

Decisions at the case examiner stage

Table of Contents

Decisions at the case examiner stage	1
Introduction	2
Being proportionate, transparent and fair	3
Decision on impairment.....	3
Has the case been sufficiently evidenced?.....	4
Adverse inferences	4
Is there any current and ongoing risk to public protection?	6
Referral to an Associates Tribunal	7
Withdrawal of referral to an Associates Tribunal.....	8
Imposing a final measure	9
Where the PA or AA agrees to the terms of the proposed outcome.....	9
Where the PA or AA does not provide a reasoned response.....	10
Where the PA or AA makes representations about the workability of conditions.....	11
Other decisions that may be made at the case examiner outcome stage	13
Requesting further information	13
Extending timeframes	14
Extending the timeframe for representations where the case examiners are minded to issue a warning.....	14
Extending the timeframe for an associate to respond to a proposed outcome	15
Withdrawal of the terms of a proposed outcome	17

Date of publication: December 2024

Last updated: December 2024

Introduction

1. Following an onward referral decision, the case examiners will consider a case and decide whether a Physician Associate's (PA) or Anaesthesia Associate's (AA) fitness to practise is impaired, and what regulatory action, if any, is needed to protect the public. To do this, case examiners will:
 - a. consider all relevant information referred to them including any written representations from the PA or AA; and
 - b. assess whether the PA or AA poses any current and ongoing risk to public protection.
2. Most decisions at the case examiner stage of the fitness to practise process are made unanimously by a medical and a lay case examiner*. Where they do not agree, the matter is decided by a Case Examiner Panel consisting of three case examiners who have not had any previous involvement in the case and will make a majority decision†. References throughout this guidance to 'case examiners' mean a medical and a lay case examiner, or a Case Examiner Panel.
3. Where the case examiners consider that a PA or AA's fitness to practise is not impaired, they may take no further action or impose a warning‡. Where the case examiners consider that a PA or AA's fitness to practise is impaired, they may propose an outcome§.
4. At all stages of the fitness to practise process, including the case examiner stage, consideration will need to be given to whether an interim measure may be needed to protect the public. Case examiners should apply the guidance [Decisions on interim measures](#) to reach a view on this.
5. The purpose of this guidance *Decisions at the case examiner stage* is to support fair and consistent decision making at the case examiner stage, including on procedural issues and other matters that may arise during this part of the fitness to practise process.

* Some decisions are made by one case examiner as specified in this guidance. For example, a decision to grant an extension of time for the PA or AA to submit representations or to refer the case to a tribunal if the PA or AA rejects the proposed outcome.

† Rule 21(9) of the General Medical Council (Fitness to Practise) (Anaesthesia Associates and Physician Associate) Rules 2024 (the FTP Rules 2024)

‡ Rule 22(1) of the FTP Rules 2024

§ Rule 23(1) of the FTP Rules 2024

Being proportionate, transparent and fair

6. Case examiners (acting individually or collectively) must be [proportionate](#) in their approach to decision making at the case examiner stage, asking themselves what is the least restrictive action required to achieve public protection in a timely way. To assess what is proportionate, the case examiner(s) should be clear about the options available to them.
7. To ensure decisions made at the case examiner stage are [transparent](#), case examiners (acting individually or collectively) must give reasons for their decisions and record them clearly. This means using straightforward language, explaining technical terms wherever possible, identifying any relevant case law, and explaining how that case law, and any relevant principles arising from it, apply to their decision.
8. The case examiners' decision should also include:
 - a. an analysis of the available evidence, and
 - b. the weight applied to any of the factors that are set out in our decision-making guidance for different types of decisions.

This is important as it will help the PA or AA understand the case examiners' assessment of the case, their findings and any outcome proposed, so they are able to respond in an informed and meaningful way.

9. Differences in communication and culture can be difficult to identify from written information alone. However, where case examiners are assessing evidence, they should be mindful that cultural, faith or other characteristics such as those related to disability, can impact on how an individual engages with the fitness to practise process and communicates with us. Where supported by the information available, and appropriate to do so, case examiners should have regard to differences in communication, culture or other characteristics (if they have this information) when assessing, and deciding what weight to attach to, written evidence.

Decision on impairment

10. A decision that a PA or AA's fitness to practise is impaired should be based on clear and sufficient evidence that the PA or AA's behaviour, poor performance or impact of a health condition poses a current and ongoing risk to public protection.

