

MEDICAL COUNCIL OF IRELAND

FITNESS TO PRACTISE COMMITTEE
UNDER PART 8 OF THE MEDICAL PRACTITIONERS ACT 2007

RE: REGISTRANT [WITNESS B]
REGISTRATION NO: 405670

HEARING BEFORE THE FITNESS TO PRACTISE COMMITTEE
AT KINGRAM HOUSE, KINGRAM PLACE, DUBLIN 2
ON FRIDAY, 25TH APRIL 2025 - DAY 9

9

Gwen Malone Stenography
Services certify the
following to be a
verbatim transcript of
their stenographic notes
in the above-named
action

GWEN MALONE STENOGRAPHY
SERVICES

APPEARANCES

THE COMMITTEE : MR. PAUL HARKIN - CHAIR
MS. MARY DEVINS (REMOTE)
DR. MARY DAVIN-POWER (REMOTE)

LEGAL ASSESSOR : MR. DIARMAID MCGUINNESS SC

FOR THE CEO : MR. HUGH McDOWELL BL

INSTRUCTED BY : MS. AINE GROGAN
SOLICITOR
MESSRS. FIELDFISHER
SOLICITORS

FOR THE REGISTRANT : MS. MAURA McNALLY SC

INSTRUCTED BY : MR. FAISAL KHAN
SOLICITOR
MESSRS. FSK SOLICITORS

ALSO PRESENT : MS. JANE HORAN
PROFESSIONAL STANDARDS SECTION OF
THE MEDICAL COUNCIL

MR. JOHN SIDEBOTTOM
PROFESSIONAL STANDARDS SECTION OF
THE MEDICAL COUNCIL

WITNESS B
REGISTRANT

COPYRIGHT: Transcripts are the work of Gwen Malone
Stenography Services and they must not be photocopied or
reproduced in any manner or supplied or loaned by an
appellant to a respondent or to any other party without
written permission of Gwen Malone Stenography Services

INDEX

WITNESS

PAGE

SUBMISSION BY MR. MCDOWELL	9
SUBMISSION BY MS. MCNALLY	10
DR. SYED HAIDER	
DIRECTLY EXAMINED BY MS. MCNALLY	13
CROSS-EXAMINED BY MR. MCDOWELL	17
RE-EXAMINED BY MS. MCNALLY	28
QUESTIONING BY THE COMMITTEE	29
DR. AHSAN SARFARAZ	
DIRECTLY EXAMINED BY MS. MCNALLY	34
CROSS-EXAMINED BY MR. MCDOWELL	37
RE-EXAMINED BY MS MCNALLY	47
DR. YUSUF BAIG	
DIRECTLY EXAMINED BY MS. MCNALLY	49
CROSS-EXAMINED BY MR. MCDOWELL	61
RE-EXAMINED BY MS. MCNALLY	68
QUESTIONING BY THE COMMITTEE	70
DR. MOHD GHAZNAIN	
DIRECTLY EXAMINED BY MS. MCNALLY	80
CROSS-EXAMINED BY MR. MCDOWELL	82
QUESTIONING BY THE COMMITTEE	87
LEGAL ADVICE BY MR. MCGUINNESS	91

CLOSING SUBMISSION BY MR. MCDOWELL	93
CLOSING SUBMISSION BY MS. McNALLY	119
LEGAL ADVICE BY MR. MCGUINNESS	134
REPLYING SUBMISSION BY MR. MCDOWELL	135
REPLYING SUBMISSION BY MS. McNALLY	137
SUBMISSION BY MS. McNALLY	139
LEGAL ADVICE BY MR. MCGUINNESS	141

1 THE HEARING RESUMED AS FOLLOWS ON FRIDAY, 25TH
2 APRIL 2025:

3
4 CHAIRPERSON: So good afternoon all. Before we begin,
5 let me just double check that my Committee colleagues
6 can hear me? Dr. Davin-Power and Ms. Devins, you can
7 hear me, can you?

14:07

8 DR. DAVIN-POWER: Yes.

9 MS. DEVINS: Yes, I can hear you.

10 CHAIRPERSON: Thank you. So good afternoon to you all.
11 This is an Inquiry by the Fitness to Practise Committee
12 under Part 8 of the Medical Practitioners Act of 2007.
13 This is Day 9 of an Inquiry into allegations of
14 professional misconduct and/or poor professional
15 performance and/or a contravention of a provision of
16 the Medical Practitioners Act 2007, including a
17 provision of any regulations or rules made under this
18 Act on the part of a registered medical practitioner.

14:08

14:08

19
20 Although this Inquiry is proceeding in public, the
21 Complainant is being anonymised as Witness A, and the
22 Registrant against whom allegations have been made is
23 being anonymised as Witness B.

14:08

24
25 In the event that either witness is inadvertently
26 referenced by their actual name or in a way that might
27 identify them, parties to this Inquiry are ordered not
28 to disclose their identity. The transcript of this
29 Inquiry will be amended as necessary to correct any

14:08

1 inadvertent disclosures.

2
3 So let me just for the benefit of anyone who is new to
4 this Inquiry introduce you to the Fitness to Practise
5 Committee here today. My name is Paul Harkin, I Chair 14:09
6 this Inquiry Committee, I am not a medical
7 practitioner. You will see on your screens Ms. Mary
8 Devins, who is also not a medical practitioner, and
9 Dr. Mary Davin-Power, who is a medical practitioner.

