

PUBLIC RECORD**Date:** 29/08/2025**Doctor:** Dr Muhammad Azeem ALTAF**GMC reference number:** 7874801**Primary medical qualification:** MB BS 2019 Hamdard University Hamdard College of Medicine & Dentistry**Type of case** **Outcome on non-compliance**New - Non-compliance with a performance assessment
Non-compliance found**Summary of outcome**Conditions for 12 months
Review hearing directed
Immediate order imposed**Tribunal:**

Legally Qualified Chair:	Mrs Fiona Barnett
Registrant Tribunal Member:	Dr Loralie Rodrigues
Registrant Tribunal Member:	Dr Rehanna Chaudhary

Tribunal Clerk:	Mr John Poole
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Attendance and Representation:

Doctor:	Not present, not represented
GMC Representative:	Ms Ceri Widdett, Counsel

Attendance of press / public

In accordance with Rule 41 of the General Medical Council (Fitness to Practise) Rules 2004 the hearing was held partly in public and partly 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 consideration of Non-compliance - 29/08/2025

1. The Tribunal accepted the GMC's submissions that notice of this hearing had properly been served on Dr Altaf. The Tribunal also determined that this hearing should proceed in his absence. The Tribunal's full decision is included at Annex A.
2. Having given Ms Widdett the opportunity to make submissions, the Tribunal decided that any matters which surround the issue of Dr Altaf's referral to the GMC should be dealt with in private.

Background

3. Dr Altaf qualified as a doctor in 2019 from Hamdard University, Hamdard College of Medicine & Dentistry, Pakistan. He then completed an internship following which he worked in ITU for eleven months before going on to complete the Professional and Linguistic Assessment Board (PLAB) exam, allowing him to practise in the UK. Dr Altaf moved to the UK and worked for six months as a trauma and orthopaedics clinical fellow at the Royal Berkshire Hospital in Reading. He then joined the Emergency Department at Gloucester Royal Hospital on 7 February 2024.
4. In October and November 2024 the GMC received information regarding concerns around Dr Altaf's performance whilst working as a locally employed doctor within the Emergency Department at Gloucestershire Hospitals NHS Foundation Trust. These related to clinical and professional concerns, including concerns about his clinical capability, going missing during shifts, seeing very few patients, very little insight into his limitations, not being able to work at F2 level and the need for supervision in the Emergency Department. There were also probity concerns relating to annual leave.
5. On 28 January 2025 a GMC Assistant Registrar directed that Dr Altaf undertake a Performance Assessment.
6. On 26 February 2025, Dr Altaf was sent a reminder by email requesting that he complete a Performance Assessment Portfolio form ('the Portfolio Form'). On 12 March 2025 he returned the completed Portfolio Form and confirmed by email that he was residing outside the UK at the time. On the same date the GMC explained that he would need to travel to Manchester for the Performance Assessment, and he responded explaining that he was unable to travel to the UK due to a lack of a visa, and requested guidance on alternative options. The GMC responded explaining that he would need to make his own visa arrangements to attend the Performance Assessment.

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7. On 19 March 2025, Dr Altaf was sent an email seeking an update regarding whether he intended to proceed with the Performance Assessment. On 27 March 2025, he was sent a further email requesting his understanding of the Performance Assessment invitation, and he responded on the same date confirming again that he was unable to travel to the UK due to financial restraints.

8. On 31 March 2025, the GMC reminded Dr Altaf of the requirement to undertake a Performance Assessment and notified him of a potential referral to a Medical Practitioners Tribunal ('MPT') for a non-compliance hearing. On 7 and 16 April 2025, Dr Altaf was sent further emails requesting that he confirm his understanding of the potential referral to a non-compliance hearing due to his failure to comply with the direction to undergo a Performance Assessment. On 20 April 2025, Dr Altaf confirmed by email that he understood the importance of the Performance Assessment but stated that he was unable to travel to the UK due to financial constraints.

9. On 16 May 2025, Dr Altaf was notified by the GMC that he had been referred to a Medical Practitioners Tribunal non-compliance hearing.

Today's proceedings

10. The Tribunal has convened to consider Dr Altaf's case. It is required to consider, under Rule 17ZA of the Rules, whether Dr Altaf has failed to comply with a direction to undertake a Performance Assessment.

11. In reaching a decision on the matter of non-compliance, the Tribunal has given careful consideration to the Non-Compliance Guidance for medical practitioners tribunals (2024) (the Guidance) and all of the evidence adduced in this case. It has also taken account of the submissions made Ms Widdett, Counsel, on behalf of the GMC.

