

ROYAL COLLEGE OF VETERINARY SURGEONS

INQUIRY RE:

DR AMELIA BRIGGS MRCVS

COMPLETE DECISION OF THE DISCIPLINARY COMMITTEE

1. The Respondent is a registered veterinary surgeon who first qualified in 2018.
2. The College was represented by Mr. Weston, counsel, instructed by Capsticks, solicitors; the Respondent was represented by Ms. Maqboul, counsel, instructed by Hill Dickinson, solicitors.
3. At the outset and with the consent of the parties the Committee corrected a minor typographical error at Paragraph 1 of the Notice of Inquiry. The Animal and Plant Health Agency had been mistyped as the Animal and Health Plant Agency. The corrected version appears in the Allegation set out below.
4. The Allegation
 - 4.1 *That being registered in the Register of Veterinary Surgeons (“the Register”) maintained by the Royal College of Veterinary Surgeons (“the College”) and whilst in*

practice at Bishopton Veterinary Group LLP, The Surgery, Mill Farm, Studley Road, Ripon, North Yorkshire HG4 2QR You

1. On or around 22 December 2021, having been tasked on behalf of the Animal and Plant Health Agency (“APHA”) to conduct a surveillance visit at [REDACTED] you:

- (a) Failed to inspect the poultry at [REDACTED];
- (b) Certified in the EXD44 Report Form- Clinical Investigation dated 22 December 2021 (EXD44 Form -A) that you submitted to APHA following the visit that you had inspected the poultry at The [REDACTED] when you had not done so;
- (c) Certified that at the time of your clinical investigation as detailed in EXD 44- Form -A
 - (i) you saw no clinical signs or clinical history of the disease under investigation and/or
 - (ii) you were of the opinion that disease did not exist and had not existed in the previous 56 days on the premises.

2. On or around 29 December 2021, having been tasked on behalf of APHA to conduct a surveillance visit at [REDACTED] you:

- (a) failed to inspect the [REDACTED];
- (b) Certified in the EXD44 Report Form – Clinical Investigation dated 29 December 2021 (“EXD44 Form-B) that you submitted to APHA following the visit, that you had inspected the poultry at [REDACTED]
- (c) Certified that at the time of your clinical investigation as detailed in EXD 44 Form- B
 - (i) you saw no clinical signs or clinical history of the disease under investigation and/or
 - (ii) you were of the opinion that disease did not exist and had not existed in the previous 56 days on the premises.

3. On or around 29 December 2021, having been tasked by APHA to conduct a surveillance visit at [REDACTED] you:

- (a) Failed to inspect the [REDACTED]
- (b) Certified in the EXD44 Report Form- Clinical Investigation dated 29 December 2021 (“EXD 44 Form – C”) that you submitted to APHA following the visit, that you had inspected the poultry [REDACTED] when you had not done so;

(c) *Certified that at the time of your clinical investigation as detailed in EXD-44 Form- C*

under (i) you saw no clinical signs or clinical history of the disease investigation; and/or

(ii) you were of the opinion that disease did not exist and had not existed in the previous 56 days on the premises;

(d) *Submitted EXD44 Form -C to APHA that contained incorrect information about [REDACTED] and poultry housed therein.*

4. *Your conduct above:*

(a) in relation to 1 (b) and/or 1 (c) (i) and/or 1 (c) (ii) and/or 2 (b) and/or 2 (c) (i) and/or 2 (c)(ii) and/or 3 (b) and/or 3 (c) (i) and/or 3 (c) (ii) and/or 3 (d) was dishonest and/or

(b) in relation to any or all of the particulars in 1 and/or 2 and/or 3 above, risked undermining procedures and/or regulations and/or rules designed to protect animal welfare and/or public health;

AND that in relation to the above, whether individually or in any combination, you are guilty of disgraceful conduct in a professional respect.

5. Admissions

5.1 The Respondent admitted, in full, Paragraphs 1, 2 and 3 of the Allegation. She also admitted, in full, Paragraph 4 (b) of the Allegation.

5.2 The Committee found those Paragraphs to be Proved by way of her admissions.

5.3 The Respondent denied Paragraph 4 (a) of the Allegation in its entirety.

6. Background

6.1 The Respondent was employed as an Assistant Farm Animal Veterinary Surgeon at Bishopston Veterinary Practice, North Yorkshire. She was authorised by the Animal and Plant Health Agency (“APHA”) to conduct Official Veterinarian (“OV”) work. In late 2021 there was a serious outbreak of Avian Influenza (“AI”) in North Yorkshire, and the Respondent was, along with many other veterinary surgeons, required to undertake surveillance visits, on behalf of APHA, to premises at which birds were kept. The purpose of the visit was to obtain information as to the condition of the birds so that the prevalence of the disease could be monitored.