10
11 With me here today and with the Committee is
12 Mr. Diarmuid McGuinness, senior counsel, he is the
13 legal assessor to the Committee.

14
15 And as you probably know by now, the legal assessor is 14:09
16 not a member of the Fitness to Practise Committee, he
17 is in attendance to assist the Committee in relation to
18 legal issues or arguments which may arise during the
19 course of the hearing.

20
21 Mr. McGuinness when he gives legal advice to the
22 Committee will permit submissions to be made by the
23 parties on that advice.

24
25 The Committee will then retire, if necessary, to make 14:09
26 its decision in private in light of the advice of the
27 legal assessor and the submissions made.

28
29 So, if I can bring you back to the previous day, I

1 think we had gotten to a stage where we were going to
2 hear submissions in respect of sanction. And I
3 understand, Ms. McNally, you had three testimonials you
4 wished to put in front of the Committee, and the CEO
5 sought that those be formally proven. So I presume the 14:10
6 intention is that we start with that piece first, and
7 then subsequently hear from you both in respect of the
8 issue of sanction.

9 MS. McNALLY: It is actually four, and they have been
10 furnished, and they were furnished on the last day. 14:10

11 CHAIRPERSON: I beg your pardon.

12 MS. McNALLY: So the first witness -- sorry, I don't
13 know if I am pressing the right button, apologies. The
14 first witness that we were proposing, and everyone has
15 been sent the respective links, so the first is 14:10
16 Dr. Haider, who is in London, and that was scheduled
17 from 2 to about 2:30. Then we have Dr. Sarfaraz, who
18 is from 2:30 to 3. And then we have Dr. Yusuf Baig,
19 who is in Karachi. And then we have Dr. Mohd Ghaznain,
20 who is here in Ireland. His practice is in French 14:11
21 Park, but I gather he resides in Sligo, and he was for
22 around 4 o'clock. But obviously the persons we are
23 anxious to ensure have access is the doctor in Karachi
24 and obviously Dr. Haider --

25 DR. DAVIN-POWER: Excuse me, Chair. 14:11

26 CHAIRPERSON: Yes, Dr. Davin-Power.

27 DR. DAVIN-POWER: Should I be hearing something? I am
28 not hearing any dialogue.

29 CHAIRPERSON: Okay.

1 MS. DEVINS: And I have the same difficulty, Chairman.
2 CHAIRPERSON: So Ms. McNally's microphone needs to be
3 turned on, I think, for you to hear. So I will get her
4 to briefly recap. She was just introducing us to the
5 fact that there are four witnesses that we are going to 14:11
6 hear who will give testimonials on behalf of the
7 Registrant, and they have some time constraints which
8 we are anxious to accommodate. They are dialling in
9 from London, Kerachi, and as far away as Sligo, we
10 think. So we will try to accommodate and work around 14:12
11 your scheduling as best we can, Ms. McNally.
12 MS. DEVINS: And sorry, Chairman, a further point, do
13 we, as in Dr. Davin-Power and I, only get to hear the
14 various parties and witnesses?
15 CHAIRPERSON: That's a question I will need to ask of 14:12
16 the Executive staff here. Do you -- can you see me,
17 for example, at the moment?
18 MS. DEVINS: No, I cannot see you.
19 DR. DAVIN-POWER: I can.
20 CHAIRPERSON: So one party can see and one can't. Is 14:12
21 there anything...
22 DR. DAVIN-POWER: Maybe swipe across.
23 CHAIRPERSON: I will need to invoke the assistance of
24 my Executive colleagues on this matter, because it is
25 important that you can fully participate in this. 14:12
26 MS. DEVINS: well, I suppose, it is not essential, I
27 mean, I can hear perfectly well if the microphones are
28 turned on.
29 CHAIRPERSON: Can I just check with Ms. McNally, your

1 witnesses are going to be giving evidence by video?

2 MS. McNALLY: It is all by video.

3 MS. DEVINS: Okay.

4 MS. McNALLY: It's green now, but flashing, I don't
5 know if you can hear me, it is flashing green, now it
6 is gone red. 14:13

7 CHAIRPERSON: So it needs to be on red for you to...

8 MS. McNALLY: They all have been sent the Teams link, I
9 keep saying Zoom, but it's a Teams link, so everyone
10 has been sent the Teams link. So I presume that will 14:13
11 facilitate both the entire verbiage that you should be
12 able to both see them and hear them I would have
13 thought.

14 CHAIRPERSON: I should have said --

15
16 SUBMISSION BY MR. McDOWELL:

17
18 MR. McDOWELL: Chair, could I mention something
19 slightly different, but I suppose maybe even before we
20 get on to the witnesses; I just want to draw to the 14:13
21 Committee's attention the fact that the anonymisation
22 of witness B was granted by this Committee, I think in
23 July of last year. And the basis upon which it was
24 granted was concerns around witness B's presumption of
25 innocence. 14:14

26
27 I am not making an application as such, but I do draw
28 to the Committee's attention the fact that the default
29 position for an Inquiry such as this is that it is

1 heard in public. And it does now seem to me that the
2 basis for the anonymisation of witness B perhaps has
3 fallen away, in circumstances where he has made full
4 admissions to all of the allegations against him in the
5 Notice of Inquiry.