Documentary Evidence

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

- A referrer form received by the by GMC from Gloucestershire Hospitals NHS Foundation Trust's Medical Director;
- Letter to Dr Altaf following an Educational Supervisor Meeting, 25 March 2024;
- Letter to Dr Altaf following meeting over clinical performance & professional behaviour, 17 May 2024;
- Assistant Registrar decision directing Dr Altaf to undergo Performance Assessment, dated 28 January 2025;
- GMC correspondence to Dr Altaf with invitation to undergo Performance Assessment, 28 January 2025;
- GMC email to Dr Altaf regarding completing PA portfolio form, 26 February 2025;
- MPTS notice of hearing dated 16 July 2025
- GMC notification of hearing dated 28 July 2025
- Email correspondence between GMC and Dr Altaf up to 31 July 2025.

Submissions

13. On behalf of the GMC, Ms Widdett, Counsel, outlined the background to Dr Altaf's case and drew the Tribunal's attention to the relevant paragraphs of the Guidance.

14. Ms Widdett submitted that there is clearly evidence that there has been a failure to comply in this case. She submitted that no Performance Assessment has taken place so far and that Dr Altaf has said he would undergo one in December 2025/January 2026. She submitted that the GMC cannot continue to properly investigate this case without a completed performance assessment.

15. Ms Widdett submitted that Dr Altaf has a duty to comply with the GMC whilst on the medical register. She drew the Tribunal's attention to paragraph A17 of the Guidance which provides that:

A17 There does not need to be culpability on a doctor's part for the tribunal to conclude there is evidence that the doctor has 'failed to comply.' At this stage, the tribunal is simply considering whether there is evidence to show, as a matter of fact, the doctor has not complied with the GMC's direction or request to provide information.

16. Ms Widdett submitted that there was no good reason for Dr Altaf's non-compliance. She drew the Tribunal's attention to examples of good reasons for failing to comply with a GMC direction, as outlined at paragraph A24 of the Guidance and submitted that none of the reasons set out apply.

17. Ms Widdett also submitted that paragraph A39a & b of the Guidance were particularly relevant. These state that:

A39 Where a doctor raises their personal circumstances as a reason for not being able to comply, the following situations will not usually amount to a good reason unless there is objective evidence the doctor will be able to comply in a reasonable timeframe:

- a) a doctor says they are unable to travel or obtain a visa to travel*
- b) a doctor cites financial difficulties*
- ...*

18. Ms Widdett submitted that there is no good reason for the failure to comply and that there is not any objective evidence that Dr Altaf will be able to comply with the direction within a reasonable time frame. She reminded the Tribunal that the request that Dr Altaf undergo a Performance Assessment was first made in January 2025.

The Tribunals' approach

19. 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. The onus rests on the GMC to satisfy the Tribunal that there has been non compliance.

20. Throughout its considerations the Tribunal had regard to the Guidance.

21. The Tribunal must look at the evidence before it in determining whether Dr Altaf has failed to comply with the direction to undergo a Performance Assessment.

22. The LQC drew the Tribunal's attention to the guidance, in particular paragraph A16 which states:

'A16 When considering the issue of the doctor's compliance with a GMC direction or request to provide information, the tribunal should ask the following questions:

- a) *has the doctor failed to comply with the GMC's direction or request to provide information?*
- b) *if so, is there a good reason for the doctor's failure to comply?'*

23. The LQC advised that the decision is binary: Dr Altaf has either complied with the direction or not. There is no requirement for the Tribunal to be satisfied that there is culpability on the doctor's part when looking at the issue of whether he has failed to comply or not. If the Tribunal's finds that there has been a failure to comply, it must then consider whether there is evidence to demonstrate that there was good reason for Dr Altaf's failure to comply. If the Tribunal finds that there is no good reason for the failure to comply, it can make a finding of non-compliance.

The Tribunals' Decision on Non-Compliance

24. The Tribunal first considered whether Dr Altaf had failed to comply with the GMC direction that he undertakes a Performance Assessment.

25. The Tribunal noted that the GMC first informed Dr Altaf on 28 January 2025 that he had been directed to undergo a Performance Assessment. He returned his Portfolio Form in March 2025 which signified an agreement to comply. Subsequently however, there were numerous emails between Dr Altaf and the GMC in which he explained that he could not return to the UK to undergo the Performance Assessment. In the most recent correspondence before the Tribunal, he has given a commitment to undertake the assessment, but enquired as to whether he could undertake it in December 2025 or early 2026.

