

**PUBLIC RECORD****Date:** 27/06/2025

**Doctor:** Dr Nathan SANDLES

**GMC reference number:** 6127978

**Primary medical qualification:** MB BS 2005 University of London

Type of case	Outcome on impairment
Review - Conviction	Not Impaired
Review - Misconduct	Not Impaired
XXX	XXX

**Summary of outcome**

Conditions, 24 months.  
Review hearing directed

**Tribunal:**

Legally Qualified Chair	Mr Nathan Moxon
Lay Tribunal Member:	Mr George McLean
Registrant Tribunal Member:	Dr Matthew O'Meara

  

Tribunal Clerk:	Ms Angela Carney
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**Attendance and Representation:**

Doctor:	Present, represented
Doctor's Representative:	Ms Rebecca Harris KC, instructed by Weghtmans
GMC Representative:	Ms Mairi-Clare McMillan, Counsel

**Attendance of Press / Public**

In accordance with Rule 41 of the General Medical Council (Fitness to Practise) Rules 2004 the hearing was held in private.

## 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 - 27/06/2025

1. This determination will be read in private. However, as this case concerns Dr Sandles' misconduct and conviction a redacted version will be published at the close of the hearing
2. At this review hearing the Tribunal now 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 Sandles' fitness to practise is impaired by reason of misconduct, XXX and conviction.

## The Outcome of Applications Made during the Impairment Stage

3. The Tribunal granted Dr Sandles' application for all of the hearing to be in private, pursuant to Rule 41 of the General Medical Council (Fitness to Practise) Rules 2004 (the Rules) XXX. Ms McMillan made no objection to the application. The Tribunal's determination can be found in Annex A.

## Background

4. Dr Sandles qualified as a doctor in 2005 from Barts and the London School of Medicine and Dentistry. At the time of the events Dr Sandles was practising as a General Practitioner.

## The 2024 Tribunal

5. At the outset of Dr Sandles' hearing, which took place in June 2024 (the 2024 Tribunal), he admitted the Allegation in its entirety and accepted that his actions amounted to misconduct. The facts admitted and found proved related to Dr Sandles' XXX, conviction, conduct and probity.

6. XXX

7. In 2011, Dr Sandles started working as a GP at the Waltham Cross Practice, Herts. He reported that the workload was challenging at times XXX. Dr Sandles began using some of the XXX medication that he had obtained for a patient. Consequently, his contract at the Waltham Cross Practice was terminated in December 2011.
8. In early 2012, XXX. After 14 months he was allowed to practise as a GP again.
9. In June 2015 Dr Sandles obtained a GP position at Church Langley Practice and in May 2016 was offered a partnership.
10. In November 2019 Dr Sandles suffered a traumatic experience at work XXX.
11. In February 2020, concerns were reported from fellow health professionals about Dr Sandles' behaviour XXX whilst working at the Church Langley Practice. He was reported to be of XXX and not his usual self. These concerns were flagged to the other partners and the practice manager.
12. The GMC were first notified of concerns on 24 July 2020 via the GMC's confidential helpline. Allegations were raised that Dr Sandles had been 'drowsy, sleepy and disorientated' whilst at work and whilst responsible for the care of patients at Church Langley Practice. An investigation was carried out where it was noted that Dr Sandles had been to a number of pharmacies to obtain prescriptions for various drugs. Dr Sandles prescribed XXX under the name of a patient which he then administered to himself. It was also reported that numerous XXX were found in Dr Sandles' room and had made attempts to dispose of XXX before being escorted from the surgery.
13. On 27 July 2020 Dr Sandles XXX. Dr Sandles was suspended from the Medical Performers list on 31 July 2020.
14. Dr Sandles was charged by police for the use of a false prescription of a scheduled drug with intent. Dr Sandles pleaded guilty to this charge and was convicted at the Crown Court. He was sentenced to an 18 month Community Order with requirements to complete 140 hours of unpaid work and 20 Rehabilitation Activity Requirement days.
15. XXX
16. XXX
17. In July 2021, an Interim Orders Tribunal (the 'IOT') imposed conditions on Dr Sandles' registration, stipulating that he must not prescribe, administer, or have primary responsibility for drugs listed in schedules 2–5 of the Misuse of Drugs Regulations 2001, or prescribe any

drugs for himself, or anyone with whom he has a close personal relationship. These conditions remained in place until 28 July 2022.

18. XXX

19. XXX

### **Misconduct**

20. The 2024 Tribunal noted that there were two periods of misconduct and gave consideration to each. The 2024 Tribunal first considered the misconduct which occurred between the 12 June 2020 and 24 July 2020. Dr Sandles had been working whilst under the influence of drugs and had on the 24 July 2020 XXX himself with XXX such that he had become intoxicated. The 2024 Tribunal noted that the misconduct occurred in a clinical setting, on more than one occasion over a period of a number of weeks. It found that Dr Sandles had clearly put his patients at risk of harm during this period.