14:14

6
7 So I think it is a matter for the Committee as to
8 whether it regards it as appropriate to persist with
9 that anonymisation order in the circumstances.

10 CHAIRPERSON: Thank you, Mr. McDowell, for that.

14:14

11 Ms. McNally, do you have any comments on that
12 submission?

13
14 SUBMISSION BY MS. McNALLY:

15
16 MS. McNALLY: I don't have a comment on that submission
17 at the moment other than we have received a text to say
18 that Dr. Haider is only available till 2:30. That
19 gives me 15 minutes, or 16 if my mobile is correct.

14:14

20 CHAIRPERSON: Okay, so the most important thing I think
21 is that we hear from your witness. So maybe we will
22 just pause that and we might invite Mr. McGuinness to
23 give his advice on the matter, but I appreciate you
24 bringing it to our attention. I should have said good
25 afternoon to you both, so good afternoon.

14:15

26 MS. McNALLY: Thank you.

27 MR. McDOWELL: Thank you.

28 CHAIRPERSON: So Executive staff, colleagues, do we
29 have the first witness or not?

1 MS. HORAN: The witness was in the waiting room, he
2 doesn't seem to be there now... there we go.
3 CHAIRPERSON: I think we have the witness now.
4 DR. HAIDER: Hello, hi.
5 MS. HORAN: Good afternoon doctor, can you hear me? 14:15
6 DR. HAIDER: Yes, I just left I was logged in since
7 2pm, but I am now going to the hospital. But I still
8 have ten minutes maybe. Let me go back in the house
9 because I... just a minute.
10 MS. HORAN: Okay. would it be possible for you to turn 14:16
11 on your camera?
12 DR. HAIDER: Let me go to the house, I just came out, I
13 thought no one was coming to the meeting. Give me one
14 minute, I will pick up. My next meeting is starting
15 actually at 2:30, so I will... I have only ten minutes. 14:16
16 Can you see me?
17 MS. HORAN: I can see you. I won't delay you. Just
18 before you give your evidence, you will need to be
19 sworn in. So you can swear on a holy book if you have
20 one to hand or you can affirm and attest? 14:16
21 DR. HAIDER: Yeah, I don't have a holy book, but I can
22 affirm.
23 MS. HORAN: You can affirm and attest.
24
25 (Dr. Haider affirmed) 14:16
26
27 CHAIRPERSON: Dr. Haider, you are very welcome to this
28 Inquiry today. My name is Paul Harkin, I Chair this
29 Inquiry Committee.

1 DR. HAIDER: Thank you very much, thank you very much
2 for having me.

3 CHAIRPERSON: Thank you. As you are under time
4 pressure I won't delay you by introducing you to the
5 Committee, but I will hand you over to Ms. McNally who 14:17
6 is counsel for the Registrant in this matter. Thank
7 you again.

1 DR. SYED HAIDER, HAVING AFFIRMED, WAS DIRECTLY EXAMINED
2 BY MS. McNALLY AS FOLLOWS:
3

4 1 Q. MS. McNALLY: Good afternoon, Dr. Haider, my name is
5 Maura McNally, I represent witness B, and you have
6 furnished a reference that's dated 6th March 2025, is
7 that correct?

14:17

8 A. Yes, yes.

9 2 Q. And could I just ask you, how long have you known
10 witness B?

14:18

11 A. So I have known him since 2003, so it makes nearly 24
12 years.

13 3 Q. And can I just ask you without going through each of
14 the lines of the reference, could you summarise your
15 opinion of witness B for the Medical Council here
16 please?

14:18

17 A. Yeah, so I have had a long relationship with him. So
18 we graduated, we went to the same medical school. We
19 graduated in the same year. Our first job was in the
20 Maldives and it was our first job. And since then
21 after we came to Ireland together, I mean in the same
22 hospital, so up around the last hospital in which we
23 were together was in Castlebar in Mayo. And after that
24 we had been in contact as well. At present I am here
25 in London, so he often comes, not very often, but once
26 in a month, something like that. But in between I have
27 known him as well, so... and I also know a little bit
28 about this case which is going on as well. So it is
29 very surprising to me, I mean what newspapers have been

14:18

14:19

1 writing about him, which I have read and things, which
2 is very highly uncharacteristic of him, because I mean
3 knowing someone for 24 years and he was coming in my
4 house while I was in Pakistan and here as well in
5 London, I mean he never misbehaved, or even in the 14:19
6 medical college I never -- I -- I mean he never had any
7 kind of, you know, problem with the opposite sex or
8 gender. So whatever has happened, I mean I think it is
9 not -- it is not the real character of the person who I
10 know sincerely. 14:20

11 4 Q. Okay. Would it surprise you to know that he has been
12 receiving some treatment from Dr. Yusuf Baig in Kerachi
13 and that he commenced --

14 A. Yeah, I know he has been seeking help from different
15 psychiatrists because of his mental issues, because 14:20
16 even I remember when we were in the medical college in
17 the third year he -- I mean he used to take a
18 medication to enhance his mental faculties. So he -- I
19 mean he can be sometimes under pressure, so he used to
20 take a medication, which I don't remember whether it 14:20
21 was an antidepressant or was it a mood enhancing kind
22 of a medication, but I remember he used to take that.
23 And then I remember that he was -- he told me actually
24 that he was seeing a psychiatrist, a professional
25 psychiatrist here in London, somewhere as well, and in 14:21
26 Pakistan. But I will not be able to verify or brief on
27 his mental history much.