Has the case been sufficiently evidenced?

- 11.** Where a case has been referred to the case examiners, they must consider information relevant to their consideration of the case, including any written representations from the PA or AA*.
- 12.** When considering whether regulatory action is needed, the case examiners are required to decide whether the allegations are more likely than not to be true and set out their findings in this regard. Where several allegations have been raised about a PA or AA's fitness to practise, the case examiners must consider the sufficiency of evidence in respect of each individual allegation. Their assessment of any current and ongoing risk should only therefore, be made in relation to those matters that have been sufficiently evidenced.
- 13.** If, at any point during the case examiner stage, the case examiners reach a view that they are not satisfied the case as a whole has been sufficiently evidenced, they should conclude that the PA or AA's fitness to practise is not impaired, and no further action should be taken.
- 14.** When deciding whether a case is sufficiently evidenced, in certain circumstances the case examiners may draw an adverse inference. They may also exercise their discretion to request further information where they consider it is appropriate to do so. Further guidance on exercising each power is set out below.

Adverse inferences

- 15.** During the initial assessment stage of the fitness to practise process, it might be reasonable for a PA or AA to be directed to undertake an assessment of their performance, health, or knowledge of English[†] and / or be required to supply information or produce a relevant document[‡]. If a PA or AA has failed to comply, without good reason, with a direction to undertake an assessment or has failed to supply information or produce a relevant document, case examiners may draw an adverse inference[§] from the fact of the non-compliance.
- 16.** If the case examiners do draw an adverse inference, it will form only one part of the overall evidential picture to be considered in assessing whether the PA or AA poses any current and ongoing risk to public protection. An adverse inference should not on its own

* Rule 21(1)(a) of the FTP Rules 2024

† Rule 6(4) of the FTP Rules 2024

‡ Under paragraph 7(4) of Schedule 3 to the Anaesthesia Associates and Physician Associates Order 2024 (the Order)

§ Rule 21(2) of the FTP Rules 2024

be relied on as the basis of a decision without other direct and credible corroborative evidence that supports the case examiners' assessment of whether the PA or AA poses any current and ongoing risk to public protection.

17. In determining whether to draw an adverse inference, the case examiners should consider the following questions:

- a. Has the PA or AA failed to comply with a direction to undergo an assessment, or failed to supply information or produce a relevant document?
- b. What impact has the failure had?
- c. Have the case examiners been able to make a full assessment of the relevant issue(s) in the case or has the failure denied them access to potentially material evidence?
- d. What reason(s), if any, has been given for the failure? Has the PA or AA explicitly refused to submit to a direction to undergo an assessment or provide the information requested from them?
- e. If a reason(s) has been given for the failure, is it a good reason such that it would be unfair to draw an adverse inference from it?
- f. Has the PA or AA been warned that a failure to comply could result in an adverse inference being drawn?
- g. In all the circumstances, what conclusion can reasonably be drawn about the reason(s) behind the failure?

18. A good reason for a PA or AA failing to undertake an assessment or supply information or produce a relevant document may include where they can provide objective evidence that:

- a. their physical or mental health condition prevented compliance at the time, but there is a realistic prospect of compliance within a reasonable timeframe;
- b. they did not receive the notice from the Regulator setting out the direction for them to undergo an assessment or requiring them to supply information or produce a relevant document; or
- c. in all the circumstances, it was not reasonable to expect them to comply with the Regulator's direction, or requirement to supply information or produce a document.

-
- 19.** It will be open to the case examiners to draw an adverse inference if a PA or AA who fails to undertake an assessment, supply information or produce a relevant document, has no good reason for that failure and has been warned that an adverse inference may be drawn. In those circumstances case examiners may infer that the PA or AA did not engage with the fitness to practise process because they:
- a.** did not believe they would pass an assessment;
 - b.** did not believe their explanation would stand up to scrutiny; and / or
 - c.** believed the information or document requested would be unfavourable to them.
- 20.** A PA or AA's failure to comply with a direction to undertake an assessment or a requirement to produce information / documentation, or a significant delay in their compliance without a reasonable explanation, is not in itself a factor to consider when reaching a view on seriousness of the allegation. However, it can be relevant to the decision on whether the case can be evidenced and the question of whether the PA or AA poses a current and ongoing risk to public protection.
- 21.** If the case examiners require further information about the impact of a PA or AA's health condition and the likelihood of them complying with an assessment within a reasonable timeframe, it should be requested from medical professionals already familiar with the PA or AA's health. However, in some cases it may be necessary for the Regulator to request an opinion from a GMC health examiner.
- 22.** Not having legal representation does not justify a failure to comply. However, if a PA or AA did not have the benefit of legal advice at the time, the case examiners should be satisfied that reasonable efforts have been made by the Regulator to explain the consequences of a failure to comply to them.
- 23.** An adverse inference should not be drawn in cases where the PA or AA has satisfied the Regulator during the initial assessment stage that certain information or documentation is not, and would not be, available.
- 24.** Where case examiners conclude that they will draw an adverse inference they should clearly state what adverse inference has been drawn and why.