- 6.2 Following each visit, she was required to fill out an online form, “EXD44”, detailing the outcome of her visit and, in particular, certifying, if such was the case, that the birds she had seen were free from clinical signs or a clinical history of AI. The relevant signed certification which the Respondent was required, if appropriate, to complete was *“At the time of investigation, I saw no clinical signs or clinical history of the disease under investigation. At the time of this investigation, I was of the opinion that disease did not exist and had not existed in the previous 56 days on these premises”*. In addition to this certification, the form required the respondent (a) to specify, by means of ticking either a “Yes” or “ No” Box, whether an investigation of all susceptible stock on the premises had been undertaken, (b) to indicate the type and number of birds inspected or examined, together with the number not inspected or examined, (c) to provide details in respect of cases in which birds had not been inspected or examined and (d) to give brief details of the clinical findings of inspections and examination.
- 6.3 Before each day’s allocation of work, the Respondent was briefed by another veterinary surgeon. Upon completion of the work allocated, the Respondent also had a debrief with an APHA official or another OV at which the surveillance visits undertaken were discussed. These exchanges were conducted via telephone or text message. The completed EXD44 form relating to each visit was then to be sent to APHA within 24 or, at most, 48 hours of the visit.
- 6.4 Each of the three forms referred to in the Allegation were signed by the Respondent and included the certification referred to above. They also stated that an investigation involving an inspection of the birds involved had occurred and provided details of “clinical findings”.
- 6.5 In January 2022 an audit of inspections was carried out by APHA which involved the auditor examining a random sample of recorded visits and telephoning the owners of the birds in question to check that the biosecurity measures that should have been

followed by OVs were being complied with. During this audit concerns emerged about the three surveillance visits referred to in the Allegation and the documentation which had been submitted by the Respondent following these visits. In particular, two owners who were contacted remembered that a visit had taken place but said that their birds had not been inspected. In one further case the owner was unaware that any visit had taken place.

6.6 During the course of the subsequent investigation the Respondent accepted that she had not visited one of the properties in respect of which she had submitted the requisite EXD44 Form. She said that she had pre-populated an online form in relation to that property in preparation for her visit but had not been able to locate the property in question. She had submitted the pre-populated online form by mistake.

6.7 In relation to the other two properties, she accepted that she had not actually inspected the birds. She said that the respective owners had been reluctant to allow her to inspect because of concerns about COVID and she had completed the forms by relying on what the owners had told her about the condition of their birds.

7. The Evidence: Overview

7.1 The College and the Respondent were able to agree a substantial amount of evidence and this evidence formed the basis of Paragraphs 1 ,2 and 3 of the Allegation and of the admissions which the Respondent entered at the outset of the hearing.

7.2 In relation to the disputed issue of dishonesty, the Committee heard oral evidence from three bird keepers, from veterinary surgeons who had been tasked with organising, on the ground, the response to the outbreak of Avian Influenza and from officials at APHA.

7.3 The Respondent also gave oral evidence and adduced written testimonial evidence in relation to her good character.

8. The Evidence: Witnesses

Keepers of Birds

8.1 The Committee heard oral evidence from Mr. IW, Ms. JG and Ms. AU.

8.2 Mr. IW began by correcting a passage in his witness statement in which he had stated that the Respondent had said that it was not necessary for her to see the birds, which, in his case, consisted of four geese. He said that he did not remember her saying this. He accepted that he now had very little detailed recollection of the respondent's visit on 22 December 2021, but doubted that he was reluctant to allow the Respondent to see his geese or to allow the Respondent onto his premises. He said that it was not in his nature to adopt that stance towards someone tasked with the Respondent's responsibilities. When questioned about his response to the COVID pandemic, and in particular about whether his attitude might have been affected by concern about transmission of that virus, he said that he was following whatever the national guidance was at the time. He confirmed that his geese were kept inside in a shelter at all times.

8.3 Ms. JG confirmed the contents of her witness statement in which she said that she kept two brown hens, housed in a field adjacent to her property at the bottom of the garden. She said that on 29 December 2021 she was present at her property and no person called asking to see her birds. When shown the report, submitted in relation to a visit stated to have taken place on 29 December 2021, Ms. JG said that she had not supplied any of the information contained in the report and the photographs within the report were not of her property but of another house in the village.

8.4 Ms. JG said that she did receive a telephone call on 29 January 2022 from the Respondent asking if she could come and inspect the birds but, in the end, following further telephone calls, no visit resulted from these exchanges. Ms. JG said that the

Respondent made no reference during these telephone calls to having attended the property on 29 December 2021.

8.5 Ms. AU confirmed the contents of her witness statement. She kept 13 chickens and a guinea fowl. She recalled a visit from a female “Vet” on 29 December 2021 and now understood this person to be the Respondent. She said that the Respondent was not wearing Personal Protective Equipment and introduced herself by saying that she wanted to ask her some questions about the health of her birds. Ms. AU said that she offered to show her the birds, but this offer was declined. She said that if the Respondent had accepted her offer, she would have taken her round the back of the house and through the garden. She recalled the visit taking no more than five to ten minutes.

8.6 On being shown the surveillance report, Ms. AU said that no inspection of the birds had occurred, and the information in the report seemed to have been derived from what she told the respondent.

