Nursing and Midwifery Council
Fitness to Practise Committee

Substantive Meeting
Wednesday, 12 August 2026

Nursing and Midwifery Council
2 Stratford Place, Montfichet Road, London, E20 1EJ

Name of Registrant:	**Aswani Kumar Dreepaul**
NMC PIN:	07F2312E
Part(s) of the register:	Nurses part of the register Sub part 1 RNMH: Mental health nurse, level 1 – 12 January 2008
Relevant Location:	Reading
Type of case:	Conviction
Panel members:	Susan Thomas (Chair, lay member) Kamaljit Sandhu (Lay member) Deepa Leelamany (Registrant member)
Legal Assessor:	Juliet Gibbon
Hearings Coordinator:	Ifeoma Okere
Facts proved:	Charge 1
Facts not proved:	N/A
Fitness to practise:	Impaired
Sanction:	**Striking-off order**
Interim order:	**Interim suspension order (18 months)**

Decision and reasons on service of Notice of Meeting

The panel was informed at the start of this meeting that the Notice of Meeting had been sent to Mr Dreepaul's registered email address by secure email on 7 July 2026.

Further, the panel noted that the Notice of Meeting was also sent to Mr Dreepaul's representative, Michelle Stewart of Thompsons Solicitors, on 7 July 2026.

The panel accepted the advice of the legal assessor.

The panel took into account that the Notice of Meeting provided details of the allegation and informed Mr Dreepaul that the meeting would take place on or after 11 August 2026.

In the light of all of the information available, the panel was satisfied that Mr Dreepaul has been served with notice of this meeting in accordance with the requirements of Rules 11A and 34 of the 'Nursing and Midwifery Council (Fitness to Practise) Rules 2004', as amended (the Rules).

Details of charge

That you, a registered nurse;

1. On 25 March 2025 were convicted of the offence, Adult attempt to engage in sexual communication with a child, contrary to section 1(1) of the Criminal Attempts Act 1981

AND in light of the above, your fitness to practise is impaired by reason of your conviction.

Decision and reasons on facts

The charge relates to Mr Dreepaul's conviction for an offence of attempting to engage in sexual communication with a child. The panel was provided with a copy of the certificate of conviction, and it also took into account that Mr Dreepaul had admitted the conviction in

his completed Case Management Form (CMF). It found the fact of the conviction proved in accordance with Rule 31 (2) and (3). These state:

*'**31.**— (2) Where a registrant has been convicted of a criminal offence—*

(a) a copy of the certificate of conviction, certified by a competent officer of a Court in the United Kingdom (or, in Scotland, an extract conviction) shall be conclusive proof of the conviction; and

(b) the findings of fact upon which the conviction is based shall be admissible as proof of those facts.

(3) The only evidence which may be adduced by the registrant in rebuttal of a conviction certified or extracted in accordance with paragraph (2)(a) is evidence for the purpose of proving that she is not the person referred to in the certificate or extract.'

The panel also had regard to the testimonials provided on behalf of Mr Dreepaul, by the following:

- Rajeev Dreepaul: Mr Dreepaul's brother
- Blanjea Rosales: Mr Dreepaul's friend
- Nishal Narain: Mr Dreepaul's former colleague/manager

The panel had regard to the written representations and supporting documentation provided by Mr Dreepaul. This included his email to the NMC dated 4 August 2026, his completed CMF, his CPD reflective statement, three testimonials, and his further email dated 5 August 2026 enclosing training certificates.

The panel considered the charge against Mr Dreepaul, which arose from his conviction at Reading Magistrates' Court on 25 March 2025 for attempting to engage in sexual communication with a child.

The panel had before it documentary evidence confirming Mr Dreepaul's conviction. It also noted that, in his written representations and his CMF, Mr Dreepaul admitted the fact of his criminal conviction.

The panel accepted the advice of the legal assessor.

Pursuant to Rule 31(2) of the Nursing and Midwifery Council (Fitness to Practise) Rules 2004, a certificate of conviction is conclusive evidence of the conviction and of the findings of fact upon which it was based.

Having regard to the documentary evidence before it, together with Mr Dreepaul's acceptance of his conviction, the panel was satisfied that Charge 1 was proved.

Background

The charge arose whilst Mr Dreepaul was employed as a registered mental health nurse at Broadmoor Hospital. Mr Dreepaul was arrested at his home address on 26 February 2023 in connection with an allegation that he had attempted to engage in sexual communication with a child.