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26. The Tribunal concluded that it is self-evident from the correspondence before it that Dr Altaf has not complied with the GMC's direction to undertake the Performance Assessment. In the circumstances, the Tribunal determined that he has failed to comply with the direction.

27. The Tribunal next went on to consider whether there was a good reason for Dr Altaf's failure to comply with the direction to undergo the Performance Assessment.

28. The Tribunal considered that paragraphs A39 a & b, (above) and A42 of the Guidance were particularly relevant. Paragraph A42 states:

'A42 Objective evidence relating to a doctor being unable to travel could include the submission of documents demonstrating a visa had been applied for in a timely manner or consideration of the application had been delayed for reasons beyond the doctor's control but will be complete within a specified time. In this scenario, it is unlikely to be sufficient for a doctor to simply inform the GMC that they were unable to obtain a visa.'

29. Dr Altaf has relied on his personal circumstances as his justification for not carrying out the Performance Assessment.

30. He initially said, in correspondence in March 2025, that he did not have a visa, or employment in the UK, so was unable to return to the UK in the near future to attend the Assessment in person.

31. Subsequently, in correspondence later in March and in April 2025, Dr Altaf said that he was unable to return to the UK due to financial constraints.

32. More recently, in July 2025, Dr Altaf confirmed his willingness to undertake the assessment, "as an alternative to attending the non-compliance hearing", and asked for the assessment to be scheduled in December 2025, or January 2026. This commitment was reiterated in another email later in July, in which Dr Altaf said he would "begin the process" of obtaining the necessary visa.

33. However, notwithstanding Dr Altaf's assurances that he will undergo the performance assessment, he has provided no objective evidence to support his explanation that he was previously unable to return to the UK due to financial constraints or that his financial position has now changed. He has also provided no objective evidence to demonstrate that he will be able to return to the UK to comply with the direction within a reasonable timeframe.

34. Dr Altaf has asked for a date in December 2025 or January 2026 to complete the assessment, but has provided no rationale or justification for why he has requested these particular dates. He has also not provided any objective evidence, such as correspondence pertaining to a visa application, to show that he will be in the UK at that time.

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35. Further, although he has also confirmed his commitment to undertake the performance assessment, it is evident from correspondence from him dated 26 July 2025 that he had not applied for a visa at that time, and was intending to “begin the process” of doing so. This is despite having been informed by the GMC several months earlier that it was his responsibility to apply for a visa. Dr Altaf stated he would supply proof of his visa application as soon as it became available, but the Tribunal was not provided with such evidence.

36. Seven months have now elapsed since the direction to undergo a performance assessment was made. To date, Dr Altaf’s assertions and explanations for not undertaking the assessment remain entirely unsupported by evidence. In the absence of any objective evidence from Dr Altaf to demonstrate that he has a good reason for not undertaking the assessment and to satisfy the Tribunal that he will undertake the assessment within a reasonable timeframe, the Tribunal found that he did not have good reason for his failure to comply with the direction. The Tribunal was satisfied that the Performance Assessment was necessary for the GMC to be able to continue its investigation into Dr Altaf’s fitness to practise.

37. In all the circumstances, the Tribunal found that Dr Altaf has not complied with the direction to undertake the performance assessment and there was no good reason for his failure. It therefore made a finding of non-compliance.

Determination on Sanction - 29/08/2025

38. This determination will be read in private. However, as this case concerns Dr Altaf’s non-compliance a redacted version will be published at the close of the hearing.

39. Having determined that there is non-compliance by reason of Dr Altaf’s failure to comply with an assessment under Schedule 1 of the Rules which relates to Performance Assessments (PAs), the Tribunal must now consider what direction, if any, to make.

Submissions

40. On behalf of the GMC, Ms Widdett submitted that conditions would be appropriate in this case.

41. Ms Widdett submitted that Dr Altaf has stated that he is currently working as a doctor in trauma and orthopaedics in Pakistan at CT1 and 2 level. She submitted that Dr Altaf has stated he would like to return to the UK in the future.

42. Ms Widdett submitted that Dr Altaf was currently subject to an interim order of conditions. Following Tribunal questions as to whether the order was reviewed recently, Ms Widdett provided the Tribunal with a copy of the determination dated 8 August 2025 which showed that the order was reviewed and maintained by an interim orders tribunal.

