

PUBLIC RECORD**Dates:** 09/05/2025

Doctor:	Dr Michael ISIMA
GMC reference number:	6121387
Primary medical qualification:	MD 1977 Universitat Wien
Type of case	Outcome on non-compliance
Review - Non-compliance with a performance assessment	Non-compliance found

Summary of outcome

Indefinite suspension

Tribunal:

Legally Qualified Chair	Mrs Julia Oakford
Lay Tribunal Member:	Mrs Lorna Taylor
Registrant Tribunal Member:	Dr Rehanna Chaudhary
Tribunal Clerk:	Mrs Olivia Gamble

Attendance and Representation:

Doctor:	Present, not represented
GMC Representative:	Ms Isobel Thomas, 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 public.

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 consideration of Non-compliance 09/05/2025

1. This is a review of Dr Isima's case following a Medical Practitioners Tribunal (MPT) hearing which took place on 17 May 2024.

Background

2. This is the fourth review of Dr Isima's case following a Medical Practitioners Tribunal (MPT) non-compliance hearing which took place on 14 to 15 October 2021 ('the 2021 Tribunal'), a first review hearing on 29 July 2022 ('the 2022 Tribunal'), a second review hearing on 26 April 2023 ('the 2023 Tribunal') and a third review hearing on 17 May 2024 ('the 2024 Tribunal').

3. The General Medical Council (GMC) is conducting an investigation into Dr Isima's fitness to practise in respect of concerns raised about his clinical performance. These concerns arose following locum placements as a Specialist Registrar in Obstetrics and Gynaecology at Luton and Dunstable Hospital between June and October 2019 and Milton Keynes University Hospital between 4 and 7 October 2019. The fitness to practise concerns were initially brought to the attention of the GMC in April 2020 by Dr Isima's Responsible Officer, who advised that Dr Isima was involved in a Serious Incident in 2019 which resulted in a neonatal death. The GMC case examiner subsequently summarised the concerns as follows:

- poor communication skills;
- poor record keeping;
- acting outside the limits of his competence;
- failure to make decisions on management plans;
- no sense of urgency when asked to review patients;
- delaying procedures inappropriately;
- ignoring colleague advice;

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- an inability to explain how he kept his professional portfolio up to date as a locum, and;
- a general lack of insight into his clinical performance.

The 2021 Tribunal hearing

4. On 28 January 2021, Dr Isima was directed to undergo an assessment of his performance, under Rule 7(3) and Schedule 1 of the GMC (Fitness to Practise) Rules (2004), as amended ('the Rules'). The GMC sent repeated correspondence notifying Dr Isima that he must comply with this direction however Dr Isima did not undertake a performance assessment. Dr Isima was subsequently referred to the 2021 Tribunal.

5. The 2021 Tribunal determined that the GMC's direction for Dr Isima to undergo a performance assessment was reasonable, that Dr Isima had failed to comply with it and that he had provided no good reason for his failure to comply.

6. The 2021 Tribunal determined to suspend Dr Isima's registration for a period of nine months and directed a review hearing.

The 2022 Tribunal hearing

7. The 2022 Tribunal had regard to Dr Isima's statement that he was willing to undertake the performance assessment and noted email correspondence between the GMC and Dr Isima dated 25 July 2022, which acknowledged his intention to comply with the direction. The 2022 Tribunal was encouraged that Dr Isima had begun to take steps to demonstrate his willingness to comply with the GMC Assistant Registrar's direction. The 2022 Tribunal considered, however, that while these statements indicated Dr Isima's intention to comply, there was no evidence of him having made actual arrangements for a performance assessment to take place.

8. The 2022 Tribunal considered that Dr Isima had had the opportunity to arrange and complete a performance assessment during the period of suspension. The 2022 Tribunal had not been presented with sufficient evidence to suggest that Dr Isima had taken concrete steps to comply with the direction.

9. The 2022 Tribunal considered whether a good reason had been provided for Dr Isima's continued failure to undergo a performance assessment. It bore in mind the context

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provided in Dr Isima's witness statement that he had reconsidered his position and decided to undergo the performance assessment before contesting the substantive matters, which he disputes, at a future MPT hearing. However, the 2022 Tribunal did not consider that this constituted a good reason for his failure to comply with the direction. Therefore, the 2022 Tribunal was not satisfied that Dr Isima had complied with the GMC's direction and determined that non-compliance had been found.