For a period of two weeks prior to his arrest, Mr Dreepaul had been engaging in sexual communications over social media with a person whom he believed to be a 13-year-old girl, but who was in fact a member of an activist group acting as a decoy. He informed his employer following his release on bail and was subsequently suspended from his employment.

Mr Dreepaul later resigned from Broadmoor Hospital on 21 August 2023. He was subsequently convicted of attempting to engage in sexual communication with a child.

Fitness to practise

Having announced its findings on the facts, the panel then considered whether, on the basis of the facts found proved, Mr Dreepaul's fitness to practise is currently impaired by

reason of his conviction. There is no statutory definition of fitness to practise. However, the NMC has defined fitness to practise as a registrant's ability to practise safely and effectively without restriction.

Representations on impairment

The NMC requires the panel to bear in mind its overarching objective to protect the public and the wider public interest. This includes the need to declare and maintain proper standards and maintain public confidence in the profession and in the NMC as a regulatory body. The panel has referred to the case of *Council for Healthcare Regulatory Excellence v (1) Nursing and Midwifery Council (2) Grant* [2011] EWHC 927 (Admin).

In an email to the NMC dated 4 August 2026, Mr Dreepaul stated that, because of his court sentence and upon the advice of his solicitor, he felt that he could not return to his nursing career. He stated:

> *"With all my regret, I accepted the NMC's allegations, namely my criminal conviction, that my conduct amounts to misconduct, and that my fitness to practise is currently impaired."*

Mr Dreepaul further stated that he agreed with the proposed NMC sanction. He provided a CPD reflective piece and three testimonials in support of his credibility as a father, husband and professional mental health nurse.

The panel accepted the advice of the legal assessor.

This included reference to a number of relevant judgments. These included *CHRE v NMC and Grant [2011] EWHC 927 (Admin), and Cohen v GMC [2008] EWHC 581 (Admin)*.

Decision and reasons on impairment

The panel next went on to decide if as a result of the conviction, Mr Dreepaul's fitness to practise is currently impaired.

In reaching its decision, the panel had regard to the NMC Guidance on *'Impairment'* (Reference: DMA-1 Last Updated:28/01/2026) in which the following is stated:

> *'Being fit to practise is not defined in our legislation but for us it means that a professional on our register can practise as a nurse midwife or nursing associate safely and effectively without restriction.'*

Nurses occupy a position of privilege and trust in society and are expected at all times to be professional. Patients, and their families must be able to trust nurses with their lives and the lives of their loved ones. To justify that trust, nurses must act with integrity. They must make sure that their conduct at all times justifies both their patients' and the public's trust in the profession.

In this regard the panel considered the judgment of Mrs Justice Cox in the case of *CHRE v NMC and Grant [2011] EWHC 927 (Admin).* in reaching its decision. In paragraph 74, she said:

> *'In determining whether a practitioner's fitness to practise is impaired by reason of misconduct, the relevant panel should generally consider not only whether the practitioner continues to present a risk to members of the public in his or her current role, but also whether the need to uphold proper professional standards and public confidence in the profession would be undermined if a finding of impairment were not made in the particular circumstances.'*

In paragraph 76, Mrs Justice Cox referred to Dame Janet Smith's "test" from the fifth report of the Shipman inquiry which reads as follows:

> *'Do our findings of fact in respect of the doctor's misconduct, deficient professional performance, adverse health, conviction, caution or determination show that his/her/their fitness to practise is impaired in the sense that S/He/They:*

a) *has in the past acted and/or is liable in the future to act so as to put a patient or patients at unwarranted risk of harm; and/or*

b) *has in the past brought and/or is liable in the future to bring the medical profession into disrepute; and/or*

c) *has in the past breached and/or is liable in the future to breach one of the fundamental tenets of the medical profession; and/or*

d) *...'*

The panel considered that limbs (b) and (c) of the *Grant* test were engaged. It noted that Mr Dreepaul's offending behaviour occurred outside his professional nursing practice and there was no evidence before it that patients had been harmed as a consequence of his offending. Nevertheless, the panel considered the conviction to be extremely serious. It involved an attempt to engage in sexual communication with a child whom Mr Dreepaul believed to be a 13-year-old girl. The panel considered that such conduct was fundamentally incompatible with the standards and values expected of a registered nurse and had brought the nursing profession into disrepute. It further considered that the conduct raised fundamental questions about Mr Dreepaul's ability to uphold the standards and values expected of members of the nursing profession.