Veterinary Surgeons

8.7 Dr. DM, MRCVS is, and was in 2021, the Principal Official Veterinarian for the North of England and was closely concerned with setting up, at the request of APHA, a system of surveillance visits to monitor the AI outbreak. He told the Committee that any veterinary surgeon carrying out a surveillance visit was required to complete two online training courses and described the system by which visits were allocated to particular veterinary practices through Job Request Forms (“JRF”s) which contained contact details for the properties to be visited. He explained the procedure under which each practitioner, tasked with undertaking a surveillance visit, was required to have a pre- brief and a de-brief discussion with another practitioner and/or an APHA official able to advise as to any particular queries which the surveillance visit created. If the surveillance visit had been effective, the completed Form EXD44 would need to

be returned to APHA within 24, or at most 48, hours. Dr. DM was clear that these surveillance visits placed significant extra demands upon practitioners, who were undertaking their usual clinical responsibilities during the same period.

- 8.8 Dr. DM was of the opinion that the use of the term “inspection” in the form EXD44 created scope for potential ambiguity. He considered that “inspection”, in veterinary practice, was quite a vague term, whereas, for example, any practitioner would know immediately what was meant by the term “examination” i.e. physical involvement with the animal. In his view an inspection would involve looking at the birds, but it was not clear as to the distance from which the birds would need to be observed. He said that he was not aware of any guidance note in this respect.
- 8.9 Dr. BS, MRCVS, is, and was at the relevant time, a clinical director in a veterinary practice engaged in organising surveillance visits. He outlined the process by which surveillance visits were allocated and the information available to the veterinary surgeons involved. He produced copies of the emails allocating surveillance visits to the respondent and the JRFs which contained the information given to the Respondent.
- 8.10 Dr. BS accepted that information given to those tasked with carrying out surveillance visits was of variable quality and that guidance and training was limited. He described a situation which, in his view, was very chaotic and required continuous juggling by those allocating the work to keep on top of all the required surveillance visits. He too emphasised that the veterinary surgeons carrying out these visits were doing so in addition to their normal clinical responsibilities. He told the Committee that there were sometimes problems in locating properties that were to be visited and mistakes did happen. He said that the scale of the outbreak of AI was, in his experience, unprecedented and that it required a “seven days a week” response.

APHA officials

- 8.11 Mrs. RH is, and was at the relevant time, a Resilience and Technical Advisor for APHA in the north-east of England. Her responsibilities included Quality Assurance and the audit of randomly selected documentation submitted following surveillance visits. During the course of her audit, she telephoned Ms. JG who told her that she was unaware of any visit to her property on 29 December 2021. Further investigation of visits conducted by the Respondent gave rise to two additional concerns. Five other visits by the Respondent raised no other concerns.
- 8.12 Ms. AS, MRCVS, was at the relevant time, a Senior Veterinary Inspector employed by APHA and was concerned with the investigations that were required when the outbreak of AI occurred. In confirming the contents of her witness statement, she told the Committee that her role was primarily to brief and de-brief OVs who were carrying out surveillance visits. She said that it was an essential part of any surveillance visit that an inspection of the birds was carried out. The purpose of the pre-briefing was to ensure that the OV understood what was required and the debrief offered an opportunity for any issues that had arisen to be discussed. Pre-briefs and de-briefs were carried out over the phone or by text message.
- 8.13 Ms. AS carried out a pre-brief and de-brief with the respondent on 29 December 2021. At the pre-brief the Respondent did not, to her recollection, raise any particular concerns. She had seemed fully engaged with the process. Ms. AS produced the text exchanges that occurred at the de-brief. The exchange was timed at 11.30 am. During the exchange the Respondent is recorded as having texted in relation to the four visits which she had been allocated. In two of those visits (not the subject of any allegation) she reported that the owners of the premises were not at home. She also texted *"All finished , no problems at all none of them sick or showing symptoms"* [Ms. AS] *"Perfect, so you finished all 4?....."* [Respondent] *"Yes all four visited"*.
- 8.14 In her oral evidence, Ms. AS said that her role was to answer any questions that might arise in relation to filling out the form; she regarded the form as self-

explanatory and considered that a qualified veterinary surgeon would have no difficulty in understanding what was required. She accepted that mistakes could be made, and that other OV's had made errors in completing the form. She regarded the use of the term "inspection" within the form to mean seeing the birds in close enough proximity to form a judgment. An examination, in her understanding, involved handling the bird.

- 8.15 Ms. AS told the Committee that she had sent the Respondent two populated forms as examples of the kind of information which the forms were expected to provide. She also forwarded to the Respondent a checklist, though she was at pains to point out that this was not an official document. She accepted that it would be reasonable for a practitioner carrying out a surveillance visit to speak to the owner and obtain information about the condition of the birds in that way. In cases where access to the birds had been refused, she considered that the form should not be returned as, in those circumstances, no clinical investigation had been completed.
- 8.16 Dr. AS, MRCVS, is, and was at the relevant time, also employed as a Senior Veterinary Inspector by APHA. He confirmed the contents of his witness statement. His involvement in the events which form the subject of the Allegation arose after December 2021. In January and February 2022, he carried out follow-up visits to the premises referred to in the Allegation to check the condition of the birds at those premises. He considered that on any such visit an inspector would need to be close enough to the birds to be able to carry out an effective visual inspection. No further issues were identified by Dr. AS when he carried out the follow-up visits.
- 8.17 Dr. AS also carried out follow-up visits in respect of five further premises in respect of which the respondent had provided EXD44 forms. He spoke to the homeowners at these premises. None of these other homeowners raised any concerns that the Respondent had failed to inspect their birds.