28 5 Q. Okay. He more or less left Ireland in 2019, travelling
29 back and forth to Pakistan. Were you aware of that?

1 A. Yeah, he has been to Pakistan on and off, but I will
2 not be able to recollect exact dates.

3 6 Q. Okay. And are you aware that the medication he was
4 commenced on, I hope I pronounce it properly,
5 venlafaxine, and also Zolpidem, one is for sleep, the 14:21
6 latter is for sleep and the first is for anxiety and
7 depression. Would you be aware --

8 A. I won't -- I'll not be sure what exact medications he
9 takes, I won't be sure about that.

10 7 Q. Okay. And are you aware that he married last year? 14:21

11 A. Yeah, I am aware that he is now married. I haven't
12 attended his ceremony, because he went, I mean, to
13 Pakistan last year and then he told me that he is
14 married now, but I haven't even him since he got
15 married. 14:22

16 8 Q. Okay. And you use the word at the very start of your
17 evidence "uncharacteristic" I think is the word that
18 you used?

19 A. Yeah, yeah, yeah, exactly, yeah.

20 9 Q. And in your practice with him when you were working 14:22
21 with him, you described him as someone you would trust
22 implicitly?

23 A. Absolutely, because I mean -- I will tell you an
24 example, I mean there are many incidents, but I will
25 tell you one example where he persuaded me to do the 14:22
26 Masters in neurology which will help. He told me that
27 it will help you to secure a good position in future.
28 I mean he always used to give very good advice and,
29 like, you know, and very, you know, professional

1 advice.

2 10 Q. okay.

3 A. And regarding these allegations, he -- these

4 allegations apparently were in a hospital somewhere in

5 Midlands, in Tullamore somewhere. So when I first 14:23

6 heard about these, it was really shocking to me, and

7 then as things unfolded, it got more and more complex,

8 which has led to, you know, this kind of a situation

9 now. So I won't -- I won't be able to pinpoint what

10 was the main trigger, but it could have been, you know, 14:23

11 because in Ireland when we were together, it was good,

12 but then you don't know, there is an element of

13 isolation when you are living in a place like far away

14 like in Mayo, for example.

15

16 So I mean sometimes if you don't have friends around, I

17 mean isolation -- isolation can lead to depression

18 sometimes.

19

20 So -- because I left Mayo when I was -- I think it was 14:24

21 2015. I went to Limerick then because I got my

22 training post there and he was alone then. So I am not

23 sure if that was the trigger point which triggered all

24 of this spilling of his...

25 11 Q. Okay. You also described him as a person of integrity, 14:24

26 professionalism, reliability, supportive, approachable,

27 professional. Do you still stand by that?

28 A. Yeah, yeah, yeah, definitely, yeah, because when he is

29 with me all the time, we always talk about, you know,

1 professional things and nothing else, and it is not for
2 one or two days, it is like 20 plus years, so...

3 12 Q. okay.

4 MS. McNALLY: Thank you, Dr. Haider, I am going to ask
5 my colleague to proceed with his questions. And then 14:25
6 with the liberty of the Commission, I might just read
7 the reference into the record rather than waste the
8 time doing that now. Thank you, Dr. Haider.
9 DR. HAIDER: Thank you very much, Ms. McNally.

10 14:25

11 DR. HAIDER WAS CROSS-EXAMINED BY MR. McDOWELL AS
12 FOLLOWS:
13

14 13 Q. MR. McDOWELL: Dr. Haider, my name is Hugh McDowell, I
15 am a barrister appearing on behalf of the Chief 14:25
16 Executive of the Medical Council.
17

18 I have before me a copy of a reference dated 6th March
19 2025 that you have signed. Are you familiar with that
20 document? 14:25

21 A. Yeah, yeah, yes.

22 14 Q. Yeah. And did you write that document yourself?

23 A. Yeah, yes.

24 15 Q. And did anybody assist you in writing that document?

25 A. No, no, I wrote it myself. 14:25

26 16 Q. And are you sure about that?

27 A. Yeah, yeah.

28 17 Q. Did witness B contribute to the contents of that
29 document at all?

1 A. No, no, no, it was from me.

2 18 Q. And did witness B's solicitors assist you with the
3 drafting of that document at all?

4 A. No, no, no.

5 19 Q. Okay. So, in the first line of that document, 14:26
6 Dr. Haider, you say:
7
8 "I am writing this letter to provide a character
9 reference for Witness B who has been a trusted
10 healthcare professional for 15 years." 14:26
11
12 Do you remember writing that?

13 A. Yeah, yeah, yeah.

14 20 Q. Okay. And I am not now going to read to you the second
15 sentence in a reference written by another doctor, who 14:26
16 is going to be giving evidence today, a Dr. Ahsan
17 Sarfaraz. Do you know Dr. Sarfaraz?