The panel considered the issue of insight. It acknowledged that Mr Dreepaul had pleaded guilty to the criminal offence and had subsequently accepted his conviction and that his fitness to practise was impaired. However, the panel did not consider that his reflective material demonstrated sufficient insight into the seriousness of his behaviour. In particular, the panel considered that much of his reflection focused on the consequences of his offending for himself, his family, his reputation and his nursing career, rather than demonstrating a sufficiently developed understanding of the wider implications of his behaviour on the public, profession and his colleagues. The panel was concerned that parts of his reflection appeared to attribute his behaviour to matters such as [PRIVATE], which the panel considered demonstrated an element of deflection rather than full responsibility for his conduct.

The panel therefore considered that, notwithstanding Mr Dreepaul's acceptance of the conviction and expressions of remorse, his insight remained very limited. It considered his reflective piece to be insufficiently developed, and the panel was left with significant questions as to the extent to which he had genuinely understood and addressed the implications of his offending behaviour.

In considering whether Mr Dreepaul had taken steps towards remediation, the panel took account of his reflective piece and the evidence that he had undertaken learning and had engaged with cognitive behavioural therapy and the Lucy Faithfull Foundation. It also recognised that there were rehabilitative elements of his criminal sentence. However, the panel was not satisfied that these matters demonstrated that the underlying concerns had been adequately remediated. It considered that the concerns were fundamentally behavioural and attitudinal in nature and that his reflective piece demonstrated little meaningful insight into those concerns.

The panel also took account of the three testimonials provided by Mr Dreepaul. It noted that they spoke positively about his character, integrity, honesty and professionalism. However, the panel considered that the testimonials did not adequately address the seriousness of his offending behaviour. It was also concerned that some of the observations made within the testimonials appeared difficult to reconcile with the conviction, notwithstanding that the authors appeared to have some awareness of the circumstances. The panel therefore attached limited weight to those testimonials when assessing Mr Dreepaul's current insight into his offending behaviour.

The panel considered the likelihood of repetition. It recognised that this was Mr Dreepaul's first conviction and that there was no evidence before it from which it could conclude that there was a high likelihood of repetition. However, the panel noted that the offending behaviour had occurred over a period of approximately two weeks and had only ceased due to external intervention of the activist group rather than because Mr Dreepaul having independently recognised the seriousness and inappropriateness of his behaviour and brought it to an end.

In light of Mr Dreepaul's inadequate insight and the limited evidence of remediation, the panel could not be satisfied that the underlying concerns had been sufficiently addressed. It therefore considered that a risk of repetition remained.

The panel considered that Mr Dreepaul's conviction was for a particularly serious sexual offence involving a person whom he believed to be a 13-year-old girl. Although the offending behaviour occurred outside of his professional practice, the panel determined that this did not diminish its relevance to his fitness to practise. It considered that there is a potential future risk of sexual harm to members of the public, in particular female children. In the panel's view, Mr Dreepaul's conduct was fundamentally incompatible with the standards expected of a registered nurse.

The panel therefore determined that a finding of current impairment is required on public protection grounds.

The panel bore in mind that the overarching objectives of the NMC are to protect, promote and maintain the health safety and well-being of the public and patients, and to uphold/protect the wider public interest, which includes promoting and maintaining public confidence in the nursing and midwifery professions and upholding the proper professional standards for members of those professions.

The panel determined that a finding of impairment was also required on public interest grounds. It considered that Mr Dreepaul's conviction was so serious that it could gravely undermine public trust and confidence in the nursing profession. The panel considered that the offending behaviour raised fundamental questions about his professionalism and Mr Dreepaul's ability to uphold the standards and values expected of a registered nurse. It determined that a fully informed member of the public, aware of the nature and circumstances of the conviction, would expect the regulator to mark the seriousness of the conduct by making a finding of current impairment. The panel concluded that public confidence in the nursing profession and in the NMC as its regulator would be undermined if a finding of current impairment were not made on public interest grounds.

The panel was satisfied that Mr Dreepaul's fitness to practise is currently impaired by reason of his conviction on both public protection and public interest grounds.

Sanction

The panel has considered the case and has decided to make a striking-off order. It directs the registrar to strike Mr Dreepaul off the register. The effect of this order is that the NMC register will show that Mr Dreepaul has been struck-off the register.