- 8.18 Dr. MP, MRCVS, is the Veterinary Lead within APHA Field Services. He told the Committee that he did not consider there to be any ambiguity about the use of the term “inspection”. In his view it required the inspector to have observed the birds with his or her own eyes so as to be able to assess whether there were any concerns about their health.
- 8.19 Dr. MP also chaired the Review Panel which was required to consider an investigation report into the concerns raised by the surveillance visits which form the subject of the Allegation. He was of the view that the report revealed significant breaches of professional standards which required referral to the College. However, he acknowledged in the referral that the Respondent had shown contrition and identified various mitigating features including the Respondent’s inexperience, the fact that she was working in an isolated situation, and had concerns about COVID.

9. The Respondent’s evidence

- 9.1 The Respondent gave oral evidence. She confirmed the contents of her witness statement and told the Committee that she had no previous experience of AI work before this outbreak. She said that the training she had received was very limited and that the information given on JRFs was also limited.
- 9.2 Her visit to the home of Mr. IW, on 22 December 2021, was her first surveillance visit. She told the Committee that when she arrived, she spoke to Mr. IW and told him that she would need to ask him some questions and inspect his birds. She said that Mr. IW was immediately defensive and said that he did not understand why his geese needed to be inspected. She remembered asking him to permit her to inspect the geese three times but that Mr. IW, without actually forbidding inspection, continued to be extremely reluctant to allow her access. She took the view that, as he seemed helpful and forthcoming in answering her questions, she was confident that she had

the necessary information about the health of the birds and that this was the best that she could do in the circumstances.

- 9.3 On 29 December 2021 she visited the home of Ms. AU. She said that she obtained detailed information from Ms. AU about the condition of the birds but that when she asked to inspect the birds Ms. AU said that the only access to the back garden was through the house and that she was concerned about possible transmission of COVID. The Respondent considered this concern to be understandable and felt that she had obtained full information about the condition of the birds and that there was no evidence of disease.
- 9.4 In relation to the attempted visit to Ms. JG she had used the maps provided with the JRF and thought she had found the correct property but was unable to obtain any reply. She said that she left a voicemail and letter. In the interests of administrative efficiency, she had pre-populated the online form in relation to this visit which she intended to adjust as appropriate following her visit and before submitting it to APHA. She said that she was horrified to find that she had inadvertently submitted this form to APHA in its unadjusted, pre-populated condition. Reflecting on the matter subsequently she considered it “entirely possible” that she had never identified the correct property and so had posted her letter through the wrong door.
- 9.5 In cross-examination, the Respondent was referred amongst other matters to the answer she had given during the course of the APHA investigation when asked about her understanding of the meaning of the term “clinical inspection”. She replied that this had been explained to her in the first briefing about the AI outbreak “*and I understood clinical inspection to mean visual inspection of the birds*”. She did not depart from this position in her evidence to the Committee. She accepted that she had signed, in each of the three cases referred to in the Allegation, a Form, EXD44, which stated that she had inspected the birds in question. She also accepted that she had not, in fact, inspected these birds, that she knew at the time she signed the

forms that she had not done so and that she knew it was dishonest to state, on a form she intended to submit to APHA, that she had done so because such a statement was untruthful. The respondent also accepted that it was dishonest to certify that she saw no clinical signs or clinical history of the disease under investigation when she had not actually seen any of the birds in respect to which this certification related.

9.6 The respondent maintained her account of the circumstances in which she had come to complete and submit the three forms and, in particular, of the circumstances in which the form relating to the visit to Ms. JG had been submitted.

9.7 The Committee received in evidence, at this fact-finding stage, 12 supportive testimonials in respect of the respondent's good character. These were received in evidence by agreement subject to one modest redaction, in relation to the expression of a personal opinion about the proper outcome of this particular case advanced by Professor S. After hearing argument, the Committee concluded that the expression of such an opinion went beyond the appropriate limits of a character reference.

10. The Committee's findings of fact

10.1 The Committee received helpful written submissions on behalf of the College and on behalf of the Respondent. These submissions were supplemented by further oral argument.

10.2 The Legal Adviser reminded the Committee of the burden and standard of proof and referred the Committee to the cases of *Ivey v Genting Casinos Ltd* [2017] UKSC 67 and *Dutta v General Medical Council* [2020] EWHC 1974 (Admin). He also gave guidance to the Committee as to the relevance of good character evidence at this stage of the proceedings.

10.3 The Committee considered the allegation of dishonesty separately in relation to Paragraphs 1, 2 and 3 of the Allegation.

10.4 Paragraph 1, which relates to the visit to the home of Mr. IW on 22 December 2021, is, so far as is relevant for these purposes, in the following terms:

(b) *Certified in the EXD44 Report Form- Clinical Investigation dated 22 December 2021 (EXD44 Form -A) that you submitted to APHA following the visit that you had inspected the poultry at [REDACTED] [REDACTED]*

(c) *Certified that at the time of your clinical investigation as detailed in EXD 44- Form -A*

(i) you saw no clinical signs or clinical history of the disease under investigation and/or

(ii) you were of the opinion that disease did not exist and had not existed in the previous 56 days on the premises.

