standards to students if no finding of impairment was made. It was not an isolated incident in a challenging front-line situation. The Committee was mindful of the Registrant's personal mitigation and positive testimonials but considered that these factors were outweighed by the public interest factors in this case.
61. The Committee considered that the public would be concerned in this case if a finding of no impairment was made. The Committee decided that it was necessary to make a finding of impairment in this case in order to maintain confidence in the profession and in order to uphold proper professional standards.
62. For the reasons set out above, the Committee decided that the fitness of Mr Ruman Dhaliwal to undertake training is currently impaired on the public interest component only.

Sanction

63. The Committee went on to consider what would be the appropriate and proportionate sanction, if any, to impose in this case. It heard oral submissions from Ms Huxtable on behalf of the Council and Ms Curzon on behalf of the Registrant. The Committee was provided with written submissions from both parties on sanction. No further evidence was placed before the Committee at this stage of the hearing.
64. Ms Huxtable outlined that the available sanctions are set out in section 13F and H of the Opticians Act 1989. She reminded the Committee that the purpose of imposing a sanction is to protect the public and it is not intended to be punitive, although it may have that effect, referring to *Bolton v Law Society* [1994] 1 WLR 512.
65. Ms Huxtable submitted that a finding of dishonesty is particularly serious as it is likely to undermine the public's confidence in the profession and that students must adhere to the same set of standards in respect of honesty as a fully qualified optical professional.
66. Ms Huxtable submitted that the Committee ought to have regard to the principle of proportionality and the Council's Hearings and Indicative

Sanctions Guidance ('the Guidance'). She reminded the Committee that it should consider the range of sanctions in ascending order from the least to the most restrictive. Ms Huxtable referred the Committee to paragraph 22.4 of the Guidance which states that,

"there is no blanket rule or presumption that erasure is the appropriate sanction in all cases of dishonesty. The Committee must balance all the relevant issues in a proportionate manner whilst putting proper emphasis on the effect a finding of dishonesty has on public confidence in the profession (R (on the application of Hassan) v General Optical Council (2013))".

67. In relation to mitigating features, Ms Huxtable acknowledged that there has been no harm caused to any patient, the Registrant fully admitted his misconduct to his employer and fully co-operated with the internal investigation. Additionally, the Registrant has further admitted his misconduct in these proceedings.
68. In relation to the Registrant's personal mitigation, Ms Huxtable referred the Committee to the case of *SRA v James, MacGregor and Naylor* [2018] EWHC 3058 (Admin), that held that the weight to be placed on personal mitigation should be less than other factors such as the length of time the dishonesty persisted.
69. Addressing aggravating features, Ms Huxtable submitted that the Registrant's actions were repetitive, deliberate and motivated by a desire to pass his assessment. In essence, he was seeking to "*cheat the system*". Ms Huxtable stated that the Registrant's propensity to falsify patient records, especially for personal gain, must contribute to a real risk of harm to patients and must therefore fall into the higher end of seriousness.
70. Ms Huxtable stated that the Council's position was that the appropriate sanction in this case would be erasure. She submitted that all lesser sanctions would be insufficient given the seriousness of the misconduct. In relation to conditions, she submitted that the Registrant's dishonest conduct was deep-seated and attitudinal and cannot be readily addressed by conditions.
71. Ms Huxtable submitted that whilst there has been no evidence of repetition since the incidents and the Registrant has completed targeted CPD, his past conduct is demonstrative of harmful deep-seated attitudinal problems. She stated that the fact remains that the Registrant was prepared, on multiple occasions, to falsify patient records to pass his optometry assessments. Ms Huxtable submitted that in all the circumstances, suspension will not be adequate to maintain professional standards and public confidence in the profession and the regulatory process.
72. Ms Huxtable invited the Committee to find that the Registrant's conduct was fundamentally incompatible with being a registered professional and that when considering the factors indicating that erasure may be appropriate in the Guidance, she submitted that the following were applicable:
 - i. Serious departure from the relevant professional standards as set out in the Standards of Practice for registrants;
 - ii. Creating or contributing to a risk of harm to individuals either deliberately or recklessly;
 - iii. Dishonesty (especially where persistent and covered up).