Is there any current and ongoing risk to public protection?

- 25.** To assess if a PA or AA poses any current and ongoing risk to public protection, the case examiners will consider the following:

-
- The seriousness of the concern
 - Any relevant context
 - How the PA or AA has responded to the concern.

26. To make this assessment, the case examiners should apply the guidance [Decision on whether regulatory action is required](#).

27. Where the case examiners consider that a PA or AA does not pose any current and ongoing risk to public protection, the case must be closed on the basis the PA or AA's fitness to practise is not impaired. When closing a case, the case examiners must decide whether to take no further action or issue a warning to the PA or AA*. The guidance [Decision on whether a warning is required](#) supports case examiners to reach a view on whether a warning is an appropriate and proportionate regulatory response in an individual case.

28. Where several concerns have been raised about a PA or AA's fitness to practise, the case examiners may decide that some matters do not present a current and ongoing risk to public protection and that some do.

29. Where the case examiners conclude that a PA or AA does pose a current and ongoing risk to public protection, they should conclude that their fitness to practise is impaired. They should then go on to apply the guidance [Decision on what restrictive action is required](#) to decide what action - conditions, suspension or removal - is necessary to protect the public.

Referral to an Associates Tribunal

30. Case examiners are required to refer a case to an Associates Tribunal where the PA or AA has rejected the terms of the proposed outcome and requests a hearing[†]. A single case examiner can refer to a hearing in these circumstances. The PA or AA's decision to reject the terms of the proposed outcome will not be a relevant consideration for an Associates Tribunal, who should determine the case independently of the PA or AA's response to the case examiners' proposed terms.

* Rule 22(1) of the FTP Rules 2024

† Rule 24(2) of the FTP Rules 2024

-
- 31.** There is also a broad discretion for two case examiners to unanimously decide to refer a case for a tribunal hearing where they see fit to do so.
 - 32.** The case examiners should consider the information provided to them by the Regulator, including any written representations from the PA or AA, to decide whether they can reach a view on whether a PA or AA's fitness to practise is impaired or if there are reasons why they should exercise their discretion to refer the case to an Associates Tribunal.
 - 33.** There may be cases with particular features where the evidence or issues under consideration require the presentation of evidence before a tribunal. This might be where there is a dispute of fact or conflict in evidence, or where the PA or AA's insight or attitudinal issues, cannot be weighed or resolved on the papers and so the case would benefit from the interrogation of live evidence.
 - 34.** Where there are conflicts in evidence, the case examiners will weigh each piece of evidence separately, and then in totality, and consider the credibility and reliability of the evidence to seek to determine the issue(s) in dispute. Where an evidential conflict can't be resolved based on the information available to the case examiners, they should refer to hearing so that the conflicting accounts can be tested.

Withdrawal of referral to an Associates Tribunal

- 35.** Case examiners may withdraw a referral to an Associates Tribunal, or part of it, if the tribunal has not yet decided the issue of whether a PA or AA's fitness to practise is impaired*. The withdrawal decision is made by one case examiner but any subsequent decision to conclude the case with an alternative outcome, for example by issuing a warning, is made unanimously by two case examiners.
- 36.** The case examiner should first consider the following questions:
 - a.** Is there a change in circumstances, which impacts upon the case examiners' previous view of the case or reason for referring the matter to an Associates Tribunal?
 - b.** Is there any other reason why the tribunal hearing should not proceed?