10.5 In relation to sub-paragraph (b), the Committee noted that the Respondent had admitted that she had so certified and that she knew when she submitted the signed form that she had not inspected the poultry in question. The Committee also noted that the form expressly stated that four geese had been “inspected” and that the Respondent admitted that she understood the term “clinical inspection” imported an obligation to see the birds. The Committee concluded that an ordinary decent person would regard the submission of a signed form which contained this false information as dishonest. She had deliberately signed an official form which contained information which she knew to be untrue and this was sufficient to establish the allegation of dishonesty in relation to sub-paragraph (b). The Committee therefore finds the allegation of dishonesty at sub-paragraph (b) Proved.

10.6 In relation to sub-paragraph (c) (i) the Committee noted that the certification referred to in this sub-paragraph contained an express reference to seeing clinical signs or a clinical history of the disease under investigation. The Respondent knew when she came to make this declaration that she could not truthfully say, within the context of a form of this type, that she had seen no clinical signs or clinical history of the disease as she had not seen the birds in question. The Committee concluded that an ordinary

decent person would regard a declaration of this kind, in these circumstances, as dishonest. Accordingly, the Committee finds the allegation of dishonesty referred to at sub-paragraph c (i) Proved.

10.7 In relation to sub-paragraph (c) (ii), which, the Committee notes, has been charged as either additional to or as an alternative to sub-paragraph c (i), the position is different. The Respondent had obtained information about the condition of the birds from their owner. On this basis, she could, in the Committee's judgment, honestly express her opinion that the disease did not exist and had not existed for the previous 56 days on the premises. Although such an opinion would obviously be of much less value than an opinion reached after inspecting the birds, that fact did not render the opinion itself dishonest. There was no evidence before the Committee to suggest that the opinion expressed at sub-paragraph c (ii) was not genuinely held by the Respondent and based on information supplied by the owner of the birds. Accordingly, the Committee finds the allegation of dishonesty in relation to sub-paragraph c(ii) Not Proved.

10.8 Paragraph 2 relates to the visit to the home of Ms. AU on 29 December 2021 and is, so far as is relevant for these purposes, in the following terms:

(b) *Certified in the EXD44 Report Form – Clinical Investigation dated 29 December 2021 ("EXD44 Form-B) that you submitted to APHA following the visit, that you had inspected the poultry at [REDACTED] when you had not done so;*

(c) *Certified that at the time of your clinical investigation as detailed in EXD 44 Form- B (i) you saw no clinical signs or clinical history of the disease under investigation and/or (ii) you were of the opinion that disease did not exist and had not existed in the previous 56 days on the premises*

10.9 The allegations of dishonesty in relation to this visit raise issues which are identical to the issues raised in relation to the visit to Mr. IW on 22 December 2021. The Committee considers that exactly the same reasoning applies to this allegation and that no useful purpose would be served by setting out the same reasoning in identical terms here.

10.10 Therefore, for the reasons already given in relation to Paragraph 1 (b) and (c) (i) and (ii), the Committee finds the allegations of dishonesty in relation to Paragraph 2 (b) and 2 (c) (i) are Proved and the allegation of dishonesty in relation to Paragraph 2 (c) (ii) is Not Proved.

10.11 The position is different in relation to the allegations of dishonesty made in relation to Paragraph 3 of the Allegation. Paragraph 3 of the Allegation is, so far as is relevant for these purposes, in the following terms:

(b) *Certified in the EXD44 Report Form- Clinical Investigation dated 29 December 2021 ("EXD 44 Form – C") that you submitted to APHA following the visit, that you had inspected the poultry at [REDACTED] when you had not done so;*

(c) *Certified that at the time of your clinical investigation as detailed in EXD-44 Form- C*

under (i) you saw no clinical signs or clinical history of the disease investigation; and/or

(ii) you were of the opinion that disease did not exist and had not existed in the previous 56 days on the premises;

(d) *Submitted EXD44 Form -C to APHA that contained incorrect information about [REDACTED] and poultry housed therein.*

10.12 The respondent told the Committee that she had decided to pre-populate this form with the information she had expected to find so as to ensure that the information it contained would be in a format which was acceptable to APHA. The pre-population included her electronic signature. After attending premises, she then planned to

revisit the form to adjust it as appropriate in view of whatever she had found. She told the Committee that this was a practice that she had adopted.

- 10.13 After concerns had been raised, she said that she discovered that this pre-populated form had been submitted to APHA by mistake. She wrote to the partner at her practice who was responsible for supervising the OV work in the following terms:

“To my horror I have found a glaring mistake. To try to be more efficient I have been pre-filling the forms in using the information from the JRF and a generic set of wording that I would go back and edit in the pdf form based on the information gathered on the visit. This was a cold call visit in December that I could not find the property that corresponded with the pinpointed location on the map. Having driven round the village to find what I believed to be the correct property. I found no one at home, left a voicemail with the given contact number and came away. I had then stupidly sent the pre-populated form to the outbreak office in error. I sent the emails and thought nothing more about those visits and prioritized my clinical work at the practice. All the other visits I have submitted I did attend and spoke to the owners at the premises.

I am so truly sorry for this terrible mistake and I realise now that this method was very open to errors and I am very disappointed I have let this happen”.