In reaching this decision, the panel has had regard to all the evidence in this case and had regard to the NMC Guidance on *'The sanctions available'* (Reference: SAN-2 Last Updated: 28/01/2026)*, 'Sanctions for the Highest risk cases'* (Reference: SAN-4 Last Updated: 31/07/2026) *and 'Directly referring specified offences to the Fitness to Practise committee'* (Reference: FTP-2c-1 Last Updated: 27/02/2024)*.*

The panel accepted the advice of the legal assessor.

The panel was referred to the case of *Council for the Regulation of Health Care Professionals v General Dental Council and Fleischmann [2005] EWHC 87 (Admin).*

Representations on sanction

The panel noted that in the Notice of Meeting, dated 7 July 2026, the NMC had advised Mr Dreepaul that, if his fitness to practise was found to be currently impaired, it would seek the imposition of a striking-off order.

The panel also bore in mind Mr Dreepaul's written representations. It noted that he had previously indicated through his representatives that he wished to conclude his case by way of a Consensual Panel Determination and that he would accept a striking-off order. In his subsequent email dated 4 August 2026, Mr Dreepaul accepted his criminal conviction, accepted that his fitness to practise was currently impaired and stated that he agreed with the proposed NMC sanction. He also provided a reflective piece and three testimonials for the panel's consideration.

The panel further took account of Mr Dreepaul's reflective piece, in which he explained the personal and professional impact of the conviction and expressed regret at the prospect of losing his NMC registration. He stated that he wished to return to work as a staff nurse under supervision and considered himself to be a competent mental health nurse.

Decision and reasons on sanction

Having found Mr Dreepaul's fitness to practise currently impaired, the panel went on to consider what sanction, if any, it should impose. The panel has borne in mind that any sanction imposed must be appropriate and proportionate and, although not intended to be punitive in its effect, may have such consequences. The decision on sanction is a matter for the panel independently exercising its own judgement.

The panel took into account the following aggravating features:

- The conviction concerned an attempt to commit a specified sexual offence of a particularly serious nature involving a person whom Mr Dreepaul believed to be a 13-year-old girl.
- Mr Dreepaul demonstrated significant and continuing lack of insight into the seriousness and wider implications of his offending.
- The offending behaviour was fundamentally attitudinal in nature.
- Mr Dreepaul's reflective piece demonstrated little meaningful insight and did not adequately address the underlying behaviour or its wider impact on public confidence in the nursing profession.

The panel took into account the following mitigating feature:

- Mr Dreepaul pleaded guilty to the criminal offence at an early opportunity.

The panel first considered whether to take no action but concluded that this would be inappropriate in view of the seriousness of the conviction. The panel considered that the conviction was at the most serious end of the spectrum. It therefore determined that taking no action would neither adequately mark the seriousness of the conduct nor satisfy the wider public interest. Accordingly, the panel determined that it would be neither appropriate nor proportionate to take no further action.

The panel next considered a caution order and had regard to the NMC Guidance on *'Caution order'* (Reference: SAN-2b Last Updated: 28/01/2026) in which the following is stated:

‘A caution is only appropriate if the Committee has decided there’s no risk to the public or to people using services that requires the professional’s practice to be restricted. This means the case is at the lower end of the spectrum of impaired fitness to practise, but the Committee wants to mark that what happened was unacceptable and must not happen again.’

The panel considered that Mr Dreepaul’s conviction was not at the lower end of the spectrum of impaired fitness to practise. It was an attempt to commit a particularly serious sexual offence involving a person whom he believed to be a child. The panel therefore concluded that a caution order would be wholly insufficient to reflect the gravity of the conviction, protect the public, maintain public confidence in the nursing profession and uphold proper professional standards. The panel determined that a caution order would be neither appropriate nor proportionate in the circumstances.

The panel next considered whether to place a conditions of practice on Mr Dreepaul’s registration. In considering whether conditions of practice are appropriate, the panel had regard to the factors set out in the NMC Guidance on *‘Conditions of practice order’* (Reference: SAN-2c Last Updated: 28/01/2026).

The panel noted that the offending behaviour occurred outside Mr Dreepaul’s professional nursing practice and did not arise from an identifiable deficiency in his clinical practice that could be addressed through retraining, supervision or workplace restrictions. Rather, the panel considered that the concerns were fundamentally behavioural and attitudinal in nature. It therefore concluded that it could not formulate relevant, proportionate, workable or measurable conditions capable of addressing the concerns identified. Given the nature and seriousness of the conviction, the panel determined that a conditions of practice order would neither adequately protect the public nor satisfy the wider public interest.