73. In her submissions relating to sanction, Ms Curzon submitted that an order of suspension is the appropriate and proportionate sanction in light of the Committee's earlier findings. Ms Curzon reminded the Committee that the sanction must be proportionate; it should interfere with the Registrant's ability to undertake training no more than is necessary to protect the public, uphold public confidence in the profession, and maintain standards and that the least restrictive sanction that achieves these aims should be imposed.
74. Ms Curzon addressed the Committee on mitigating factors and submitted that the following were present:
- a. Mr Dhaliwal has provided a detailed reflective statement.
 - b. He has undertaken relevant and targeted CPD and further university study.
 - c. He has fully engaged with these regulatory proceedings.
 - d. Mr Dhaliwal has made full admissions and apologised from the outset of the internal investigation interviews.
 - e. He has no prior regulatory history.
 - f. The conduct took place approximately 2 years ago.
 - g. There has been no repetition of any misconduct, despite Mr Dhaliwal having worked in a similar environment since September 2025.
 - h. There was no harm to any patients.
 - i. Mr Dhaliwal has insight and has undertaken appropriate remediation.
 - j. Positive references attest to Mr Dhaliwal's ability to be honest and trustworthy in his role as an Optical Assistant.
 - k. When the misconduct occurred, this was during a particularly challenging [redacted].
75. Ms Curzon referred the Committee to paragraph 8.4 of the Guidance, which states:
- "when considering a proportionate sanction, the Committee may consider the stage of a registrant's career/training when making decisions. Whether they have gained insight once they have had an opportunity to reflect on how they might have done things differently, with the benefit of experience and/or further training, may be a mitigating factor."*
76. Ms Curzon submitted that all of the factors listed in the Guidance that indicate when a suspension may be appropriate were present in this case. She submitted that there is no evidence to suggest that the Registrant is an inherently dishonest individual with deep-seated attitudinal issues. He admitted his dishonest conduct from the very outset of the internal investigations and has been open about his misconduct throughout these proceedings. There is no evidence of any dishonest conduct subsequently during his university course or during his employment as an Optical Assistant. Ms Curzon stated that a period of suspension will also have a deterrent effect and maintain public confidence in the profession, by sending a clear message to the public about the standards of practice required for a registered student optometrist
77. Ms Curzon submitted that if the Committee was minded to impose a period of suspension, this should be as short as necessary to meet the public interest and suggested a period of 2 months. She submitted that any longer would be disproportionate.

78. In relation to a sanction of erasure, as proposed by the Council, Ms Curzon submitted that this would be wholly disproportionate and would not be a reasonable response in light of the Committee's findings on impairment, which is only on public interest grounds. Furthermore, in relation to the factors in the Guidance relating to erasure, as set out at paragraph 21.35, Ms Curzon emphasised that the Registrant's dishonesty was not covered up, rather it was revealed and admitted within the internal investigations, with the Registrant voluntarily raising the matter of Patient C himself.
79. Ms Curzon reminded the Committee that erasure is appropriate if it is the only means of protecting patients and/or maintaining public confidence in the profession and that the Committee should not feel it necessary to remove "*...an otherwise competent and useful [registrant] who presents no danger to the public in order to satisfy [public] demand for blame and punishment*" (quoting from the case of *Bilj v GMC* (Privy Council Appeal No.78 of 2000)).
80. Ms Curzon submitted that erasure would be unnecessarily punitive in light of the considerable mitigating factors in this case and that the public interest could be met with a suspension. Ms Curzon submitted that a review hearing was not necessary as the finding of impairment in this case was solely on public interest grounds and the Committee had found that the Registrant had developed insight and adequate remediation.

The Committee's findings on sanction

81. The Committee heard and accepted the advice of the Legal Adviser regarding the approach to follow when considering sanction. When considering the most appropriate sanction, if any, to impose in this case, the Committee had regard to all of the evidence and submissions it had heard and the Guidance. The Committee also had regard to its previous findings.
82. The Committee firstly considered the aggravating and mitigating factors. In the Committee's view, the particular aggravating factors in this case are as follows:
 - a. the dishonesty was deliberate, premeditated and repeated (six instances over five dates involving three patients);
 - b. the dishonesty related to falsifying patient records;
 - c. there was personal gain to the Registrant from his actions, to pass his assessments and the misconduct undermined the probity of the examination system.
83. The Committee considered that the following mitigating factors were present:
 - a. the Registrant has reflected in detail, shown insight and taken extensive steps to remediate, including a University course, CPD and [redacted];