- 10.14 On behalf of the College, Mr. Weston challenged the veracity of this account. He pointed out that this appeared to be the only occasion on which the Respondent, or anyone else, had had difficulty in contacting Ms. JG by telephone. The Respondent herself had spoken to Ms. JG in January 2022 and Dr. AS had found her property, also in January 2022, without any difficulty. No letter recording an attempted visit had ever been found or re-directed to Ms. JG. The Respondent had not raised any issue in relation to this visit during her debrief with Ms. AS, or with any other practitioner. Mr. Weston also drew attention to the discrepancies between the evidence of the Respondent and the evidence of the householders in respect of the visits specified in Paragraphs 1 and 2 of the Allegation. He submitted that the householders had no reason to lie and that these discrepancies should be taken into account when considering the credibility of the Respondent. Mr. Weston therefore

submitted that the Committee should conclude that this was a false account invented by the Respondent to explain away her dishonesty in submitting this form. He further submitted that the Committee could, and should, take into account any finding of dishonesty it had made in relation to other paragraphs of the Allegation when considering this paragraph.

10.15 The Committee first considered the assertion by the Respondent that she was in the habit of pre-populating forms so as to ensure that they were in an acceptable format. As the respondent said she now realised, this was a practice which was extremely ill-advised, especially where an electronic signature had been included. However, the Committee did not consider there was anything inherently dishonest about pre-populating a form, provided there was a genuine intention to adjust the contents as appropriate when a visit had taken place and before the form was knowingly submitted to APHA.

10.16 The issue for the Committee, having regard to the burden and standard of proof which it was required to apply, was therefore whether it was sure that the Respondent's account in relation to this form was, as Mr. Weston submitted, false. In analysing this issue, the Committee had careful regard to the numerous and highly supportive character references provided by both professional colleagues and clients. These attested not only to the Respondent's diligence as a veterinary surgeon but also to her trustworthiness. In the Committee's judgment they provided important evidence to weigh in the balance on this particular issue.

10.17 The Committee also carefully considered the findings of dishonesty that it had made in relation to other paragraphs of the Allegation. Although these findings involved reprehensible conduct on the part of the Respondent, the Committee did not consider that the allegation of dishonesty in relation to Paragraph 3 fitted into what Mr. Weston submitted was a pattern of dishonesty. In the other cases the Respondent's dishonesty had involved, in a sense, a cutting of corners after she had obtained

information about the health of the birds from apparently reliable sources. The dishonesty alleged in relation to this paragraph was of a different order of magnitude as it involved, on the College's case, the deliberate submission of a form which was based on no information whatsoever.

10.18 The Committee also considered in this context the discrepancies between the accounts given by the Respondent of her meetings with Mr. IW and Ms. AU and the evidence of those witnesses. The Committee reminded itself again that if it was to draw an adverse inference in relation to the Respondent's credibility, it needed to be sure that the Respondent's account of those meetings was a false, invented account. The Committee was not sure that this was the case.

10.19 Mr. IW, through no fault of his own, made it clear in his evidence that he had very little detailed recollection of the respondent's visit. The Committee noted that when he was first asked about this visit by Dr. AS, on 1 February 2022, he responded that he did not recall a "vet" attending his premises or making a request to inspect his geese.

10.20 Ms. AU was more definite in her account but there was no independent evidence to support either her account or that of the Respondent. The Committee noted that no concerns about failing to inspect birds had been raised in relation to any of the other visits which the Respondent had undertaken.

10.21 Taking all of these factors into account and having regard to the required burden and standard of proof, the Committee concluded that it was not sure that the Respondent's account of the circumstances in which this form came to be submitted was false. The inadvertent submission of the pre-populated form would not be regarded by ordinary decent people as a dishonest act. Accordingly, the Committee finds that each allegation of dishonesty made in relation to sub-paragraphs (b) (c) (i) and (ii) and (d) of Paragraph 3 of the Allegation is Not Proved.

11. Disgraceful conduct in a professional respect
- 11.1 Mr. Weston provided the Committee with written submissions which included reference to those paragraphs of the *Code of Professional Conduct for Veterinary Surgeons* (“the Code”) which, he submitted, were relevant to the present case, and to the *Principles of Certification*, referred to in the Code. He submitted that aggravating features of the case included the fact that the Respondent was acting in an official capacity when the misconduct occurred, that there was repetition in her misconduct, that the dishonesty occurred immediately after the Respondent had begun to carry out surveillance visits, that the charge of dishonesty had been contested, that the purpose of the dishonesty was to secure acceptance of the form by APHA, and that the Respondent’s work had to be replicated at a cost to APHA.
- 11.2 Ms. Maqboul accepted, on behalf of the Respondent, that the Committee’s findings of fact amounted to disgraceful conduct in a professional respect on the part of the Respondent. She challenged, however, a number of the aggravating features to which Mr. Weston had referred. She pointed out that the Respondent had successfully contested a number of the allegations of dishonesty and that a decision to contest an allegation was not an aggravating feature. She submitted that the Committee should have regard to evidence given at the fact-finding stage that OVs were under a considerable amount of pressure due to the demands of the situation.
- 11.3 The Legal Adviser reminded the Committee that there was no burden or standard of proof to be applied at this stage. The Committee was required to form a judgment in relation to the question of disgraceful conduct, having regard to the standards set out in the Code and Principles of Certification.
- 11.4 The Committee considered that the Respondent had been in breach of the following paragraphs of the Code:

1.1 Veterinary surgeons must make animal health and welfare their first consideration when attending to animals.

2.5 Veterinary surgeons must keep clear, accurate and detailed clinical and client records.

6.2 Veterinary surgeons must certify facts and opinions honestly and with due care, taking into account the 10 Principles of Certification.