* Article 10(6) of the Order

-
- 37.** If the answer to either of these questions is yes, then the case examiner can go on to consider whether to withdraw all, or part, of a matter referred to the tribunal.
- 38.** A withdrawal will normally only be appropriate where:
- a.** there is new evidence that was not available at the time of the case examiners' earlier decision, and had it been available it could reasonably have led to them reaching a different conclusion;
 - b.** the Regulator is no longer able to rely on evidence that was relevant to the case examiner's' earlier decision and the absence of that evidence could reasonably lead to the case examiners reaching a different conclusion;
 - c.** the case examiners failed to previously consider evidence that was available to them and relevant to their earlier decision; or
 - d.** the case examiners made a material error of fact or law in relation to the information relied upon, which if corrected may have led to a different decision.
- 39.** It will not be appropriate to withdraw a referral to an Associates Tribunal simply on the basis that a complaint has been withdrawn, without consideration of whether the Regulator should proceed in the public interest, especially where there may still be sufficient evidence to support the case and discharge the burden of proof. In addition, the power to withdraw a referral is not an avenue for appeal against an earlier decision to refer a PA or AA to a tribunal.
- 40.** Where a case examiner decides to withdraw a referral, they should clearly set out their reasons for doing so.

Imposing a final measure

Where the PA or AA agrees to the terms of the proposed outcome

- 41.** Where the case examiners determine that a PA or AA's fitness to practise is impaired, they can propose an appropriate final measure. Final measures include conditions, suspension or removal from the register. When case examiners propose an outcome, the PA or AA will receive the case examiners' findings on the case, their decision on

impairment and details of the proposed final measure including the duration that it will apply for.

- 42.** Where written confirmation is received that a PA or AA agrees to the terms of the proposed outcome^{*}, the case examiners should proceed to impose the final measure specified, unless a withdrawal notice[†] has already been served. In these circumstances the final measure can be imposed by one case examiner.

Where the PA or AA does not provide a reasoned response

- 43.** A decision to impose a final measure or to refer the case to an Associates Tribunal, where no reasoned response from the PA or AA has been received, is made unanimously by two case examiners.

- 44.** Before exercising their discretion[‡] to impose a final measure or to refer the case to a tribunal in respect of a PA or AA who has not provided a reasoned response to the terms of a proposed outcome, the case examiners should be satisfied that:

- a. the PA or AA has not provided a reasoned response within the required timeframe[§];
- b. the PA or AA was informed about the consequences of not responding to the terms of the proposed outcome; and
- c. service of the document notifying the PA or AA of the terms of the proposed outcome and informing them about the consequences of not responding, was effective^{**}.

- 45.** If a PA or AA doesn't give notice that they agree or reject the terms of the proposed outcome within the required timeframe, they will not have provided a reasoned response. This will include where the PA or AA has, for example:

- a. failed to send a response at all;

* Rule 24(1) of the FTP Rules 2024

† See paragraph 67 and 68 below

‡ Rule 24(3) of the FTP Rules 2024

§ Rule 23(3)(c) of the FTP Rules 2024

** Rule 74 of the FTP Rules 2024

-
- b. sent a response, but the content of that response does not clearly indicate if they agree or reject one or more of the terms of the proposed outcome and the PA or AA has not explicitly requested a hearing; or
 - c. been given further time to provide a response, either following them making a request or because the case examiner(s) otherwise chose to extend the timeframe, but the PA or AA has subsequently failed to provide a response at all, or their response is not clear and they have not explicitly requested a hearing.
- 46.** Where a PA or AA has sent a response, but the content does not clearly indicate if they agree or reject one or more of the terms of the proposed outcome, and the PA or AA has not explicitly requested a hearing, it may be appropriate for the case examiners to seek clarification of the PA or AA's response. Where their response to the terms of the proposed outcome has only been received towards the end of the timeframe in which they were required to provide a response, the case examiners might consider that it is fair and proportionate to extend the timeframe for a response for a short period of time, so that clarification of the PA or AA's position can be sought.
- 47.** Information provided to the PA or AA about the consequences of not responding must be clearly documented and unambiguous. In the interests of fairness, where there is any uncertainty about the warnings given, the case examiners should not proceed to impose the final measure. The case examiners should satisfy themselves that clear communication has been sent to the PA or AA and then allow them time to provide a reasoned response.
- 48.** Provided the terms of the proposed outcome do not change, any subsequent correspondence sent to the PA or AA, such as a reminder, will not amount to new terms being proposed. In these circumstances, the case examiners only need to be satisfied that the initial terms of the proposed outcome, and related warning about the consequences of not responding, were effectively served.