- b. the Registrant has apologised and shown remorse;
 - c. the Registrant made admissions during the investigation (including volunteering information about Patient C) and admitted the Allegation in full in these proceedings;
 - d. the positive testimonials from professional colleagues;
 - e. the Registrant was young and at a very early stage in his career and was still a student at the time of the misconduct;
 - f. the Registrant has fully engaged in the regulatory process, including attending and giving evidence.
84. The Committee next considered the sanctions available to it from the least restrictive to the most severe, starting with no further action.
85. The Committee considered taking no further action as set out in paragraphs 21.3 to 21.8 of the Guidance. The Committee noted that following a finding of impairment, a sanction is usually imposed, unless there are exceptional circumstances, which can justify taking no further action. The Committee was of the view that no exceptional circumstances were present in this case. Additionally, the Committee was of the view that taking no further action would be insufficient to address the public interest concerns in this case.
86. The Committee considered the imposition of a financial penalty order. It noted that this was available as a sanction, however, considered that it may be more appropriate where there had been financial gain. In addition, the Committee was of the view that a financial penalty would not reflect the seriousness of the misconduct, nor would it meet the public interest concerns in this case.
87. The Committee next considered conditions. The Committee was mindful of the primary purpose of conditions, which is to protect the public and there were no ongoing public protection concerns in this case. The Committee was of the view that conditional registration would not address the nature of the misconduct in this case, namely dishonesty and the fact that a finding of impairment had been made on public interest grounds only.
88. In addition, the Committee decided that conditions would not sufficiently mark the serious nature of the Registrant's misconduct or address the public interest concerns identified. The Committee therefore concluded that conditions could not be devised which would address the misconduct, while being appropriate, proportionate, workable or measurable.
89. The Committee next considered suspension and had regard to paragraphs 21.29 to 21.31 of the Guidance. In particular, the Committee considered the list of factors contained within paragraph 21.29, that indicate when a suspension may be appropriate, which are as follows:

Suspension (maximum 12 months)

21.29 This sanction may be appropriate when some, or all, of the following factors are apparent (this list is not exhaustive):

- a. A serious instance of misconduct where a lesser sanction is not sufficient.*
- b. No evidence of harmful deep-seated personality or attitudinal problems.*
- c. No evidence of repetition of behaviour since incident.*
- d. The Committee is satisfied the registrant has insight and does not pose a significant risk of repeating behaviour.*
- e. In cases where the only issue relates to the registrant's health, there is a risk to patient safety if the registrant continued to practise, even under conditions.*

90. The Committee was of the view that all of the factors listed in paragraph 21.29 were applicable, apart from factor e), which was not relevant in this case. In relation to factor a), this was a serious matter, where a lesser sanction was not sufficient, as set out above. In relation to b), the Committee did not find that there was evidence of a harmful deep-seated personality or attitudinal problems and took account of the positive testimonials provided and the insight that the Registrant has demonstrated. In relation to c), there was no evidence of repetition of the behaviour since the misconduct occurred. In relation to d), the Committee had earlier found that the Registrant has developed insight and the risk of repetition was very low. The Committee was therefore satisfied that all of the relevant factors in the Guidance, indicating that suspension may be appropriate, were established in this case.
91. The Committee balanced the mitigating and aggravating factors in the case and considered the principle of proportionality. The Committee was of the view that a suspension order was the appropriate and proportionate sanction to address the public interest concerns that it had identified. It considered that a suspension order would adequately mark the seriousness of the Registrant's conduct, maintain confidence in the profession and declare and uphold proper standards of professional conduct and behaviour. It would send a clear signal to the profession and other students that such behaviour was unacceptable.
92. The Committee considered the Council's position that erasure would be the only appropriate and proportionate sanction to impose in this case. The Committee considered the Guidance in relation to erasure and the factors set out at paragraph 21.35. The Committee considered that many of the factors listed in the Guidance on erasure did not fit the circumstances of this case. Whilst the case involved repeated instances of dishonesty, it was not covered up and the Registrant raised his misconduct in respect of Patient C voluntarily. The Committee considered, given the significant mitigation and the extent of the remediation in this case, that erasure would be a disproportionate sanction and the misconduct was not, in the circumstances of this case, fundamentally

incompatible with continued registration, nor was erasure the only sanction that would meet the public interest concerns in the case.

