

Meeting of the s.40A Panel to consider the case of Dr Muhammad Imran (7816173)

Held on 21 April 2026

Panel members present ('the Panel')

Charlie Massey, Chief Executive (in the Chair)

Pushpinder Mangat, Medical Director and Director, Education and Standards

Anthony Omo, General Counsel and Director of Fitness to Practise

In attendance

Jim Percival, Deputy General Counsel and Principal Legal Adviser

Alexander Hudson, Senior Legal Adviser

Nicola Tierney, Trainee Solicitor

Katherine Ince, Head of Office of the Chair and Chief Executive (Panel Secretary)

Purpose of this note

- 1 This meeting note records a summary of the Panel's consideration of the relevant decision of the Medical Practitioners Tribunal ('MPT') which considered the Doctor's case ('the decision'), and the Panel's decision on behalf of the General Medical Council as to whether or not to exercise the power to appeal the decision pursuant to section 40A Medical Act 1983 (as amended) ('the Act').

The relevant decision

- 2 The Deputy General Counsel confirmed that the decision was a relevant decision for the purposes of s.40A of the Act. The decision was a decision under s.35D giving a direction for suspension, within the meaning of s.40A(1)(a)(i).

Consideration

- 3 The Panel considered the record of the MPT's determination and the legal advice in detail.
- 4 The Panel found Dr Imran's conduct to be appalling and completely contrary to what is expected of a medical professional. The Panel was concerned by the persistent and serious nature of the misconduct as well as Dr Imran's lack of meaningful insight or remediation, including that Dr Imran had attended courses on domestic violence but was unable to explain

what he had learned from them. The Panel noted the MPT's conclusion that Dr Imran had a character trait of being quick to anger and that such traits are difficult to remediate.

- 5 The Panel disagreed with the MPT's assessment that Dr Imran had not shown a persistent lack of insight. The Panel was also concerned that the MPT may have treated its determination that the patient safety limb of the overarching objective was not engaged as a mitigating factor and reason to depart from a sanction of erasure.
- 6 The Panel acknowledged the applicable sanction banding within the MPT guidance was a 12 month suspension to erasure. However, the Panel considered Dr Imran's actions to be incompatible with continued registration. Therefore, the MPT's starting point should have been a sanction of erasure before considering whether there was any credible evidence of meaningful insight or remediation to step back to a lesser sanction of suspension.
- 7 In addition, the Panel was concerned that the MPT appeared to have misinterpreted the Guidance for Medical Practitioners Tribunal Service Tribunals (which came into effect on 24 November 2025) as not providing MPTs with the same authoritative steer towards erasure in appropriately serious cases that was present in the previous version of the guidance.
- 8 In Dr Imran's case – and based on their assessment of all the relevant information – the Panel concluded it was clear that the sanction of a 12 month suspension with a review was not sufficient to protect the public.
- 9 Therefore, the Panel decided to exercise the right to appeal the MPT's determination pursuant to section 40A of the Act.



.....
Charlie Massey (Chair)

15 May 2026

Dated

Background

- 10 This case concerns the determination of an MPT, which concluded on 27 March 2026, considering the matter under Part 4 of the General Medical Council (Fitness to Practise) Rules 2004 ('the Rules').
- 11 The determination of the MPT, which includes the background, allegations and the MPT's determinations on Facts, Impairment and Sanction, can be accessed [here](#).

The General Medical Council's power to appeal pursuant to s.40A

- 12 With effect from 31 December 2015, the General Medical Council acquired the power to appeal to the High Court (or equivalent courts in Scotland and Northern Ireland where relevant) against relevant decisions of a MPT if it considers that the decision is not sufficient

(whether as to a finding or a penalty or both) for the protection of the public.

- 13** The basis upon which the GMC will consider whether or not to exercise this power to appeal is described in “Appeals by the GMC pursuant to s.40A of the Medical Act 1983 (‘s.40A appeals’) – Guidance for Decision-makers” (‘the Guidance’).
- 14** Decisions concerning the exercise of the s40A power to appeal were originally delegated by the Council to the Registrar. However, following recommendations from Sir Norman Williams’ Review Council agreed that decision-making in prospective appeals involving decisions of MPTs be delegated to a three person Executive Panel comprising: the Chief Executive and Registrar as Chair; the Medical Director and Director of Education and Standards; and the Director of Fitness to Practise (or their nominated Deputies).
- 15** As the Guidance makes clear, when considering whether to bring a s.40A appeal in a particular case, it will be necessary to consider the following questions:
- a. Based on their assessment of all of the information held, and in the particular circumstances of the case, and having regard to the factors set out in the Guidance, does the Panel consider that the MPT’s decision is not sufficient to protect the public?
 - b. If the Panel is of the view, on its assessment of all the information held, in the particular circumstances of the case, that there are grounds to consider that the MPT’s decision is not sufficient, it will consider whether exercising the power of appeal would further, rather than undermine, the achievement of the over-arching objective.
 - c. If the answer is yes, then the GMC may exercise its power of appeal.
 - d. In considering that question the Panel will be required to consider and weigh a number of competing factors (including its assessment of the prospects of success of the appeal, and the nature and importance of the issues which would be aired).