10. The 2022 Tribunal considered that, in light of the positive development that Dr Isima had indicated that he was willing to comply and had begun to communicate with the GMC about the process, it was appropriate and proportionate to impose conditions that would allow Dr Isima to return to clinical practice with adequate support and supervision while completing his performance assessment.

11. The 2022 Tribunal determined to impose conditions for a period of nine months and directed a review hearing. The conditions included: "1. He must actively engage with the GMC to comply with the direction to complete a performance assessment and to do so by the date of the next review hearing".

The 2023 Tribunal hearing

12. The GMC stated that Dr Isima had failed to provide the second part of the portfolio required prior to a performance assessment and that this portfolio was crucial to the assessment being arranged. The GMC advised the 2023 Tribunal that the requirement for this part of the portfolio had been communicated to Dr Isima by the GMC on numerous occasions but that Dr Isima had failed to actively engage with the GMC and to comply with the direction to undergo a performance assessment. The GMC also stated that Dr Isima had oscillated in his intention to apply for Voluntary Erasure (VE) and that his most recent application had been rescinded.

13. Dr Isima said that it did not make any sense for him to be at the hearing as there must be a reason for non-compliance and assessment but he had not seen any reason for the assessment. Dr Isima submitted that there had been damning reports made against him and he had not been given the chance to reply. Dr Isima said that he had not been given the chance to state his case so that the GMC could judge if he needed to undertake a performance assessment. Dr Isima said that he had no confidence that he would be treated fairly at a performance assessment.

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14. The 2023 Tribunal acknowledged that Dr Isima was unhappy about being asked to undergo a performance assessment but considered that this was not a sufficient reason for him not to comply with the direction. The 2023 Tribunal considered that there was continued non-compliance with the direction and the conditions which were imposed by the 2022 Tribunal.

15. The 2023 Tribunal agreed with the GMC's submission that it could not investigate this matter in a proportionate way until Dr Isima undergoes a performance assessment. The 2023 Tribunal concluded that, given Dr Isima's continued non-compliance, the only appropriate and proportionate sanction was suspension.

16. The 2023 Tribunal determined to suspend Dr Isima's registration for a period of 12 months and directed a review hearing.

The 2024 Tribunal

17. Dr Isima did not attend and was not represented at the hearing.

18. The 2024 Tribunal noted that there had been no material change in the position since the 2023 Tribunal hearing. The 2024 Tribunal concluded that Dr Isima had not undergone a performance assessment and there had been no information from him about why he had not complied with that direction. As such, the 2024 Tribunal determined that Dr Isima had continued to fail to comply with the original direction to undergo a performance assessment and that he had not provided any good reason as to why he had continued not to comply with the direction. The 2024 Tribunal was of the view that this continued failure created a public protection risk given the serious concerns raised about Dr Isima's clinical performance.

19. The 2024 Tribunal had regard to the serious nature of the initial concerns raised about Dr Isima and his continued non-compliance. It was of the view that Dr Isima had been given several opportunities, over a number of years, to engage with the GMC and to undertake the required performance assessment but he had failed to do so. The 2024 Tribunal also had regard to the relevant correspondence from Dr Isima in which he set out that he would not undertake a performance assessment. The 2024 Tribunal was of the view that Dr Isima had impeded the GMC's investigation as it could not move forward without a completed performance assessment. It considered that, based on the information before it, it was highly unlikely that Dr Isima would comply with the direction in the future.

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20. The 2024 Tribunal considered the previous opportunities that Dr Isima has had to comply and the level of his engagement with the fitness to practise process. It determined to suspend Dr Isima's registration for a period of 12 months and concluded that this was the necessary and proportionate period of time given its findings as to non-compliance and the current position. In doing so, it noted that there had not yet been two consecutive years of suspension in Dr Isima's case.