18 A. No, I don't know him, no.

19 21 Q. Okay. So he wrote, and the equivalent sentence in his
20 letter says:
21
22 "I am writing this letter to offer a character
23 reference for Witness B, a highly trusted healthcare
24 professional with 15 years experience."
25
26 Now, do you think it is unusual that the first sentence
27 of your reference and the first sentence of this other
28 reference both make reference to witness B being a
29 trusted healthcare professional for 15 years?

1 A. No, I think this might be a typo, because if you read
2 the last sentence, I have known him for 24 years, so
3 why would I write 15 years.

4 22 Q. Well, that's why I am asking -- I mean you say that you
5 wrote your letter, Dr. Haider, so let me start again. 14:27
6 Your letter says:
7
8 "I am writing this letter to provide a character
9 reference for Witness B who has been a trusted
10 healthcare professional for the last 15 years." 14:27
11
12 So did you write that sentence?

13 A. Yeah, yeah, I think I wrote this sentence, but it is
14 not 15 years, it is 24 years, let me... because... let
15 me see if I have that letter somewhere. I am sure I 14:27
16 wrote it, but it is 24 years. And I sent, I think, a
17 copy to his lawyer as well, which I remember.

18 23 Q. Okay. I am going to now read to you the second
19 sentence in your letter, Dr. Haider, okay? The second
20 sentence in your letter says: 14:28
21
22 "Throughout my association with Witness B, I have
23 witnessed a person who is not only dedicated to their
24 profession, but also deeply compassionate and ethical
25 in their interactions with patients and colleagues 14:28
26 alike."
27
28 Did you write those words?

29 A. Yeah, yeah, yeah.

1 24 Q. Did anybody else write those words?
2 A. I am not sure, I am not sure.
3 25 Q. Okay, I am going to now read to you the second sentence
4 from what purports to be Dr. Sarfaraz's letter, it
5 says:
6
7 "Throughout my time knowing Witness B, I have seen an
8 individual who is not only committed to their medical
9 profession, but also deeply compassionate and ethical
10 in his interactions with both patients and colleagues." 14:28
11
12 So, can you explain to the Committee why the first
13 paragraph of your letter is almost identical to the
14 first paragraph of Dr. Sarfaraz's letter?
15 A. I am not really sure, you know, I don't know. 14:29
16 26 Q. Well, I started by asking you did you -- were you the
17 only person who contributed to this letter. So are you
18 sticking by your answer that you are the only person
19 who contributed to this document?
20 A. Yeah, yeah, yeah, exactly, exactly. 14:29
21 27 Q. And can you provide any explanation as to why your
22 document is almost a mirror image of Dr. Sarfaraz's
23 document?
24 A. I can't say now, how can I -- if I had the letter on
25 the phone, if I had my laptop, I would have double 14:29
26 checked it with the letter which I signed, I am sure I
27 send it to his lawyer as well this, and I wrote it by
28 myself.
29 28 Q. So then the second-last paragraph of your letter says:

1 "Witness B has always demonstrated the highest levels
2 of professionalism, integrity and respect for others."
3
4 CHAIRPERSON: I am sorry, Mr. McDowell, I am going to
5 have to pause you for a second, I think we have lost 14:29
6 one of our panel.
7 A. Yeah, yeah, continue.
8 MR. McDOWELL: I am just going to wait, Dr. Haider,
9 because somebody has dropped off the call.
10 CHAIRPERSON: Please continue. 14:30
11 29 Q. MR. McDOWELL: So the first sentence of the second-last
12 paragraph in your letter says:
13
14 "Witness B has always demonstrated the highest levels
15 of professionalism, integrity and respect for others." 14:30
16
17 The first sentence of the second-last paragraph of
18 Dr. Sarfaraz's letter says:
19
20 "Witness B has consistently displayed the highest 14:30
21 levels of professionalism, honesty and respect for
22 others."
23
24 Now, can you account for that similarity?
25 A. How, I don't know, you can ask his lawyer, maybe, he 14:30
26 has, you know, copied my letter or something like that,
27 but I am not sure.
28 30 Q. The next sentence in your letter says:
29

1 "In the time I have worked with them, I have witnessed
2 a person who is deeply committed to the wellbeing of
3 their patients and the ethical standards of their
4 practice."

5
6 The second sentence of the second-last paragraph of
7 Dr. Sarfaraz's letter says:

8
9 "Throughout my association with them, I have observed
10 an individual who is wholeheartedly dedicated to his 14:31
11 patient's wellbeing and the ethical standards of his
12 field."

13
14 Can you account for the fact that those sentences are
15 nearly identical? 14:31

16 A. Yeah, they look identical, yeah.

17 31 Q. I am asking you, can you explain to the Committee how
18 your document is almost identical to another doctor's
19 document?

20 A. I am not sure. 14:31

21 32 Q. Well, can you offer an explanation or can you not?