43. Ms Widdett took the Tribunal through the relevant parts of the Guidance, including paragraph C19 which provides:

'C19 Where the doctor is currently subject to an interim order, the tribunal should consider what restrictions are necessary to protect against the same risks identified by the interim orders tribunal where the tribunal considers these risks still to be present, and against any new risks identified by the tribunal during the non-compliance hearing.'

44. Ms Widdett took the Tribunal through the reasoning of the interim orders tribunal for imposing conditions, as well as the conditions imposed.

45. Ms Widdett submitted that any conditions imposed should be appropriate, proportionate, workable, and measurable. She submitted that conditions would be appropriate to protect the public and uphold public confidence until such time as Dr Altaf has undergone a performance assessment.

46. Ms Widdett submitted that suspension would not be appropriate because Dr Altaf has engaged with the GMC and not refused to comply with the direction to undergo a Performance Assessment.

47. In relation to the duration of the conditions, Ms Widdett highlighted paragraph C29b which provides that:

'C29 The following factors will be relevant when determining the length of any non-compliance order:

b) the amount of time the doctor is likely to require in order to evidence full compliance....'

48. Ms Widdett also submitted that the GMC did not seek an immediate order in this case given that Dr Altaf does not currently work in the UK and is not able to return until he resolves his visa situation. As such an immediate order was not necessary.

The Tribunal's approach

49. The Tribunal reminded itself that it is not making any finding of impairment.

50. The Tribunal was mindful that the main reason for making any direction is to uphold the overarching objective and that any direction is not made to punish or discipline doctors, even though it may have a punitive effect. In reaching its decision, the Tribunal has taken the *Guidance on Non-compliance hearings* into account and borne in mind the overarching objective which includes:

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

51. Throughout its deliberations and in conducting its risk assessment, the Tribunal applied the principle of proportionality, balancing Dr Altaf's interests with the public interest.

The Tribunal's Decision

52. The Tribunal bore in mind its finding of non-compliance, along with the evidence already adduced and the further submissions of Ms Widdett.

No Action

53. The Tribunal first considered whether to conclude Dr Altaf's case and take no further action.

54. The Tribunal considered that to take no action would fail to uphold the overarching objective given the wide-ranging concerns encompassing his clinical capability, conduct and probity.

Conditions

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

56. The Tribunal had regard to the Guidance, in particular paragraph C13 which states:

'C13 Conditions might be appropriate where the doctor has provided some mitigation for their non-compliance that, whilst not sufficient to satisfy the tribunal that the doctor had a good reason for their past non-compliance, does satisfy the tribunal that the doctor will comply in the future and that conditions are sufficient to meet the regulatory purpose of protecting the public.'

57. The Tribunal bore in mind that whilst it did not find a good reason for Dr Altaf's non-compliance, Dr Altaf has engaged with the GMC and has demonstrated a commitment to comply with the GMC's direction to undergo a Performance Assessment in December 2025 or January 2026. Although Dr Altaf has given no explanation for selecting these dates, it was apparent to the Tribunal, having read the most recent interim order decision that the GMC is working towards these dates.

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58. Having taken this into account, the Tribunal was satisfied that it is sufficient and proportionate, weighing the interests of the public with Dr Altaf's interests, to impose conditions on his registration. Given the wide-ranging concerns about Dr Altaf's performance and conduct, it was the Tribunal's view that conditions are required to ensure that the public is protected, that public confidence in the profession is upheld, and that proper standards of conduct are maintained whilst allowing Dr Altaf to continue in clinical practice.

59. In formulating appropriate conditions, the Tribunal reviewed the evidence before it including the outcome of the consultant educational meeting dated 7 June 2024, in which it was stated:

'...The faculty feel that because of these concerns he should not be working when a consultant is not present in the ED (ie nights) and he should not be able to apply for locum work in the ED. " This is clear and essentially saying that he cannot do nights or locums as he requires close supervision. This is the same stipulation for F1s in ED. Hence I would suggest he is currently NOT performing at the level of F2.'

60. Having taken this evidence into account, the Tribunal decided it would be appropriate to restrict Dr Altaf's work to the level of foundation year 1 doctor.

61. The Tribunal has therefore determined that Dr Altaf's registration shall be subject to the following conditions for a period of 12 months. The Tribunal considered that this period of time should be sufficient to enable Dr Altaf to obtain a visa, travel to the UK to undertake the Performance Assessment and for the Performance Assessment Report to be written.