Where the PA or AA makes representations about the workability of conditions

- 49.** The case examiners will have considered information that's relevant to the case, including any written representations provided by the PA or AA, to decide whether the PA or AA's fitness to practise is impaired and what, if any, restrictive action to propose. As the case examiner stage of the process is not a negotiation between the case examiners and a PA or AA, there is no opportunity for the PA or AA to suggest an alternative outcome.
- 50.** However, the case examiners may receive notice that the PA or AA agrees with a proposed outcome of conditions in principle, but that a specific condition(s) is not workable. Where this is the case, the PA or AA should set out clear reasons why they

consider the specific condition(s) are not workable for them. The case examiners will consider the request and, where an amendment is identified that is workable, proportionate and achieves the overall aim of conditions, the terms of the proposed outcome may be withdrawn and the PA or AA notified of a new proposed outcome.

- 51.** When considering suggested amendments to proposed conditions, the case examiners will primarily have regard to the need to protect the public and should propose the action that is required and no more than necessary to achieve public protection in a timely way. In some cases, the case examiners may, having considered a request to amend conditions, conclude that an amendment is not appropriate or proportionate, and that it remains necessary to propose the original conditions. In these circumstances the PA or AA will need to be informed that the proposed outcome will not be changed, and the PA or AA will need to accept or reject those proposed terms.

Other decisions that may be made at the case examiner outcome stage

Requesting further information

52. When making decisions at the case examiner stage, case examiners may request further information is obtained by the Regulator where that information is relevant to their consideration of the case*. The power to request further information may be exercised by one of the two case examiners appointed to the case.

53. At the initial assessment stage relevant evidence will have been gathered by the Regulator with the aim of enabling a fair outcome to be reached. Specifically, where the outcome of an assessment of a PA or AA's health, performance or knowledge of English is likely to be relevant to the consideration of a concern, an assessment will usually have been directed during the initial assessment. However, the ability to request further information allows a case examiner to seek any clarification needed to support them to make a fair decision.

54. The PA or AA will already have had full disclosure of the evidence obtained at the initial assessment stage and been provided with an opportunity to make any written representations. Further information should not usually be needed from the PA or AA unless it is necessary to:

- a. get clarification on a specific issue or point made by the PA or AA; or
- b. invite the PA or AA to give a full, or more complete, response to the case because, although they attempted to provide an explanation through written representations, they have not addressed a specific issue which, if they had, could reasonably impact the case examiners' view of the case.

55. It may be reasonable and proportionate for a case examiner to request further information in circumstances where:

- a. the PA or AA previously offered to provide information which was not sought by the Regulator at the initial assessment stage but the case examiner(s) considers it is

* Rule 29(1) of the FTP Rules 2024

likely to be relevant to their decision and reasonably capable of influencing their assessment of the case; or

- b.** information comes to light for the first time at the case examiner stage that suggests the PA or AA might be unwell.
- 56.** Where information comes to light that suggests a PA or AA might be unwell, it is likely to be appropriate to request further information where objective evidence is needed to assess the impact of the PA or AA's health condition and whether it's likely to have a direct impact on their ability to participate effectively in the case examiner process because, for example, the PA or AA may lack capacity to accept the case examiners findings or proposed outcome.
- 57.** It's also likely to be reasonable and appropriate for a case examiner to request further information where there is new information that suggests the concern about the PA or AA's behaviour, or performance may be linked to the impact of a health condition. This is because the assessment of any current and ongoing risk to public protection, and the proportionate regulatory response to address any such risk, may be informed by whether there is a cogent link between the impact of a health condition and a PA or AA's performance or behaviour.
- 58.** The case examiners reasons for requesting further information will need to include an explanation of why they consider it is necessary to make the request and explain how it is relevant to their consideration of the case. The question of what steps to take to obtain further information will be decided by the Regulator, having regard to the case examiner's reasons for requesting it, and in the interests of fairness, ensuring that the information is shared with the PA or AA (and any other relevant party).
- 59.** Where further information is obtained and supplied to the case examiners, as with other available evidence, the case examiners must consider and assess the information. In circumstances where further information cannot be obtained and supplied, this should be noted, along with the reasons why and any impact the case examiners consider it has had on their decision.