22 A. I mean I certainly didn't copy Dr. Sarfaraz's letter
23 down, I am sure about that.

24 33 Q. Yes. And I am conscious of your time pressure,
25 doctor -- 14:31

26 A. Sorry to interrupt, I mean the important thing is that
27 I mean what I have written I am standing by it, that I
28 have known this person for 24 years. If you go in the
29 small micro details that this was copied from here or

1 this is copied from here, although I haven't copied it,
2 what does this whole -- how -- I mean, will this
3 discussion negate my reference do you think or what?
4 34 Q. well, that's a matter for the Committee, Dr. Haider, I
5 am not going to spend all of this time -- 14:32
6 A. I mean --
7 35 Q. Just listen to my question, Dr. Haider, just listen to
8 my question.
9 MS. McNALLY: Let him answer, let him answer.
10 MR. McDOWELL: I haven't asked a question, I was just
11 interrupted by the witness.
12 MS. McNALLY: He was answering, he was answering.
13 36 Q. MR. McDOWELL: So, Dr. Haider, I want you to listen to
14 my question, did witness B or his solicitors supply
15 this reference to you for your signature? 14:32
16 A. No, they didn't, I wrote it, but I mean even if they
17 supply it, for example, which they haven't, I mean I am
18 account -- in this face-to-face meeting I am telling
19 you -- I have told the whole truth to you how long I
20 have known this person, I mean how will it negate this 14:32
21 reference.
22 37 Q. So you are not in a position to explain to the
23 Committee why your reference is --
24 MS. McNALLY: Asked and answered, asked and answered.
25 38 Q. MR. McDOWELL: Okay, so you are not in a position to 14:33
26 explain to the Committee why your reference is
27 identical to another witness's reference?
28 A. Does it matter how -- how does it matter in this --
29 39 Q. Just answer. Dr. Haider, answer my question, are you

1 in a position to explain it or not?

2 MS. McNALLY: Sorry, Chair, I have to object to --

3 A. I mean I have written it and I am not sure that whoever

4 has copied this letter or used the same words in a way,

5 but in this case, how it will affect his reference? 14:33

6 40 Q. So Dr. Haider, when did you work in Castlebar?

7 A. I am not very good with the dates, but the year was

8 2015.

9 41 Q. Well, can you please now be more precise than that.

10 when exactly did you work in Castlebar? 14:33

11 A. So I think it was from January 2015 to July 2015.

12 42 Q. Yes. And you say that you knew Witness B before that,

13 isn't that right?

14 A. Yeah, yeah, yeah.

15 43 Q. Because you went to the same medical school in 14:34

16 Pakistan, is that correct?

17 A. Yeah, yes, yes.

18 44 Q. And you both ended up working in Castlebar, is that

19 right?

20 A. Yeah, yeah. I mean first we were in Wexford, Wexford 14:34

21 Hospital.

22 45 Q. Okay.

23 A. And then I moved to Waterford for a brief period of

24 time for three months or six months. And then we met

25 again in Wexford. And then we went to Castlebar. 14:34

26 46 Q. Yes. And you say that you know a little bit about the

27 case from what Witness B told you, is that correct?

28 A. Yeah.

29 47 Q. So what did he tell you?

1 A. I mean I have known that when he was in this Midlands
2 Hospital, which I think it is Tullamore Hospital, that
3 he encountered in his team a person with whom he had
4 some kind of, you know, conflict, and then it kind of
5 spread out in a way which was not, I mean, not 14:35
6 professional or something. But I don't recollect those
7 details.

8 48 Q. So your understanding of what this case is about is a
9 conflict that occurred in Tullamore Hospital, is that
10 right? 14:35

11 A. Yeah, yeah, yeah, something like that, yeah.

12 49 Q. I see. And can you tell the Committee what your
13 understanding of what that conflict was?

14 A. I don't know about the details, but later on I read a
15 piece of newspaper article as well, which I 14:35
16 mean indicated various source of, you know, sexual kind
17 of stuff. I mean it was in a newspaper about him, an
18 article written in a newspaper.

19 50 Q. And did you read that after witness B told you what the
20 case was about or before witness B told you what the 14:35
21 case was about?

22 A. So it was -- I mean he send me this -- witness B sent
23 me this link of this newspaper, and in that newspaper I
24 read that I mean he was being accused of, you know,
25 different kind of sexual abuses, which was a shock to 14:36
26 me as well after reading that.

27 51 Q. And when he sent it to you, did he explain to you that
28 what was in the article was true or untrue?

29 A. No, I mean why would he say that this is true?

1 52 Q. So, is it your understanding today that witness B does
2 not accept that these allegations against him are true?
3 A. Yeah, I mean he told me obviously that his name is
4 being, you know, made bad in the press.

5 53 Q. So, are you aware, Dr. Haider, that witness B has 14:37
6 admitted to everything that is alleged against him in
7 this Inquiry?
8 A. What does that mean, can you explain, I mean you are
9 using a lot of technical things, you know technical
10 jargon, you have to explain what does that mean? 14:37

11 54 Q. Well, Dr. Haider, you are a professional doctor, I take
12 it you were registered with the Medical Council when
13 you were here, he had allegations of misconduct made
14 against him and he has admitted to all of those
15 allegations, including a very serious degree of 14:37
16 inappropriate contact with a female doctor over a
17 period of four years.
18
19 Now, he accepts that all of that happened. Were you
20 aware of that before today? 14:37

21 A. No, no, I am not aware of this part that he has
22 admitted to it, I am not aware of this part.

23 55 Q. So prior to me telling you that just now, your
24 understanding was that there was some conflict or
25 disagreement about whether these things had taken place 14:38
26 or not, is that so?
27 A. Yes, yeah, yeah, this, and plus this newspaper article
28 which I read.