The panel went on to consider whether a suspension order is appropriate in this case. The panel had regard to the NMC Guidance on *‘Suspension order’* (Reference: SAN-2d Last Updated: 28/01/2026) in which the following factors on when a suspension order may be appropriate are set out:

- *'the impairment is very serious but not fundamentally incompatible with continuing to be a registered professional*
- *an outcome less severe than strike-off would still satisfy the over-arching objective.'*

The panel also had regard to the key considerations as set out in the NMC Guidance to weigh up before imposing a suspension order. It noted the following list of circumstances that may make a suspension order an appropriate sanction:

- *'the charges found proved are at the most serious end of the spectrum and call into question the professional's suitability to continue practising, either currently or at all*
- *while it is possible that the professional could be fit to practise in future, only a period out of practice would be sufficient to allow them to fully strengthen their practice through reflection, the development of their professional skills and / or development of insight and remediation*
- *there is a risk to the safety of people using services if the professional were allowed to continue to practise even with conditions*
- *what went wrong is so serious that public confidence in the profession and professional standards could not be maintained if the professional were able to continue practising without stopping for a period of time*
- *despite the seriousness of what happened, the professional has engaged in the proceedings and has shown at least some meaningful insight which evidences a realistic possibility that they will continue to develop this insight, address their concerns and return to practice.'*

The panel considered whether temporarily removing Mr Dreepaul from the Register would be sufficient to address the seriousness of the case. It took into account that he had pleaded guilty at an early opportunity and had provided a reflective piece and testimonials. However, the panel had already determined that his reflective piece demonstrated very limited insight into his offending behaviour and did not adequately address the underlying attitudinal concerns. The panel was not satisfied that Mr Dreepaul's reflection demonstrated a realistic prospect that a period of suspension would enable him to develop sufficient insight and strengthen his practice to the extent necessary to address the concerns.

The panel also had regard to the criminal sentence imposed upon Mr Dreepaul and the fact that he remained subject to that sentence. In considering suspension, the panel had regard to the principle in C*ouncil for the Regulation of Health Care Professionals v General Dental Council and Fleischmann [2005] EWHC 87 (Admin)*, together with the fact that Mr Dreepaul remained subject to the requirements arising from his conviction, including his suspended sentence of imprisonment and his registration on the Sex Offenders Register for a period of 10 years.

However, the panel considered whether Mr Dreepaul could safely return to unrestricted practice following a temporary period of suspension. In the panel's view, the nature of the conviction, together with his significant lack of insight and the fundamental attitudinal concerns identified by the panel, raised questions about his suitability to remain on the register.

The panel further considered that the seriousness of the offending behaviour was such that public confidence in the nursing profession and proper professional standards could not be maintained by temporarily removing Mr Dreepaul from practice. A suspension order would not sufficiently mark the gravity of the conviction or address the public protection and public interest concerns.

Accordingly, the panel determined that a suspension order would not be a sufficient, appropriate or proportionate sanction.

In considering a striking-off order, the panel had regard to the NMC Guidance on *'Sanctions for the highest risk cases'* (Reference SAN-4 Last Updated: 28/01/2026). Having regard to all of the above, the panel determined that this case falls within the definition of being a '*highest risk case'*.

The panel had regard to the following considerations as set out in the NMC Guidance entitled *'Striking-off order'* (Reference: SAN-2e Last Updated: 28/01/2026):

- *Do the charges found proved raise fundamental questions about their professionalism?*
- *Can public confidence in the profession be maintained if the professional is not removed from the Register?*

- *Is there any amount of insight and reflection which could keep people receiving care and members of the public safe, maintain public confidence in the profession, and uphold professional standards?*
- *Is there a realistic prospect that, after suspension, the professional will have gained insight and strengthened their practice such that the risk they pose will have reduced?*

The panel determined that the conviction raised fundamental questions about Mr Dreepaul's professionalism. His offending behaviour was of the most serious nature and involved the attempted sexual exploitation of a person whom he believed to be a child for his own gratification. The panel considered that such conduct was fundamentally incompatible with the standards and values expected of a registered nurse.

The panel determined that a striking-off order was necessary for the protection of the public. Having regard to the nature and seriousness of Mr Dreepaul's conviction and the circumstances surrounding it, the panel considered that his continued registration would present a risk to the public, particularly female children. The panel was not satisfied that any lesser sanction would be sufficient to protect the public and therefore determined that a striking-off order was necessary to address the identified risk and provide the required degree of public protection.