21. The 2024 Tribunal directed a review of Dr Isima's case and indicated in its determination that a review Tribunal would be assisted by receiving:

- evidence that he had undergone a performance assessment, along with its results; and;
- any other information which he considers would assist

Further background

22. Following the 2024 Tribunal, further correspondence occurred between the GMC and Dr Isima, including the following:

- On 21 June 2024, Dr Isima was sent a letter by email reminding him that he was required to undertake a performance assessment.
- On 9 July 2024, Dr Isima was notified that the non-compliance review hearing was listed to take place on 9 May 2025.
- On 1 October 2024, Dr Isima was sent a letter by the GMC reminding him that he was required to undertake a performance assessment.
- On 31 December 2024, Dr Isima was sent a letter by email reminding him that he was required to undertake a performance assessment.
- On 3 January 2025, Dr Isima emailed the GMC stating he would not undergo a performance assessment unless a public investigation into the concerns he had raised about the allegations is undertaken. On the same date, the GMC addressed his concerns by reiterating its investigation process and confirming it had already responded to concerns previously raised by him.
- On 9 January 2025, Dr Isima emailed the GMC disputing the findings of the investigation report provided by Bedfordshire Hospitals NHS Foundation Trust.
- On 21 January 2025, Dr Isima emailed the GMC raising questions regarding the circumstances resulting in the allegations being raised by Bedfordshire Hospitals NHS Foundation Trust.

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- On 6 February 2025, Dr Isima was sent an email by the GMC responding to the concerns raised regarding the allegations, and its decision to investigate those concerns.
- On 17 March 2025, Dr Isima was sent a letter by email reminding him that he was required to undertake a performance assessment.

Review Tribunal

23. This Tribunal has met to review Dr Isima's case. It has considered, under Rule 22A of the Rules, whether Dr Isima has now complied with the direction to undergo an assessment under Schedule 1 of the Rules, which relates to Performance.

24. In reaching its decision, the Tribunal has given careful consideration to the '*Non-Compliance Guidance for medical practitioners tribunals*' ('the Guidance') and all of the evidence adduced in this case. It has also taken account of the submissions made by Ms Thomas, counsel, on behalf of the GMC and those made by Dr Isima.

The Evidence

Documentary Evidence

25. The Tribunal received documentary evidence which included but was not limited to:

- The determinations and associated documents regarding Dr Isima's previous non-compliance hearings;
- Correspondence in regard to the background set out above;
- Statement of Dr Isima – dated 13 April 2025;
- Various witness statements from the local Trust investigation into the matters which led to the concerns about Dr Isima's performance;
- Extracts from HSIB (Health Services Safety Investigations Body) investigation report, undated.

Submissions

GMC submissions

26. On behalf of the GMC, Ms Thomas drew the Tribunal's attention to various correspondence sent by the GMC to Dr Isima inviting him to undergo a performance assessment. She submitted that the GMC had received correspondence back from Dr Isima

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where he provided comments and highlighted areas he disputed. Ms Thomas further submitted that Dr Isima had emailed the GMC and said that he would not be undergoing a performance assessment until there had been ‘further investigations’. Dr Isima also suggested that the GMC was *‘hiding the truth’*.

27. Ms Thomas accordingly submitted that Dr Isima has continued to fail to comply with the direction to undergo a performance assessment and to the contrary, has admitted that he is not willing to undergo it.

28. Ms Thomas submitted that Dr Isima has put forward no good reason for his failure to comply and stated that the doctor’s unhappiness is not sufficient reason in the GMC’s view.

29. In these circumstances, Ms Thomas invited the Tribunal to find non-compliance in Dr Isima’s case.

Doctor’s submissions

30. Dr Isima submitted that he did not agree with the GMC’s reasoning for him to undertake a performance assessment.

31. Dr Isima submitted that the original investigation’s findings needed to be scrutinised and stated that until this has been done, he will not undergo a performance assessment.

32. Dr Isima referred in detail to the documents he had provided to the Tribunal which covered matters relating to the original issues raised with the GMC. He also showed the Tribunal certificates of courses he had undertaken and positive testimonials from senior clinicians, which he said the GMC had been provided with. He contended that he was not at fault and the GMC should hold a full investigation. Dr Isima submitted that it was not fair to ask him to undertake an assessment in all the circumstances. He contended the direction for an assessment should not have been made and said that the evidence showed that he had a good reason for not complying because he is not to blame for the incidents reported to the GMC and has been treated unfairly.

33. Accordingly, Dr Isima invited the Tribunal to find that he had good reason to fail to comply with the order.

The Tribunals’ approach

34. Whilst the Tribunal bore in mind the submissions made, the decision regarding non-compliance is one for the Tribunal to reach, exercising its own judgement.