62. The following conditions will be published:

- 1 a Before 31 January 2026, he must
 - i submit to and comply with an assessment of his performance;
 - ii having submitted to the above assessment, comply with all requirements in respect of that assessment.
- 2 He must personally ensure the GMC is notified within seven calendar days of the date these conditions become effective:
 - a of the details of his current post, including:
 - i his job title
 - ii job location
 - iii his responsible officer (or their nominated deputy)
 - b of the contact details for his employer and any contracting body, including his direct line manager

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- c of any organisation where he has practising privileges and/or admitting rights
 - d of any training programmes he is in
 - e of the contact details of any locum agency or out-of-hours service he is registered with.
- 3 He must personally ensure the GMC is notified:
- a of any post he accepts, before starting it
 - b that all relevant people have been notified of these conditions, in accordance with condition 9
 - c if any formal disciplinary proceedings against him are started by his employer and/or contracting body, within seven calendar days of being formally notified of such proceedings
 - d if any of his posts, practising privileges or admitting rights have been terminated by his employer before the agreed date within seven calendar days of being notified of the termination
 - e if he applies for a post outside the UK.
- 4 He must allow the GMC to exchange information with his employer and/or any contracting body for which he provides medical services.
- 5 He must get the approval of the GMC before working in a non-NHS post or setting.
- 6 He must not work in a post above the level of F1 doctor.
- 7
- a He must be closely supervised in all of his posts by a clinical supervisor, as defined in the *Glossary for undertakings and conditions*. His clinical supervisor must be appointed by his responsible officer (or their nominated deputy).
 - b He must not work until:
 - i his responsible officer (or their nominated deputy) has appointed his clinical supervisor and approved his supervision arrangements.
 - ii he has personally ensured that the GMC has been notified of these arrangements.
 - c He must give a report from his clinical supervisor to the tribunal at his next review hearing.
- 8 He must not work in any locum post or fixed term contract of less than 12 weeks duration.

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9 He must personally ensure that the following persons are notified of the conditions listed at 1 to 8:

- a his responsible officer (or their nominated deputy)
- b the responsible officer of the following organisations:
 - i his place(s) of work and any prospective place of work (at the time of application)
 - ii all his contracting bodies and any prospective contracting body (prior to entering a contract)
 - iii any organisation where he has, or has applied for, practising privileges and/or admitting rights (at the time of application)
 - iv any locum or out-of-hours service he is registered with
 - v if any organisation listed at i) to iv) does not have a responsible officer, he must notify the person with responsibility for overall clinical governance within the organisation. If he is unable to identify this person, he must contact the GMC for advice before working for that organisation.
- c his immediate line manager and senior clinician (where there is one) at his place of work, at least 24 hours before starting work (for current and new posts, including locum posts).

63. The Tribunal decided, in the light of Dr Altaf's apparent willingness to engage with the Performance Assessment, that an order of suspension would be disproportionate.

Review

64. The Tribunal determined to direct a review of Dr Altaf's case. A Tribunal will review his case at a hearing to be held shortly before the end of the period of conditional registration. The onus is on Dr Altaf to demonstrate compliance and if at any time he considers that he has fully complied, Dr Altaf can make a request to the GMC for them to consider arranging an early review of the non-compliance order.

Determination on Immediate Order 29/08/2025

65. Having determined that conditions be imposed on Dr Altaf's registration, the Tribunal has now considered, in accordance with Rule 17ZA(h) of "The Rules" and Section 38 of the Medical Act (1983) as amended, whether his registration should be subject to an immediate order.

Submissions

66. On behalf of the GMC, Ms Widdett submitted that the GMC did not seek an immediate order in this case given that Dr Altaf does not currently work in the UK and is not able to return until he resolves his visa situation. In support of her submission, Ms Widdett drew the Tribunal's attention to paragraph C38 of the Guidance which provides that:

'C38 The tribunal may impose an immediate order where it is satisfied that it is:

- a) necessary to protect members of the public*
- b) desirable in the public interest to maintain public confidence and uphold proper standards of conduct and behaviour*
- c) in the interests of the doctor...'*

The Tribunal's Decision

67. The Tribunal has taken account of the relevant paragraphs of the Guidance, including paragraphs C38 to C44.

68. Given the Tribunal's reasoning for imposing conditions the Tribunal determined that an immediate order is necessary to protect the public and is desirable in the public interest, to maintain public confidence and uphold proper standards of conduct and behaviour.

69. The Tribunal was mindful that Dr Altaf's position may change in relation to his visa application and that he may be in a position to return and work in the UK sooner than anticipated. Further, the Tribunal has imposed conditions which are more onerous than those imposed by the interim orders tribunal having taken account of all the evidence before it today and its findings in relation to Dr Altaf's non-compliance.