The panel further determined that public confidence in the nursing profession could not be maintained if Mr Dreepaul were permitted to remain on the Register. A fully informed member of the public, aware of the nature of the conviction and the circumstances surrounding it, would expect conduct of this seriousness to result in removal from the Register. The panel considered that any lesser sanction would fail adequately to mark the gravity of the offending and would undermine public confidence in both the nursing profession and the NMC as its regulator.

The panel also considered whether further insight, reflection and remediation could sufficiently address the concerns. It had regard to Mr Dreepaul's reflective piece but considered that it demonstrated little meaningful insight into the fundamental concerns arising from his offending behaviour. The panel considered that the concerns were fundamentally attitudinal in nature and it was not satisfied that there was a realistic

prospect that a period of suspension would result in Mr Dreepaul developing sufficient insight to fully address the concerns.

Mr Dreepaul's actions represented a significant departure from the standards expected of a registered nurse and were fundamentally incompatible with his remaining on the Register. The panel considered that the findings in this case demonstrated conduct of such seriousness that allowing Mr Dreepaul to remain registered would undermine public confidence in the nursing profession and in the NMC as its regulator.

Balancing all of these factors, the panel determined that the appropriate and proportionate sanction was a striking-off order**.** The panel recognised that a striking-off order is the most serious sanction available and considered the impact that such an order would have upon Mr Dreepaul. However, it concluded that his interests were outweighed by the need to protect the public and maintain public confidence in the profession and uphold proper professional standards.

The panel determined that nothing short of a striking-off order would adequately protect the public and reflect the seriousness of Mr Dreepaul's conviction. The panel also considered that the effect of his offending behaviour in bringing the nursing profession into disrepute, the nature of the specified sexual offence, the involvement of a person whom he believed to be a child, and his significant lack of insight meant that no lesser sanction would be sufficient.

The panel determined that a striking-off order was necessary to protect the public and mark the importance of maintaining public confidence in the nursing profession and to send a clear message to the public and the profession about the standards of conduct required of a registered nurse.

This will be confirmed to Mr Dreepaul in writing.

Interim order

As the striking-off order cannot take effect until the end of the 28-day appeal period, the panel has considered whether an interim order is required in the specific circumstances of this case. It may only make an interim order if it is satisfied that it is necessary for the

protection of the public, is otherwise in the public interest or in Mr Dreepaul's own interests until the striking-off sanction takes effect.

The panel accepted the advice of the legal assessor.

Representations on interim order

The panel took account that there were no representations made by the NMC in relation to an interim order.

The panel took into account the written representations and documentation provided by Mr Dreepaul during these proceedings.

Decision and reasons on interim order

The panel was satisfied that an interim order was necessary for the protection of the public and was otherwise in the public interest. In reaching its decision, the panel had regard to the seriousness and nature of Mr Dreepaul's conviction and to the reasons set out in its decision for imposing the substantive striking-off order.

The panel considered that Mr Dreepaul's conviction for an attempt to engage in sexual communication with a child was very serious and there remained a risk to the public, particularly female children. It also had regard to its findings concerning his significant lack of insight and the fundamental attitudinal nature of his offending behaviour. The panel considered that it would be inconsistent with its substantive decision to permit Mr Dreepaul to practise unrestricted during the 28-day appeal period.

The panel also determined that an interim order was otherwise in the public interest. Given the seriousness of the conviction and the panel's conclusion that Mr Dreepaul's conduct was fundamentally incompatible with remaining on the Register, the panel considered that public confidence in the nursing profession and in the NMC as its regulator would be undermined if no interim restriction were imposed pending the substantive order taking effect.

The panel considered whether an interim conditions of practice order would be sufficient. However, for the same reasons identified in its substantive determination, it concluded that there were no relevant, proportionate, workable or measurable conditions that could adequately address the concerns. The offending behaviour occurred outside Mr Dreepaul's professional practice and the concerns identified were fundamentally attitudinal in nature. The panel therefore determined that an interim conditions of practice order would not be appropriate or proportionate.

The panel therefore imposed an interim suspension order for a period of 18 months. It considered that this was necessary to protect the public and was otherwise in the public interest during the appeal period and, in the event of an appeal, while that appeal is determined. The panel considered that an interim suspension order was consistent with, and necessary to give effect to, its substantive decision that nothing short of removal from the Register was sufficient in this case.

If no appeal is made, the interim suspension order will be replaced by the substantive striking-off order 28 days after Mr Dreepaul is sent the decision of this hearing in writing.

That concludes this determination.