Tribunal's decision

35. The Tribunal considered whether Dr Isima had complied with the original direction to comply with a performance assessment. The Tribunal had regard to *Non-compliance hearings guidance for medical practitioner tribunals* ('the non-compliance guidance') and the evidence produced in this case when making its decision. Whilst the Tribunal had borne in mind the submissions made by Mr Thomas and Dr Isima, it reminded itself that the decision regarding non-compliance was one for it to reach, exercising its own judgement.

36. The Tribunal took account of the correspondence sent by the GMC to Dr Isima since the 2024 hearing, in which he was asked to engage with a performance assessment. The Tribunal noted that Dr Isima had corresponded with the GMC but that there has been no agreement to undertake a performance assessment and no indication that Dr Isima planned to undertake the assessment going forward.

37. The Tribunal found that there has been no material change in the position since the 2024 Tribunal hearing and concluded that Dr Isima has still not undergone a performance assessment.

38. The only reasons, which Dr Isima has put forward for his failure to undergo a performance assessment, was his own personal disagreements with the reasoning the GMC have provided to direct the performance assessment. The Tribunal did not deem Dr Isima's reasons to be sufficient enough to warrant his failure to undergo the direction.

39. As such, the Tribunal determined that Dr Isima has continued to fail to comply with the original direction to comply with a performance assessment and he has not provided any good reason as to why he has continued not to comply with the direction.

40. The Tribunal considered that this continued failure created a public protection risk given the serious concerns raised about Dr Isima's clinical performance.

41. In all the circumstances, the Tribunal determined that non-compliance has been found in the case of Dr Isima.

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42. Having determined that there is continued non-compliance by reason of Dr Isima's failure to comply with an assessment under Schedule 1 of the Rules, which relates to Performance Assessments, the Tribunal must now consider what direction to make.

The Evidence

43. The Tribunal has taken into account evidence received during the earlier stages of the hearing where relevant in reaching a decision on sanction.

GMC submissions

44. On behalf of the GMC, Ms Thomas submitted that Dr Isima has continuously failed to comply with the order for him to undergo a performance assessment despite the fact that the GMC has made reasonable steps to engage throughout these proceedings.

45. Ms Thomas submitted that there are various concerns about Dr Isima's practice and a pattern of poor and unacceptably low standards of performance and stated that the GMC are unable to assess this, take action and respond to the concerns without Dr Isima undergoing a performance assessment.

46. Ms Thomas submitted that the Tribunal has found that Dr Isima has explicitly refused to comply although he has had extensive opportunity to do so. She stated that Dr Isima's reason is that he fundamentally disagrees that he should undergo it.

47. Ms Thomas submitted that since Dr Isima is currently retired, conditions would not be appropriate. She stated that this combined with Dr Isima's continual refusal to comply meant that anything less than suspension would not assist the GMC.

48. Ms Thomas submitted that the GMC is of the view that there is a real concern that Dr Isima will continue with his non-engagement and therefore, she submitted that an order of indefinite suspension would be the only real means of sending a signal to Dr Isima of the seriousness of his non-compliance.

Doctor's submissions

49. Dr Isima submitted that he agrees with the GMC submission that the public need to be protected.

50. Dr Isima did not make any specific submissions as to what order the Tribunal should make as he did not accept that he had to undertake a performance assessment.

The Tribunal's Approach

51. The Tribunal was aware that the decision as to the appropriate sanction, if any, to impose on Dr Isima's registration was a matter for this Tribunal exercising its independent judgment. In reaching its decision, the Tribunal took account of the non-compliance guidance. The Tribunal had regard to a number of paragraphs within the non-compliance guidance, including those paragraphs quoted above.

52. Throughout its deliberations, the Tribunal considered its overarching objective which includes:

- a. protecting, promoting and maintaining the health, safety and well-being of the public,
- b. maintaining public confidence in the profession,
- c. promoting and maintaining proper professional standards and conduct for the members of the profession.

53. The Tribunal has also borne in mind that the purpose of the sanctions is not to be punitive, but to protect patients and the wider public interest, although they may have a punitive effect.

No action

54. The Tribunal first considered whether to conclude Dr Isima's case, take no further action and revoke his current order.

