

PUBLIC RECORD**Dates:** 09/05/2025**Doctor:** Dr Lawrence ARMSTRONG**GMC reference number:** 7293786**Primary medical qualification:** MB BS 2012 Imperial College London**Type of case** **Outcome on impairment**

Review - Conviction Not Impaired

Summary of outcome

Suspension to expire

Tribunal:

Legally Qualified Chair	Ms Jayne Wheat
Lay Tribunal Member:	Mr Matthew Fiander
Registrant Tribunal Member:	Professor Marios Adamou

Tribunal Clerk:	Mr Andrew Ormsby
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Attendance and Representation:

Doctor:	Present, represented
Doctor's Representative:	Mr Kevin McCartney, Counsel, instructed by Gordons LLP
GMC Representative:	Mr Terence Rigby, 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 Impairment - 09/05/2025

1. This determination will be handed down in private XXX. However, as this case concerned Dr Armstrong's conviction a redacted version will be published at the close of the hearing.

Background

2. At this review hearing the Tribunal 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 Armstrong's fitness to practise remains impaired by reason of conviction.

The Outcome of Applications Made during the Impairment Stage

3. The Tribunal granted the application of Mr Kevin McCartney, Counsel on behalf of Dr Armstrong, made pursuant to Rule 41 of the Rules, that the hearing should be heard in private XXX. The GMC did not oppose the application. XXX

Background

4. Dr Armstrong qualified as doctor with an MMBS in 2012 from Imperial College London. He then commenced his foundation year training at University Hospital Southampton in August 2012 and progressed his training at multiple hospitals before moving to Buckinghamshire Healthcare NHS Trust ('the Trust') in August 2020. At the time of the events Dr Armstrong was practising as an Intensive Care Medicine trainee at the Trust.

5. On 17 October 2023, at Oxford Magistrates' Court, Dr Armstrong was convicted, after pleading guilty, of two counts of Burglary, two counts of Burglary with intent to steal and three counts of possession of a controlled drug. On 20 November 2023, Dr Armstrong was

sentenced at Oxford Crown Court to a total of eight months imprisonment suspended for 18 months and 150 hours unpaid work in a 12-month period.

The 2024 Hearing

6. Dr Armstrong's hearing took place in December 2024.
7. Dr Armstrong admitted the Allegation relating to his above conviction in its entirety.
8. The brief facts of Dr Armstrong's offending behaviour consisted of offending over a sustained period of time of a number of months. Dr Armstrong targeted his former place of work to steal controlled drugs and did so to avoid detection. Dr Armstrong had used his old identification card to gain access and thereby abused the trust of his former employers.

Summary of Dr Armstrong's evidence at the 2024 Hearing

9. Dr Armstrong has not previously been subjected to any other GMC investigations. At the outset of Covid-19 Dr Armstrong was in the midst of his training and was positioned as an Infectious Diseases Registrar, then as the pandemic continued, he served as the General Medical Registrar on-call and moved to the Intensive Care Unit at the end of the first wave in August 2020. XXX

10. XXX

11. XXX

12. XXX

13. Post conviction, Dr Armstrong completed the unpaid work hours within nine months of the sentence and there were no outstanding requirements.

14. Dr Armstrong stated his conviction has brought the profession into disrepute and will have damaged the public confidence in the profession.

15. XXX

2024 Tribunal's findings

16. The 2024 Tribunal found that there was a low risk of repetition of the behaviour that led to Dr Armstrong's conviction. It determined that Dr Armstrong's fitness to practise was impaired, on public interest grounds alone, by reason of his conviction. It determined to suspend his registration for a period of four months to mark the seriousness of the doctor's conviction which involved dishonesty. The Tribunal determined that the length of the suspension would cover the end of the operational period of the criminal sentence.

17. The 2024 Tribunal determined that the suspension would uphold the overarching objective of promoting and maintaining public confidence in the medical profession and declaring and upholding proper professional standards and conduct for members of the medical profession.

18. In its determination the 2024 Tribunal stated that a future reviewing Tribunal might be assisted by the following:

- An up-to-date reflective piece on Dr Armstrong's insight into the maintenance of public confidence in the medical profession and proper professional standards and conduct for members of the medical profession.
- Any evidence of continuing remediation including a course on probity;
- Evidence that Dr Armstrong has kept his medical knowledge and skills up to date including relevant Continued Professional Development;
- XXX;
- Evidence of any relevant work Dr Armstrong has undertaken during the period of suspension; and
- Any other relevant evidence that Dr Armstrong considers will assist the reviewing tribunal.

Today's Hearing

19. This is the first review of Dr Armstrong's case.

The Evidence

20. The Tribunal has taken into account all of the evidence it received at this review hearing, both oral and documentary.

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

- Record of Determination from the hearing, dated 16-18 December 2024;
- Personal reflective statement, dated 9 May 2025;
- CPD certificates, various dates;
- XXX;
- XXX; and
- Testimonials, various dates.

22. Dr Armstrong gave oral evidence at the hearing. He provided details of what he has done during the period of suspension, which including targeted CPD, particularly around issues of probity. He explained that he had been given a non-clinical role by his Trust and explained the project he had recently undertaken at work as a part of his role. He also candidly discussed XXX, the circumstances of his criminal offending and his dishonesty as well as XXX. Further, he explained that he understood the importance of honesty in the medical profession, the importance of maintaining the trust the public have in the profession and how his conviction had damaged this trust. He told the Tribunal that he recognised the impact not only on public confidence, but upon his colleagues and his family and friends.