- 11.5 The *Principles of Certification* include an obligation not to sign certificates which the veterinary surgeon knows or ought to know are untrue, misleading, or inaccurate.
- 11.6 In considering the seriousness of the misconduct, the Committee took into account the fact that the misconduct had involved dishonesty, that there had been a risk of injury to animals and humans (though this risk had not materialised), and that the misconduct had occurred when the Respondent, as an OV, occupied a position of increased trust and responsibility.
- 11.7 The Committee did not consider the fact that the Respondent had chosen to contest allegations of dishonesty to be an aggravating feature. A Respondent is entitled to contest allegations. As Ms. Maqboul pointed out, the Respondent successfully contested some allegations and her answers when cross-examined on this question were quite straightforward.
- 11.8 Although misconduct had occurred more than once, the Committee did not consider this to be a case in which repetition was a particularly significant feature. In relation to the issue of dishonesty, it was uncharacteristic behaviour that had occurred twice within a week in response to unusual pressures.
- 11.9 The Committee considered that honest, accurate and careful veterinary certification was a fundamental component of the responsibilities of a veterinary surgeon. The matters which the Committee had found to be proved fell far short of the standards

expected of a registered veterinary surgeon and amounted, in the Committee's judgment, to disgraceful conduct in a professional respect.

12. Sanction

12.1 Mr. Weston confirmed that the Respondent had no previous regulatory history.

12.2 The Committee heard oral evidence from three witnesses with knowledge of the Respondent's character.

12.3 Professor S, FRCVS, had previously provided a written reference. He told the Committee that his practice dealt with a number of herds of cattle. The Respondent was a key member of the team. She had faced challenging conditions on farms and the feedback from colleagues and farmers had been uniformly excellent. Professor S said she faced adverse situations cheerfully and was always prepared to go the extra mile. The Respondent had expressed her remorse for the situation which had arisen in this case to him directly. He very much hoped the Committee would be able to take a lenient view of what had occurred.

12.4 Emeritus Professor B had also provided a written reference. She told the Committee that she farmed a particular breed of sheep which she kept as a breeding flock. Following the Respondent's first visit to her farm she specifically requested the Respondent when she needed a veterinary surgeon to attend on call-out. She considered that the Respondent combined good animal rapport with a high degree of professionalism. She was a calm presence who "gave her all". She also urged the Committee to take a lenient view of what had occurred.

12.5 Mr. DR, MRCVS, had employed the Respondent in his veterinary practice when she qualified as a veterinary surgeon. He said that the Respondent displayed exceptional skills for a young graduate, was dedicated to the profession and always willing to learn. He and his colleagues at the practice were very disappointed when family circumstances compelled her to leave and move to the North of England.

12.6 All of the three witnesses called regarded the Respondent as absolutely trustworthy. Their view was reflected in the other written testimonials the Committee had received.

12.7 Ms. Maqboul provided the Committee with written submissions which formed the basis of her oral argument. In her submissions she emphasised the difficult working conditions engendered by the outbreak of AI and the genuine remorse and insight of the Respondent. She also referred the Committee to the terms of the referral to the College made by Dr. MP, MRCVS, in which he wrote:

“Ms. Briggs has admitted a breach of professional conduct and has shown contrition. APHA applied sanctions by revoking her OV status and not allowing her to reapply for one year. APHA believe that recurrence is unlikely and acknowledges that Ms. Briggs is a relatively new graduate who gained no benefit from the breach, was working in an isolated situation and had concerns about COVID-19 that may well have contributed to her action.

.... APHA is not seeking any additional sanctions but would appreciate the college emphasising to Ms. Briggs the seriousness of the breach. I recognise this investigation has caused considerable stress to Ms. Briggs.....”.

Ms. Maqboul submitted that this opinion was of particular importance when it came to evaluating a sanction that was sufficient to satisfy the public interest, as it was the opinion of a *“highly informed professional colleague whose role is to safeguard national animal health, public health and animal welfare, but who is also a member of the public who is fully apprised of the circumstances of this case”.*

12.8 The Legal Adviser reminded the Committee of the guidance to be found in the Sanctions Guidance and of the general principle that the purpose of sanction was not to punish. The Committee was required to take a proportionate view of the findings it had made and to arrive at an outcome which would be sufficient, but no more than sufficient, to protect animals and the public and to satisfy the wider public interest.