21. The 2024 Tribunal also noted that Dr Sandles had been observed leaving the practice on multiple occasions when he was responsible for the care of patients. Further, he was uncontactable as he did not answer his phone which put additional pressure on his colleagues.

22. The 2024 Tribunal found that Dr Sandles' actions were a clear and serious breach of paragraphs 1 and 65 of Good Medical Practice (2013) ('GMP'). Further, it considered that Dr Sandles had put patients at potential risk of harm in clear breach of paragraphs 1, 34, 37 and 65 of GMP and amounted to misconduct.

23. The 2024 Tribunal next considered the misconduct which occurred between 6 April 2022 and 22 June 2022 when Dr Sandles was subject to Interim conditions. Dr Sandles had again administered drugs to himself in a clinical setting which continued over a period of months. Further, Dr Sandles had falsely prescribed controlled drugs for a patient which he intended to use for himself. When challenged by a pharmacist about one of the prescriptions, Dr Sandles persisted in his deception by offering a false explanation. The Tribunal found Dr Sandles' actions were a clear and serious breach of paragraphs 1, 34, 36, 37 and 65 of GMP. The 2024 Tribunal found that Dr Sandles' dishonest behaviour was a matter of the utmost seriousness. It found that Dr Sandles' behaviour was a significant and serious departure from GMP and amounted to misconduct.

24. The 2024 Tribunal found it apparent from Dr Sandles' witness statement and oral evidence that he had developed meaningful insight into the inappropriateness of his behaviour. He clearly understood the magnitude and gravity of the behaviours which led to

the misconduct and described himself as being “*deeply ashamed*”. It found that, through his remediation, Dr Sandles recognised that his conduct had damaged the reputation of the profession.

25. XXX. The 2024 Tribunal accepted that Dr Sandles was on a journey of wellbeing, had better insight XXX and had started the process of remediation. However, the Tribunal noted that it had only been 22 months since this journey began.

26. The 2024 Tribunal accepted that Dr Sandles’ misconduct was XXX. However, it considered Dr Sandles’ misconduct was so serious that all three limbs of the overarching objective were engaged. In all the circumstances, the 2024 Tribunal determined that Dr Sandles’ fitness to practise was impaired by reason of his misconduct.

### Conviction

27. Dr Sandles admitted, and the 2024 Tribunal found proved, that on 20 December 2021, he was convicted of using false prescriptions for a scheduled drug with intent. On 3 February 2022 Dr Sandles was sentenced to an 18-month community order, to complete 140 hours of unpaid work and 20 Rehabilitation Activity requirement days. Further, Dr Sandles was ordered to pay prosecution costs and the victim surcharge.

28. The 2024 Tribunal accepted that Dr Sandles’ remorse was genuine and that he understood the gravity of his offending and its impact on others. Nevertheless, the 2024 Tribunal had regard to the nature and seriousness of Dr Sandles’ conviction and bore in mind that he was only able to carry out this offence as a result of his special position as a doctor. It found that Dr Sandles had abused his position as a doctor who illegally prescribed controlled drugs for himself XXX.

29. The 2024 Tribunal considered that the conviction for self-prescribing was not a matter which was “easily remediable” as it related to behaviour which was XXX. However, it concluded that it would be possible to remediate and/or manage the behaviour with appropriate interventions and behavioural management to address XXX.

30. The 2024 Tribunal was satisfied that public confidence in the profession would be seriously undermined if no finding of impairment was made, and proper professional standards would not be maintained. It found that a finding of impairment was necessary both to maintain public confidence in the medical profession, and to ensure that proper professional standards are maintained.

31. The 2024 Tribunal determined that Dr Sandles’ fitness to practise was impaired by reason of his conviction.

XXX

32. XXX

33. XXX

34. XXX

35. XXX

36. XXX

37. The 2024 Tribunal was satisfied that there were no exceptional circumstances in Dr Sandles' case which could justify it taking no action.

38. The 2024 Tribunal acknowledged that conditions may have been an appropriate sanction to XXX. However, it reminded itself that Dr Sandles' case XXX also involved misconduct and a conviction related to drug offences.

39. The 2024 Tribunal was of the view that conditions were not appropriate due to the multifaceted nature of the case, the serious misconduct involved, and the need to uphold public confidence, public safety, and upholding professional standards. It determined that more stringent measures were necessary to address the issues comprehensively. Therefore, the 2024 Tribunal concluded that imposing conditions on Dr Sandles' registration would not be appropriate and proportionate and would not meet the overarching objective.

