

# BEFORE THE FITNESS TO PRACTISE COMMITTEE OF THE GENERAL OPTICAL COUNCIL

### **GENERAL OPTICAL COUNCIL**

F(24)20

AND

**UMAR MASOOD (01-26624)** 

## NOTICE OF INQUIRY SUBSTANTIVE HEARING

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Take notice that an inquiry will be conducted in the above matter by the Fitness to Practise Committee of the General Optical Council.

A substantive hearing will be proceeding:

### Remotely

The substantive hearing will commence at 9:30am on **Monday 13 January** to **Friday 17 January 2025** by way of video conference or telephone conference facilities.

The Inquiry will be based upon the allegation submitted by the Council (see below) and will determine whether the fitness to practise of **Umar Masood** is impaired by virtue of the provisions contained in section 13D(2) of the Opticians Act 1989.

Taz Chisango Hearings Manager, General Optical Council

10 December 2024

#### **ALLEGATION**

The Council alleges that in relation to you, Umar Masood (01-26624) a registered Optometrist, whilst working at [redacted] Specsavers Limited:

- 1) On or around 2 June 2023, you failed to perform an appropriate examination and/or assessment of Patient A's eyes in that you:
  - a. Failed to perform a visual field test despite it being clinical indicated; and/or
  - b. Failed to perform an external eye examination; and/or
  - c. Recorded entries for the following despite these external examinations not being performed:
    - i. 'normal as seen' for the external eye;
    - ii. 'clear and quiet' for the anterior chamber, and/or
  - d. Failed to perform an internal eye examination; and/or
  - e. Recorded entries for the following despite these internal examinations not being performed:
    - i. Lens;
    - ii. Vitreous;
    - iii. Optic disc;
    - iv. CD (cup to disc) ratio;
    - v. Vessels;
    - vi. AV (arterio-venous) ratio;
    - vii. Macula;
    - viii. Peripheral retina;
  - f. Completed Patient A's eye examination in around 9 minutes despite the patient clinically presenting as a new presbyopic patient having a history of retinal detachment:
  - g. Your conduct as set out at 1)c is dishonest in that you recorded findings from an external eye examination which had not been undertaken; and/or
  - h. Your conduct as set out at 1)e is dishonest in that you recorded findings from an internal eye examination which had not been undertaken; and/or
  - i. Your conduct as set out at 1)e is unprofessional and/or inappropriate in that you only documented findings from Patient A's retinal photos where neither the lens, the vitreous, or the retinal periphery, would be visible from solely looking at Patient A's retinal photos; and/or

- j. Your conduct as set out at 1)e)iv is unprofessional and/or inappropriate in that you recorded an entry that significantly under-estimates optic disc cupping, by falling outside the range expected of a reasonable estimate for optic discs, despite the retinal photos revealing the likely cupping; and/or
- k. Your conduct as set out at 1)f is unprofessional and/or inappropriate in that you failed to allow sufficient time to conduct an adequate and/or complete examination;
- 2) On or around 19 May 2023, you failed to perform an appropriate examination and/or assessment of Patient B's eyes in that you:
  - a. Failed to perform an external eye examination; and/or
  - b. Recorded entries for the following despite these external examinations not being performed:
    - i. 'normal as seen' for the external eye;
    - ii. 'clear and quiet' for the anterior chamber, and/or
  - c. Failed to perform an internal eye examination; and/or
  - d. Recorded entries for the following despite these internal examinations not being performed:
    - i. Lens:
    - ii. Vitreous;
    - iii. Optic disc;
    - iv. CD (cup to disc) ratio;
    - v. Vessels;
    - vi. AV (arterio-venous) ratio;
    - vii. Macula;
    - viii. Peripheral retina.
  - e. Completed Patient B's eye examination in around 11 minutes despite the patient clinically presenting as a new presbyopic patient;
  - f. Your conduct as set out at 2)b is dishonest in that you recorded findings from an external eye examination which had not been undertaken; and/or
  - g. Your conduct as set out at 2)d is dishonest in that you recorded findings from an internal eye examination which had not been undertaken; and/or
  - h. Your conduct as set out at 2)d is unprofessional and/or inappropriate in that you only documented findings from Patient B's retinal photos and OCT scans where neither the lens, the vitreous, or the retinal periphery, were visible from solely looking at Patient B's OCT images and/or retinal photos; and/or

- i. Your conduct as set out at 2)d)iv is unprofessional and/or inappropriate in that you recorded an entry that significantly under-estimates optic disc cupping, by falling outside the range expected of a reasonable estimate for optic discs, despite the retinal photos revealing the likely cupping; and/or
- j. Your conduct as set out at 2)e is unprofessional and/or inappropriate in that you failed to allow sufficient time to conduct an adequate and/or complete examination;

And by virtue of the facts set out above, your fitness to practise is impaired by reason of misconduct.

**Committee Members:** Graham White (Chair/Lay)

John Vaughan (Lay)

Gerry Wareham (Lay)

Amit Jinabhai (Optometrist)

TBC (Optometrist)

**Legal Adviser:** Paul Moulder

Hearings Officer: Latanya Gordon

**Transcribers:** Marten Walsh Cherer Limited

If you require further information relating to this hearing, please contact the Council's Hearings Manager at <a href="mailto:hearings@optical.org">hearings@optical.org</a>.