12.9. The Committee considered the aggravating and mitigating factors.

- 12.10 The Committee had already identified a number of features which contributed to its finding of disgraceful conduct in a professional respect. No useful purpose would be served by simple repetition of those features here. The Committee reminded itself that it was concerned with two instances, which had occurred within a week of each other, in which the Respondent, acting as an OV, had stated on respective certification forms that she had inspected poultry when in fact she had relied upon information from apparently reliable bird owners.
- 12.11 In the Committee's judgement the circumstances of the incident were a mitigating factor in the sense that the Respondent was working in a pressurised environment, and in a field of practice which was unfamiliar to her. The Committee had heard a considerable amount of evidence from various witnesses that the surveillance system created, to monitor the prevalence of AI was one which placed considerable pressure on OVs and, perhaps inevitably, had some shortcomings. The Respondent had not worked with poultry before so her inexperience in this area fed into this situation.
- 12.12 The Committee took into account the fact that no actual harm had occurred and there was no financial gain to the Respondent. The matters with which the Committee was concerned formed a highly unusual, and short-lived, episode in the Respondent's career.
- 12.13 The Respondent had made open and frank admissions from the outset during the investigation process to the substance of what was alleged against her in respect of those parts of the Allegation which the Committee found proved. Perhaps most importantly of all, in the Committee's judgment, she had shown genuine contrition for what had occurred and demonstrated insight into the implications of her misconduct. The Committee considered that the chance of the Respondent repeating this type of misconduct is negligible.
- 12.14 The Committee considered that there was significant mitigation.

- 12.15 The Committee also noted that the Respondent had been suspended from carrying out any further work for APHA for a period of 12 months and that this was regarded by APHA as a sufficient sanction.
- 12.16 The Committee turned to consider sanction. It had regard to the Sanctions Guidance and considered sanction in ascending order. It recognised that the purpose of any sanction imposed was not to punish but to protect the public and address the public interest.

“Where the Disciplinary Committee has found that a veterinary surgeon has fallen below the required standards, its task is to consider whether he or she may pose a risk to those who use veterinary services in future and what steps are needed to protect the public. The Disciplinary Committee must also consider the wider public interest, which includes the maintenance of public confidence in the veterinary profession and the deterrent effect upon other registered veterinary surgeons”. (Sanctions Guidance, paragraph 29)

- 12.17 The Committee also had regard to the available guidance in relation to the importance of correct veterinary certification. The Sanctions Guidance states:

‘The correctness of veterinary certificates is also a matter of importance and can in some contexts bear on animal and indeed human health. The RCVS’s Guide to Professional Conduct (2002 edition) underlines the obvious need for truthfulness and accuracy, in the interests of both clients and third parties. The public and bodies such as the Jockey Club have in various contexts to rely on the accuracy of veterinary certificates. The reputation of and confidence in the integrity of the profession of veterinary surgeon is important in a manner which bears an analogy to, even if it is not precisely the same as, that described by Sir Thomas Bingham in Bolton v. Law Society. But that is not to say that it would be correct to bracket all cases of knowingly inaccurate veterinary certification into a single group and to treat them as equivalently serious. That would not be right when considering either how far an offender needs to be deprived of the opportunity of practice in order to prevent re-offending, or what sanction is necessary to maintain or restore public confidence in the profession. Deterrence is an important consideration, but it must be deterrence in the light of the particular circumstances of the offence to which any deterrent sanction is directed.’ Sanctions Guidance, paragraph 36).

- 12.18 The Committee first considered whether to take no further action. The case was too serious for that course to be appropriate.
- 12.19 The Committee then considered Postponement but concluded that no useful purpose would be served by postponing sanction.
- 12.20 The Committee next considered the sanction of reprimand and/ or warning. It noted that the Sanctions Guidance suggests that this course might be appropriate if the conduct in question *“is at the lower end of the spectrum of gravity for such cases and, for example, there is no risk to animals or the wider public interest that requires registration to be restricted”*. The Guidance makes plain that in addition to these factors, evidence of insight is required if this sanction is to be appropriate.
- 12.21 False certification can never be acceptable. Veterinary surgeons should never certify any matter which they know, or ought to know, not to be true. However, the Committee considered that this case was at the lower end of the spectrum of gravity of false certification cases, that there is no future risk to animals and that the Respondent has demonstrated insight. In relation to the public interest, the Committee considered that a reasonable and fully informed member of the public would recognise that, in all the circumstances of this particular case, a reprimand and warning as to future conduct would be sufficient to satisfy the public interest.
- 12.22 In accordance with its usual practice, the Committee also considered the next most serious sanction which is that of suspension. The Committee recognised that suspension can have a deterrent effect and a sanction of suspension can be used to send a signal to the profession. Some cases of false certification are likely to attract this sanction. Indeed, some cases of false certification may be so serious as to justify removal from the Register. However, the Committee did not consider that a sanction of suspension was inevitable in every case of false certification, no matter what the surrounding circumstances. Each case is dependent on its own particular facts. The Committee recognised that the veterinary profession was well aware of the

importance of truthful and accurate certification. The Committee concluded that a sanction of suspension was not necessary in this particular case to arrive at a proportionate outcome.

12.23 The Committee therefore issues a Reprimand to the Respondent in respect of her disgraceful conduct in a professional respect, and a Warning as to her future conduct. This Reprimand and Warning will be taken into account by any future Disciplinary Committee which has to consider imposing a sanction.

Disciplinary Committee

8 December 2023