40. The 2024 Tribunal noted that Dr Sandles' case involved serious misconduct as well as a conviction for a criminal offence and determined that it warranted a significant response to mark its gravity. It bore in mind that Dr Sandles' behaviour, particularly whilst on duty, posed a significant risk to patient safety. Furthermore, the 2024 Tribunal determined that public confidence in the medical profession would be severely undermined if a doctor who exhibited such serious misconduct was not appropriately sanctioned. Further, it was of the view that if the public knew that a doctor was on duty as a GP whilst incapacitated XXX this would profoundly damage the public trust and confidence in the profession.

41. The 2024 Tribunal reminded itself that Dr Sandles had acknowledged his misconduct and that, whilst the risk of repetition was moderate to moderate/high, this was XXX. The 2024 Tribunal considered that if Dr Sandles XXX, it could be satisfied the behaviour was less likely to be repeated.

42. XXX

43. XXX

44. In all the circumstances, the 2024 Tribunal considered that, although there was a repetition and an unsuccessful attempt at remediation in 2022, these incidents occurred in the context of XXX. The 2024 Tribunal concluded that this provided a robust mitigation which reduced the moral culpability of Dr Sandles' actions.

45. The 2024 Tribunal determined that a period of suspension would be an appropriate and proportionate sanction, balancing Dr Sandles' interests with those of the public. It considered that suspension would protect, promote and maintain the health, safety and well-being of the public whilst it was in effect. Additionally, it would still have the sufficiently deterrent effect of sending a signal to Dr Sandles, the profession and the public that his misconduct was unbecoming of a registered doctor and would not be tolerated.

46. The 2024 Tribunal determined to impose a 12-month suspension on Dr Sandles' registration and directed a review.

## Review

47. The 2024 Tribunal determined to direct a review of Dr Sandles' case and considered that the reviewing Tribunal may be assisted if Dr Sandles was able to provide:

- Evidence that he had not reoffended;
- XXX;
- Evidence of paid or unpaid work to adequately reflect Dr Sandles' ability to cope with stressors;
- Evidence that he has maintained his medical skills and knowledge; and
- Any other information that he considers will assist the reviewing tribunal.

## The Evidence

48. Dr Sandles provided a statement of reflection, dated June 2024.

49. The Tribunal has taken into account all the documentary evidence received, which included but was not limited to:

- Record of Determinations, dated June 2024
- XXX
- Testimonials in support of Dr Sandles

- Evidence of Continuing Professional Development (CPD)
- XXX

## Submissions

50. On behalf of the GMC, Ms Mairi-Clare McMillan, Counsel, provided a background to the case. Ms McMillan acknowledged that the matter of impairment is a matter for the Tribunal alone exercising its judgement. She stated that the GMC takes a neutral position in respect of his misconduct and conviction in light of the evidence that has been provided, which includes a reflective statement. She acknowledged that during this suspension Dr Sandles stated that he has had the opportunity to seriously and carefully consider the observations and understands the concerns and criticisms of the 2024 Tribunal and the GMC. She said that Dr Sandles accepts he XXX and, by XXX and behaviour, he put patient care at risk. Ms McMillan also observed that Dr Sandles sincerely apologised and expressed regret that he allowed the situation to arise more than once and had noted the negative impact that this had on others. XXX. She stated that Dr Sandles has made amends with several people, including former colleagues and one of the pharmacists that he deceived with illicit prescriptions. Dr Sandles has said that that he found this profoundly humbling and cathartic.

51. XXX

52. XXX

53. XXX

54. On behalf of Dr Sandles, Ms Rebecca Harris, KC, submitted that his fitness to practise should be considered no longer impaired by reason of his misconduct and or his conviction, noting that the GMC is neutral on these matters.

55. Ms Harris KC referred the Tribunal to Dr Sandles' recent reflections and that he continues to acknowledge and accept responsibility and apologises for how serious the actions were that brought him before his regulatory body and in front of the 2024 Tribunal. She acknowledged that the 2024 Tribunal determined that, aside from XXX, his actions were so serious that both a finding of impairment and the maximum period of suspension were required to uphold standards and to maintain public interest in the profession. Notably, the 2024 Tribunal did not consider erasure to be the appropriate response. She reminded the Tribunal that the 2024 Tribunal concluded that Dr Sandles' offending XXX, and therefore there is scope for him to fully remediate his actions.

56. Ms Harris KC said that it is intended that, all being well, Dr Sandles should return to clinical practise in due course. She referred the Tribunal to the positive testimonials which



show that he was a highly regarded, well liked and competent Doctor XXX. She submitted that the 2024 Tribunal found that it would also be in the public interest to allow an otherwise good and experienced Doctor to remain on the register to allow him the opportunity to XXX.