23. Mr Rigby on behalf of the GMC did not put any questions to Dr Armstrong during his oral evidence. The Tribunal asked questions of Dr Armstrong.

Submissions

Submissions on behalf of the GMC

24. Mr Rigby stated that the GMC were effectively neutral in relation to this review. He stated that it was entirely a matter for the Tribunal to evaluate the information now before it, to determine whether Dr Armstrong's fitness to practise remained impaired.

Submissions on behalf of Dr Armstrong

25. Mr McCartney submitted that Dr Armstrong had provided clear evidence, both in his documentary evidence and in his oral evidence at the hearing, that he had met any residual concerns raised by the 2024 Tribunal.

26. Mr McCartney submitted that Dr Armstrong recognised the seriousness of the matters that resulted in these fitness to practise proceedings. XXX.

27. Mr McCartney stated that the 2024 Tribunal had stated that the onus was upon Dr Armstrong to provide evidence at this review that he had fully remediated and demonstrated clear insight. He referenced Dr Armstrong's extensive reflections, his oral evidence, his targeted CPD and XXX.

28. Mr McCartney submitted that Dr Armstrong had been transparent and had XXX.

29. Mr McCartney submitted that the fitness to practise of Dr Armstrong should no longer be regarded as being impaired and noted that the 2024 Tribunal had found that there was a low risk of repetition. He stated that the doctor has a lot to offer the profession and an informed member of the public looking at it through that end of the telescope would not be concerned by a return to practise, as it was clear that Dr Armstrong could return to practice at a high level and improve matters for patients.

30. Mr McCartney took the Tribunal through the recently obtained testimonials, XXX, all of which were positive in their view of Dr Armstrong.

31. Mr McCartney concluded by emphasising that, in his submission, in light of all the information that the Tribunal had now received, the outcome of this review should be to allow Dr Armstrong to return to practise and continue to serve the wider public and those who benefit from his professional experience.

The Relevant Legal Principles

32. The Tribunal reminded itself that the decision on impairment is a matter for the Tribunal's judgement alone. As noted above, the previous 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 practise.

33. This Tribunal must determine whether Dr Armstrong's fitness to practise is impaired today, taking into account Dr Armstrong's conduct at the time of the events and any relevant factors since then.

34. The Legally Qualified Chair (LQC) reminded the Tribunal that a review hearing was not an opportunity to re-open or revisit the 2024 Tribunal determination, but rather was but a procedure to consider and determine, with the benefit of evidence and submissions, whether the practitioner's fitness to practise remains impaired as a first step.

The Tribunal's Determination on Impairment

35. The Tribunal had regard to the determinations of the 2024 Tribunal. It took account of the findings of that Tribunal and its recommendations as to the kind of evidence that might assist a reviewing Tribunal.

36. This Tribunal was mindful that there is a persuasive burden upon the doctor at a review hearing to demonstrate that their fitness to practise is no longer impaired.

37. The Tribunal considered Dr Armstrong's written reflective statement and his oral evidence at this hearing. It concluded that in both, he addressed all of the remaining areas of concern in respect of his conviction. He was able to demonstrate his understanding of how and why he had behaved dishonestly, as well as the steps he has taken to ensure that that behaviour is not repeated. The Tribunal was satisfied that Dr Armstrong was able to recognise the impact that his actions, in undermining the trust placed in doctors, had had, both on the public, and upon his colleagues and family and friends.

38. Whilst noting that, XXX, the Tribunal considered that Dr Armstrong had taken meaningful steps to mitigate this risk. Dr Armstrong had demonstrated genuine remorse for his past conduct and convictions. It considered that he had internalised this learning and had developed appropriate strategies to avoid any repetition.

39. The Tribunal took into account the many positive, up to date testimonials and feedback from colleagues, which demonstrated that he was highly thought of, and that he had continued to be transparent about his convictions. XXX.

40. The Tribunal considered Dr Armstrong's evidence XXX which further supported the Tribunal's view that he has fully acknowledged his failings and learned from them. XXX.

41. Overall, it was the view of this Tribunal that Dr Armstrong had provided considerable evidence of remediation and insight, particularly in relation to the targeted courses in matters of probity, honesty and integrity. XXX.

42. Therefore, the Tribunal considered that Dr Armstrong had fully met the 2024 Tribunal's recommendations.

43. In all the circumstances of this case, the Tribunal was of the view that there was little more that Dr Armstrong could do to demonstrate that he was fit to return to practice without restrictions.

44. The Tribunal recognised that the original suspension was imposed not because of an ongoing risk of repetition, but to maintain public confidence in the profession and to declare and uphold standards in the profession, given the seriousness of his conviction. The 2024 Tribunal had already concluded that Dr Armstrong was unlikely to repeat his behaviour that led to his conviction, and the Tribunal saw no evidence to contradict this.

45. The Tribunal concluded that, based upon all the evidence before it, it was satisfied that he is fit to practise without restriction. The Tribunal found that an informed member of the public, fully aware of all the facts of the case, reviewing the evidence before it, would conclude that Dr Armstrong was no longer impaired.

46. Accordingly, the Tribunal determined that Dr Armstrong's fitness to practise was no longer impaired by reason of his conviction.

47. The Tribunal noted that Dr Armstrong's suspension is due to expire on 20 May 2025. Given that the 2024 Tribunal suspended Dr Armstrong's registration in order to promote and maintain public confidence and declare and uphold standards in the profession, it determined that it was in the public interest to allow the suspension to expire rather than to revoke the order as of today.

48. That concludes this case.