55. The Tribunal had regard to the initial concerns that were raised in respect of Dr Isima's clinical performance, along with Dr Isima's continued non-compliance with the direction to undertake a performance assessment.

56. The Tribunal determined that, in view of the continuing non-compliance, it would be neither sufficient, proportionate nor in the public interest to conclude this case by taking no action and revoking Dr Isima's current order.

Conditions

57. The Tribunal next considered whether it would be appropriate to impose a period of conditions on Dr Isima's registration. It has borne in mind that any conditions must be appropriate, proportionate, workable and measurable.

58. The Tribunal had regard to a number of paragraphs within the non-compliance guidance, including:

'C14 Conditions are unlikely to be appropriate where a doctor has explicitly refused to comply with a direction or request to provide information or has failed to respond to a direction or request to provide information, and there is no mitigating information available.'

59. The Tribunal again had regard to the seriousness of the initial concerns raised and Dr Isima's continued non-compliance with the direction to undertake a performance assessment.

60. The Tribunal noted that the 2022 Tribunal had imposed conditions at that point, but that this had not resulted in compliance and so the 2023 Tribunal had suspended Dr Isima's registration for 12 months. The Tribunal had no evidence before it to suggest that the position had materially changed since the 2024 Tribunal hearing and has been told by Dr Isima that he explicitly states that he will not undergo a performance assessment.

61. In all the circumstances, the Tribunal was unable to formulate workable or appropriate conditions that, given Dr Isima's continued non-compliance, would adequately protect the public and the public interest. The Tribunal was of the view that a reasonable and informed member of the public would be surprised to learn that conditions had been imposed in circumstances such as this.

62. The Tribunal therefore determined that it would be neither sufficient nor appropriate to direct the imposition of conditions on Dr Isima's registration.

Suspension

63. Having determined that the imposition of conditions would not be appropriate, the Tribunal considered whether to continue with a further sanction of suspension in the case of Dr Isima.

64. The Tribunal had regard to a number of paragraphs within the non-compliance guidance, including:

'C22 In the context of non-compliance, an order of suspension sends a message about the important role the GMC and MPTS play in making sure that a doctor's practice meets the expected standards and that the public is adequately protected where fitness to practise concerns have been raised.'

'C23 When considering whether a period of suspension is a proportionate response to a doctor's non-compliance, the tribunal may want to consider the previous opportunities the doctor has had to comply and the level of the doctor's engagement with the fitness to practise process.'

65. The Tribunal had regard to the serious nature of the initial concerns raised about Dr Isima and to his continued non-compliance. The Tribunal was of the view that Dr Isima had been given multiple opportunities, over a period of four years to undertake the required performance assessment. However, he has failed to do so.

66. The Tribunal also noted that Dr Isima has now explicitly stated that he will not undertake a performance assessment. The Tribunal was of the view that Dr Isima has impeded the GMC's investigation as it cannot move forward without a completed performance assessment.

67. The Tribunal considered that, based on the information before it, it was highly unlikely that Dr Isima will comply with the direction in the future.

68. The Tribunal noted paragraph C25 of the non-compliance guidance:

'Suspension has a deterrent effect and can be used to send a signal to the doctor, the profession and public about what behaviour is expected from a registered doctor. Suspension from the register also has a punitive effect, in that it prevents the doctor from practising and therefore from earning a living as a doctor during the period of suspension, although this is not its purpose.'

69. The Tribunal determined that, given the serious concerns which cannot be investigated without the performance assessment, suspension was the only appropriate sanction that it could impose that would adequately protect the public.

70. In all the circumstances, the Tribunal has determined that all three limbs of the overarching objective remain engaged and that it is appropriate and in the public interest to extend the existing order for suspension indefinitely.

71. The Tribunal is of the view that, if Dr Isima were to be in a position to demonstrate compliance with the GMC's direction in the future, it is open to him to request a review of his case after a period of 2 years have elapsed.

72. The effect of this direction is that, unless Dr Isima exercises his right of appeal, this decision will take effect on the date upon which the previous order would otherwise expire. The suspension currently imposed on his registration will remain in place until the outcome of any appeal is known, pursuant to Schedule 4 paragraph 11(1)(a) of The Medical Act 1983 (as amended). Additionally, if Dr Isima chooses to appeal against this decision the current suspension will remain in force until the appeal is determined.

73. That concludes this hearing.