70. Therefore the Tribunal determined that it was necessary for the protection of members of the public and was in the public interest to impose an immediate order of conditions in the same terms as the non-compliance order, on Dr Altaf's registration.

71. This means that Dr Altaf's registration will be made subject to the immediate conditions from the date on which notification of this decision is deemed to have been served upon him. The substantive direction will take effect 28 days from that date, unless an appeal is made in the interim. If an appeal is made, the immediate order will remain in force until the appeal has concluded.

72. The interim order will be revoked when the immediate order takes effect.

73. That concludes this hearing.

ANNEX A – 29/08/2025

Determination: Service and proceeding in absence

Service:

74. Dr Altaf is neither present nor represented today.

75. The Tribunal considered whether the relevant documents had been served on Dr Altaf in accordance with the General Medical Council (Fitness to Practise Rules) 2004 (The Rules) and paragraph 8, Schedule 4 of the Medical Act 1983 as amended ("The Act").

76. Ms Widdett, Counsel, on behalf of the GMC provided a proof of service bundle. This contained:

- A screenshot of Dr Altaf's registered/verified email address;
- The notification correspondence to Dr Altaf from the GMC regarding the referral to a non-compliance hearing, dated 16 May 2025;
- An email to Dr Altaf further notifying of the referral to a non-compliance hearing, dated 14 July 2025, which attached a copy of the listing notification previously sent to him by the MPTS, dated 24 June 2025;
- An email from Dr Altaf expressing agreement to undergo a performance assessment, dated 16 July 2025;
- The MPTS Notice of hearing correspondence sent to Dr Altaf, dated 16 July 2025;
- Dr Altaf's acknowledgement to the Notice of hearing from the MPTS, dated 17 July 2025
- The Rule 34(9) correspondence sent to Dr Altaf via email, dated 28 July 2025;
- Acknowledgement from Dr Altaf of the Rule 34(9) correspondence and details of the draft hearing bundle, dated 31 July 2025.

77. Ms Widdett submitted that notice of the hearing has been served in accordance with the Rules. She submitted that the MPTS Notice of hearing was sent to Dr Altaf on 16 July 2025 and the GMC Rule 34(9) correspondence was sent to him on 28 July 2025. She submitted that there is acknowledgement from Dr Altaf to this correspondence.

78. In the circumstances, the Tribunal was satisfied that notice of this hearing has been served in accordance with the relevant provisions. The Tribunal went on to consider whether to proceed in Dr Altaf's absence pursuant to Rule 31.

Proceeding in Dr Altaf's absence

79. Ms Widdett reminded the Tribunal that the discretion to proceed in the absence of a doctor should be exercised with the utmost care and caution, balancing the interests of the doctor with the wider public interest, namely the timely and expeditious consideration of regulatory matters.

80. Ms Widdett invited the Tribunal to proceed in Dr Altaf's absence. She submitted that all reasonable efforts have been made to serve Dr Altaf with notice of the hearing. She submitted that Dr Altaf is aware of these proceedings and has chosen not to attend or instruct someone else to attend on his behalf. She submitted that Dr Altaf has voluntarily absented himself from this hearing and that there is no evidence that an adjournment would secure his attendance in the future.

The Tribunal's Decision

81. The Tribunal had regard to the Rule 31, the statutory overarching objective and the relevant caselaw, namely, the cases of *R v Jones [2001] QB 862*, ("Jones"), and *GMC v Adeogba [2016] EWCA Civ 162*, ("Adeogba").

82. The Tribunal carefully balanced Dr Altaf's interests with the public interest in deciding whether to proceed in his absence.

83. The Tribunal bore in mind that the notice of hearing was properly served on Dr Altaf and that he acknowledged correspondence from the GMC and MPTS in relation to the hearing. Moreover, in email correspondence to the GMC on 26 July 2025 he stated: '*I understand that the non-compliance hearing will proceed as scheduled, and since my attendance is not required, I have no further comments to add at this time...*'

84. The Tribunal determined, having taken account of the email from Dr Altaf dated 26 July, that Dr Altaf has voluntarily waived his right to attend the hearing. He has not requested an adjournment, and there is no information to suggest that a short adjournment will secure his attendance at a date in the future. The Tribunal determined that given the concerns in this case, there is strong public interest in the hearing proceeding expeditiously. Accordingly, the Tribunal determined that it was fair and appropriate to proceed in Dr Altaf's absence in accordance with Rule 31 of the Rules.