Extending timeframes

Extending the timeframe for representations where the case examiners are minded to issue a warning

- 60.** In cases where the case examiners consider they might issue a warning they must notify the PA or AA that they may make written representations within 28 calendar days

beginning with the day on which the notification is served^{*}. The case examiners have discretion to extend the period for representations and this decision can be made by one case examiner[†]. They may be asked by a PA or AA (or a representative on their behalf) to extend the timeframe for representations, but having regard to the circumstances of the case, they can also decide to do so of their own choice.

61. When deciding if it's fair and proportionate to extend the timeframe for a PA or AA to make written representations, the case examiner should be mindful that all PAs and AAs have a duty to cooperate with their regulator and once a case has reached the case examiner stage, the PA or AA will often have been aware of the concern about their fitness to practise, and of the need to engage with the fitness to practise process, for some time. However, they will always need to consider the individual circumstances of the case.

62. In making their decision, the case examiner should have regard to:

- a. whether there is a good reason why the PA or AA needs additional time to make representations;
- b. the potential impact an extension will have on the PA or AA and others affected by the ongoing fitness to practise process, bearing in mind that a warning is a serious response to concerns that fall just below the threshold for a finding of impaired fitness to practise and will be published on the medical register; and
- c. the length of extension required and the likelihood of the PA or AA making written representations within that time.

Extending the timeframe for an associate to respond to a proposed outcome

63. When case examiners notify a PA or AA of the terms of a proposed outcome[‡], the PA or AA will have 28 calendar days to respond[§]. In certain cases, it may be reasonable to extend this timeframe, depending on the specific circumstances. A PA, AA, or their representative can request an extension, but case examiners can also proactively decide to extend the timeframe at their discretion. The decision to extend the timeframe can be made by one case examiner.

^{*} Rule 22(3)(a) of the FTP Rules 2024

[†] Rule 22(5) of the FTP Rules 2024

[‡] Rule 23(1) of the FTP Rules 2024

[§] Rule 23(3)(a) of the FTP Rules 2024

64. When deciding if it's fair and proportionate to extend the timeframe for a PA or AA to respond to the terms of a proposed outcome, the case examiner should be mindful that PAs and AAs have a duty to cooperate with their regulator and once a case has reached the case examiner stage, the PA or AA will often have been aware of the concern about their fitness to practise, and of the need to engage with the fitness to practise process, for some time. However, they will always need to consider the individual circumstances of the case.

65. In making their decision, the case examiner(s) should have regard to:

- a. whether there is a good reason why the PA or AA needs additional time to make representations;
- b. the potential impact a longer timeframe will have on the PA or AA and others affected by the ongoing fitness to practise process;
- c. the length of extension required and the likelihood of the PA or AA making written representations within that time; and
- d. the need to protect the public, which is more important than the interests of any individual.

66. It may be fair and proportionate for a case examiner to extend the timeframe for a response where they are in receipt of information that:

- a. indicates a PA or AA was prevented from responding in the initial timeframe due to their specific personal circumstances but are now able to respond;
- b. raises a question about a PA or AA's mental capacity to understand the case examiner stage of the process and provide a reasoned response to the terms of a proposed outcome. In these circumstances, it may be proportionate to extend the timeframe to respond so that objective evidence about the PA or AA's mental capacity can be requested;
- c. means the case examiners need to seek clarification from the PA or AA about the content of their reply to the terms of a proposed outcome to assess whether they've provided a reasoned response; and / or
- d. the PA or AA has indicated an intention to agree to the terms of the proposed outcome but needs time to confirm the workability of a specific condition that's been proposed with a third party or needs to make representations about the workability of a specific condition.

Withdrawal of the terms of a proposed outcome

- 67.** There may be circumstances where the case examiners become aware of new relevant information after they've notified a PA or AA of the terms of a proposed outcome. This may for example, be where the PA or AA has made representations relating to the workability of a condition(s) or has provided further information relating to the circumstances giving rise to the allegations. Where this is the case, the case examiners may decide to withdraw the terms of the proposed outcome and take any of the steps available to them under the case examiner stage of the process*. This includes considering whether the PA or AA poses a current and ongoing risk to public protection and therefore, their fitness to practise is impaired and / or considering what action, if any, to propose. While the decision to withdraw the offer of a proposed outcome can be made by one case examiner, two case examiners must unanimously agree on any alternative outcome that is proposed.
- 68.** New information will be 'relevant' where the case examiners are of the view that had it been available to them as part of their initial consideration of the case, it could reasonably have led to them reaching a different conclusion on one or more matters.

* Rule 23(5) of the FTP Rules 2024