93. The Committee was also mindful that after a period of suspension, the Registrant would be required to complete his pre-registration year, during which he would be practising under supervision, which would serve to protect the public. Whereas, if the Registrant were to be erased he would be unable to apply to rejoin the register in future, as his degree would expire. Given the remediation that the Registrant had undertaken and the commitment he had shown to the profession, the Committee considered that such an outcome would not be proportionate and not in the public interest.
94. The Committee gave consideration to the appropriate length of the order of suspension. It decided that, having balanced the mitigating and aggravating factors against the public interest, it would be proportionate and appropriate to suspend the Registrant for a period of 4 months. When considering the appropriate length of order, the Committee had regard to the considerable mitigation, including the significant remediation that the Registrant had undertaken and that the sanction was only being imposed to meet the public interest. However, the Committee also had regard to the aggravating factors, including the repeated nature of the dishonesty and the need to adequately meet the public interest and send a signal to the public and the profession that such conduct was not acceptable.
95. In the circumstances, the Committee was of the view that 4 months was an appropriate and proportionate period of suspension to sufficiently mark the seriousness of the Registrant's misconduct and to address the public interest concerns it had identified.
96. The Committee considered whether to direct that a review hearing should take place before the end of the period of suspension. The Committee noted that at paragraph 21.32 of the Guidance, it states that a review should normally be directed before an order of suspension is lifted, because the Committee will need to be reassured that the Registrant is fit to resume unrestricted practice. However, the Committee bore in mind that it had found that the Registrant had developed insight, had remediated and the misconduct was very unlikely to be repeated. Additionally, the finding of impairment was on public interest grounds only. In the circumstances, the Committee was not satisfied that it was necessary or appropriate to direct a review hearing before the order of suspension expired.
97. The Committee therefore imposed a suspension order for a period of 4 months, without a review hearing.

Immediate Order

98. The Committee went on to consider whether to impose an immediate order of suspension and invited representations from the parties on this issue.

99. Ms Huxtable confirmed that the Council was inviting the Committee to impose an immediate order of suspension under Section 13I of the Opticians Act 1989. She reminded the Committee that it had imposed a period of suspension in the public interest and that impairment had been found on public interest grounds. Ms Huxtable submitted that a member of the public would expect an order to start immediately.
100. Ms Curzon opposed the imposition of an immediate order submitting that an immediate order was not necessary.
101. The Committee accepted the advice of the Legal Adviser, which was that to make an immediate order, the Committee must be satisfied that it is necessary for the protection of members of the public, otherwise in the public interest or in the best interests of the Registrant. The Committee was referred to the relevant section in the Guidance on making an immediate order.

The Committee's decision on an immediate order

102. The Committee considered the statutory test and the parties' submissions.
103. The Committee was not satisfied that there was any necessity for an immediate order to protect the public as there were no public safety concerns regarding the Registrant in the circumstances of this hearing. The Committee was also not satisfied that an immediate order of suspension would be otherwise in the public interest, as the public interest had been met by the four month suspension order itself. Nor would an immediate order be in the Registrant's own interests.
104. Therefore, the Committee decided not to impose an immediate suspension order.

Revocation of interim order

105. There is no interim order to revoke.

Chair of the Committee: Sarah Hamilton

Signature



Date: 17 February 2026

Registrant: Ruman Dhaliwal

Signature *Present remotely and received via email* **Date:** 17 February 2026

FURTHER INFORMATION
Transcript
A full transcript of the hearing will be made available for purchase in due course.
Appeal
Any appeal against an order of the Committee must be lodged with the relevant court within 28 days of the service of this notification. If no appeal is lodged, the order will take effect at the end of that period. The relevant court is shown at section 23G(4)(a)-(c) of the Opticians Act 1989 (as amended).
Professional Standards Authority
<p>This decision will be reported to the Professional Standards Authority (PSA) under the provisions of section 29 of the NHS Reform and Healthcare Professions Act 2002. PSA may refer this case to the High Court of Justice in England and Wales, the Court of Session in Scotland or the High Court of Justice in Northern Ireland as appropriate if they decide that a decision has been insufficient to protect the public and/or should not have been made, and if they consider that referral is desirable for the protection of the public.</p> <p>Where a registrant can appeal against a decision, the Authority has 40 days beginning with the day which is the last day in which you can appeal. Where a registrant cannot appeal against the outcome of a hearing, the Authority's appeal period is 56 days beginning with the day in which notification of the decision was served on you. PSA will notify you promptly of a decision to refer. A letter will be sent by recorded delivery to your registered address (unless PSA has been notified by the GOC of a change of address).</p>

Further information about the PSA can be obtained from its website at www.professionalstandards.org.uk or by telephone on 020 7389 8030.

Effect of orders for suspension or erasure

To practise or carry on business as an optometrist or dispensing optician, to take or use a description which implies registration or entitlement to undertake any activity which the law restricts to a registered person, may amount to a criminal offence once an entry in the register has been suspended or erased.

Contact

If you require any further information, please contact the Council's Hearings Manager at Level 29, One Canada Square, London, E14 5AA or by telephone, on 020 7580 3898.