29 56 Q. Yes. But your understanding when you read that was

1 that witness B did not accept that any of those things
2 had taken place, isn't that so?

3 A. Yeah, I mean absolutely, I mean why -- I mean he told
4 me that these -- they are putting his name in, you
5 know, giving him a bad name in the press, and he was 14:38
6 denying all of these allegations.

7 57 Q. So, do you know that when he told you he denied the
8 allegation, you know that he was lying to you at that
9 time?

10 A. Oh well I know, I mean, why are you putting these words 14:38
11 in my mouth. I mean, how will I know that he was lying
12 to me or if he was saying truth.

13 58 Q. Because Dr. Haider, he has pleaded guilty at this
14 Inquiry, he has accepted that these things took place.

15 A. I am telling you my thing that I am not aware that he 14:38
16 has pleaded guilty or not, I am not aware of this.

17 59 Q. Yes.

18 A. And I have given my statement from the time period from
19 when I have known him.

20 60 Q. Yes. And can you give please, Dr. Haider, your best 14:39
21 understanding of what the allegations were against
22 witness B?

23 A. As I told you, I was not in that hospital, I have no
24 clue, but I mean he told me some, you know, these
25 details that there was a colleague of his with whom he 14:39
26 had some sort of, you know, conflict. So I am not
27 aware of the micro details. And all those details
28 which I came to know were from that newspaper article
29 which I read.

1 MR. McDOWELL: Thank you very much, Dr. Haider.
2 A. Thank you very much, thank you.
3
4 DR. HAIDER WAS RE-EXAMINED BY MS. McNALLY AS FOLLOWS:
5
6 61 Q. MS. McNALLY: Just Dr. Haider, before you go, has your
7 opinion and reference regarding Witness B changed based
8 upon those questions that have been put to you, the
9 same question put to you numerous times?
10 A. No, no, no. 14:40
11 62 Q. Has it changed your opinion of Witness B?
12 A. No, no, it hasn't changed, because the time which I was
13 spending --
14 63 Q. I'm sorry, I can't hear you, sorry?
15 A. Can you hear me now? 14:40
16 64 Q. I can it was background noise here beside me. Sorry,
17 you were saying?
18 A. I was saying that my reference or my opinion hasn't
19 changed, because he hasn't, you know, admitted to me
20 about these things. So what I know from the time I 14:40
21 have spent with him, he -- in those, I mean, moments or
22 time, I can still say that he of a good character. But
23 I am not aware of his admittance of pleading guilty to
24 this Committee.
25 65 Q. Do you still believe he is a person who is a good 14:40
26 professional, high quality medical care, good clinical
27 knowledge, extensive knowledge?
28 A. I am just telling this that the time which I have spent
29 with him, I will still stand by all of these elements

1 of professional behaviour.

2 MS. McNALLY: Thank you, Dr. Haider. The Committee may
3 have questions for you. So if you just stay on the
4 line.

5 CHAIRPERSON: Thank you, Dr. Haider. I will ask my
6 Committee colleagues if they have any questions for
7 you.

14:41

8 MS. DEVINS: No questions, thank you.

9
10 QUESTIONING BY THE COMMITTEE:

11
12 DR. DAVIN-POWER: Just one question.

13 CHAIRPERSON: Please.

14 DR. DAVIN-POWER: Thank you, Dr. Haider, when was the
15 last time you met with witness B face-to-face?

14:41

16 A. So I think it was last year probably, probably in the
17 last quarter. In the last quarter of 2024, he came to
18 my house, and whenever he comes he stays here in my
19 house here in London.

20 DR. DAVIN-POWER: And did you have any discussion about
21 these issues that have been going on for the last --

14:42

22 A. Yeah, when you meet friends obviously there are, you
23 know, these discussions among friends, so. I mean he
24 was still, he was still quite -- in his mind he was
25 quite worried about his professional career, because he
26 is not able to pursue his medical career in terms of
27 training, you know. So we obviously talked about these
28 issues.

14:42

29 DR. DAVIN-POWER: But he didn't give you details of the

1 current issue that...

2 A. No, no, no, I mean I never probe him about these

3 issues, I mean we talked about it in general, and he

4 was a bit worried that his case was going on and he was

5 worried that he is not getting any training or he can't 14:43

6 even go and register. He wants to go to Australia to

7 further his progress, but because of his case he is

8 stuck and he can't get a good standing certificate. So

9 I mean we talked things like that, but not specifically

10 about that very case. 14:43

11 DR. DAVIN-POWER: Thank you, doctor.

12 A. Thank you very much.

13 CHAIRPERSON: Thank you, Dr. Haider. I don't have any

14 questions for you, but I just want to take this

15 opportunity to thank you for making yourself available 14:43

16 today for this Inquiry.

17 DR. HAIDER: You are most welcome.

18 CHAIRPERSON: And to take the opportunity to thank you

19 for your service in Castlebar as well and elsewhere in

20 Ireland, so thank you for that. 14:43

21 DR. HAIDER: Thank you, much appreciated, thank you

22 very much.