57. Ms Harris KC submitted that Dr Sandles has reflected further and at considerable length following his substantive hearing last year. She said that he has worked very hard, not only to remedy his behaviour and his wrongdoing, but also to XXX. Ms Harris KC acknowledged that, whilst XXX, standards have been upheld and the public interest has now been marked in respect of his misconduct and conviction by the findings of impairment that were made and the maximum period of suspension imposed. She stated that Dr Sandles has now served that suspension, as it were.

58. Ms Harris reminded the Tribunal that the 2024 Tribunal determined that misconduct and conviction are capable of remedy and invited it to find the same. She said that it was acknowledged that Dr Sandles had embarked upon a programme of remediation and had developed good insight. The programme of remediation is very far advanced now from what it was last year. She said that Dr Sandles has clearly continued with the programme. He has developed his insight further XXX.

59. Ms Harris KC accepted that XXX. However, in relation to impairment by reason of misconduct and conviction, she said that the position is markedly different. She submitted that Dr Sandles has done all that was required of him in relation to those elements. She said that he has taken further steps to remediate, and he has shown considerable insight into his wrongdoing. She said that public confidence in the profession was upheld on the last occasion by the finding of impairment and the imposition of a lengthy suspension.

60. In relation to the risk of repetition, Ms Harris KC said that there is now a support network sufficient to ensure that XXX before it results in behaviours that could give rise to misconduct. Ms Harris KC argued that Dr Sandles has strategies and coping mechanisms embedded into his life XXX. Further, XXX, he himself has such developed insight XXX.

### **The Relevant Legal Principles**

61. The Tribunal reminded itself that the decision of impairment is a matter for the Tribunal's judgement alone. As noted above, the 2024 Tribunal set out the matters that a future Tribunal may be assisted by. This Tribunal is aware that it is for the doctor to satisfy it that he would be safe to return to unrestricted practice.

62. This Tribunal must determine whether Dr Sandles' fitness to practise is impaired today, taking into account his 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's Determination on Impairment

XXX

63. XXX

64. XXX

65. XXX

66. XXX

67. XXX

68. XXX

69. XXX

70. XXX

### Misconduct and Conviction

71. The Tribunal determined that Dr Sandles' conviction and misconduct are XXX. However, whilst there remains XXX, it no longer follows that this would give rise to a real risk of repetition of the misconduct and criminal behaviour.

72. The Tribunal noted Dr Sandles' extensive reflections in which he stated:

*'...I have spent the last year reflecting carefully on the outcome of last year's tribunal and my misconduct on both a personal and professional level. [XXX] has meant I now fully understand the level of humility I must maintain around this issue and the impact my actions had on my patients, the profession, the regulator, the public and me and my family. I am mindful that as time passes and the events become increasingly distant that I must always ensure a conscious awareness of those actions and the impact it has had on so many people over time.'*

73. The Tribunal noted Dr Sandles’ apologies and expressions of regret and remorse. Further, he has XXX and, as part of that process, has sought to make amends to those that have been impacted by his actions.

74. The Tribunal therefore concluded that Dr Sandles has developed his insight significantly since the imposition of the suspension order so as to recognise XXX before it manifests into criminal behaviour and misconduct.

75. Further, the Tribunal concluded that Dr Sandles now has a robust support network in place XXX.

75. The Tribunal noted, however, that there had been an element of ‘stress-testing’ XXX. In particular, it bore in mind his exposure to a number of stressful situations, which included violence, homelessness and housing issues, which had occurred to the clients he was providing a service to in his current employment. His employers had provided positive testimonials in regard to his ability to cope. In this regard, and although noting a clinical context, he had been ‘stress-tested’ to the extent he could be.

76. Therefore, the Tribunal was satisfied that, whilst XXX, the risk of resulting misconduct and criminal behaviour is negligible. As such, the Tribunal was satisfied that a finding of current impairment on account of misconduct and conviction was not necessary to protect the public.

77. Dr Sandles has continued to engage fully with the regulatory proceedings since the 2024 Tribunal. Significantly, during that period, he has substantially developed his remediation and insight. He has reiterated his remorse. In those circumstances, the Tribunal was satisfied that members of the public and the medical professional would appreciate that he has been subject to robust regulatory action, with which he has engaged and co-operated so as to make positive changes to his life. As such, the Tribunal was satisfied that a finding of impaired fitness to practise on account of misconduct and conviction was not necessary to protect the public or wider public interest.

78. In conclusion, this Tribunal therefore determined that Dr Sandles’ fitness to practise is not impaired by reason of misconduct and conviction XXX.