23 CHAIRPERSON: Take care.

24 DR. HAIDER: Thank you, bye bye.

25 14:43

26 THE WITNESS WITHDREW

27

28 CHAIRPERSON: Sorry, I should have explained,

29 Ms. McNally, we can only have two microphones on at the

1 same time. So when I am signalling to you I am just
2 telling you to turn off --

3 MS. McNALLY: Perfect.

4 CHAIRPERSON: The red indicates that you are live and
5 otherwise you are muted. 14:44

6 MS. McNALLY: Thank you. Our next reference is from --
7 actually I should read that reference into the record
8 of Dr. Haider, or will I just take it that everybody
9 has it and save...

10 CHAIRPERSON: Unless Mr. McDowell particularly likes... 14:44
11 we are happy to take it as read.

12 MS. McNALLY: Take it as read, perfect, thank you.

13 MR. McDOWELL: I wonder could it just be admitted as an
14 exhibit, I know, Chair, that you are keeping a house
15 record of the exhibits, so... 14:44

16 CHAIRPERSON: Thank you for that. Yes, of course, we
17 will accept it as a formal exhibit.

18 MS. McNALLY: Much obliged.

19 MR. McDOWELL: Or perhaps if they all went in together,
20 maybe, I think there are four written references. 14:44
21 Thank you.

22 CHAIRPERSON: Thank you.

23 MS. McNALLY: The next reference is from a
24 Dr. Sarfaraz, Dr. Ahsan Sarfaraz.

25 CHAIRPERSON: Is that witness -- 14:45

26 MS. McNALLY: They have a Teams invite.

27 CHAIRPERSON: And can you just remind me of their time
28 constraints?

29 MS. McNALLY: They said they would be available between

1 2:30 and 3-ish. I am looking at my clock here on the
2 phone and it says 2:45, so it's just a case of getting
3 him to sign in.

4 CHAIRPERSON: And obviously if you need to juggle
5 around to accommodate your witness from Kerachi I am
6 happy to hear out of order as well, so please continue. 14:45

7 MS. HORAN: Good afternoon, Dr. Sarfaraz, can you hear
8 me okay? You are just on mute. If you could just
9 unmute your microphone please.

10 DR. SARFARAZ: Yes, good afternoon, my name is Ahsan, I 14:47
11 am one of the doctors, yeah. I am just on a holiday,
12 but on the request of Witness B, I need to come and
13 join in.

14 MS. HORAN: Thank you very much. Just before you give
15 your evidence today you will need to be sworn in. So I 14:47
16 suppose just given your surroundings, you will probably
17 be better to affirm and attest. So if you could repeat
18 the following after me please.

19
20 (Dr. Ahsan Sarfaraz affirmed) 14:48

21
22 CHAIRPERSON: Dr. Sarfaraz, my name is Paul Harkin and
23 I am the Chair of this Inquiry Committee. Thank you
24 for making yourself available today.

25
26 Just to orientate you, there are three-members of the
27 Fitness to Practise Committee here today, myself, who
28 is not a medical doctor, Ms. Mary Devins, who is also
29 not a medical doctor, and Dr. Mary Davin-Power, who is

1 a medical doctor. So we are the Inquiry team. I am
2 going to hand you over immediately to Ms. McNally, who
3 is counsel for the Registrant, and she will take you
4 through your evidence. So thank you again for your
5 attendance today.

14:49

6 DR. SARFARAZ: That's no problem, it's my pleasure.
7
8
9
10
11
12
13
14
15
16
17
18
19
20
21
22
23
24
25
26
27
28
29

1 DR. AHSAN SARFARAZ, HAVING AFFIRMED, WAS DIRECTLY
2 EXAMINED BY MS. McNALLY AS FOLLOWS:
3

4 66 Q. MS. McNALLY: So Dr. Sarfaraz, my name is Maura
5 McNally, can you hear me?

14:49

6 A. I can.

7 67 Q. Okay. And you have given a reference for Witness B,
8 the Respondent, isn't that correct?

9 A. Yes, that's correct, yes, I have given a reference,
10 yeah.

14:49

11 68 Q. And it is dated 11th March 2025?

12 A. That's correct.

13 69 Q. Okay.

14 A. I did not have my laptop on me on the day, but I think
15 it was around that time, yeah.

14:49

16 70 Q. Okay. Can I ask you how long you have known him?

17 A. So I know Witness B since 2014 when we were working in
18 Wexford General Hospital. So we did a six month
19 rotation. I was doing my first one in Accident &
20 Emergency and he was in medicine. So we had frequent
21 interactions while we were working there in the
22 hospital. And then once we got to know each other, we
23 used to meet outside as well.

14:50

24 71 Q. Okay. And over the course of the last ten years, would
25 you have had much contact with him?

14:50

26 A. I think for the first few years, we did. But then I
27 had new family members, I have had three children since
28 the time I have known him, and then of course in that
29 course of period our contact got less and less. But we

1 still keep in touch, you know, over the phone and
2 inquire about each other's life.

3 72 Q. Okay. And just in respect of your reference, you have
4 stated that you have complete confidence in his
5 capabilities. Do you stand by that statement? 14:50

6 A. I do stand by that. Now, I have worked with him a long
7 time ago and, you know, we have had -- we were also
8 some period working in Dublin, but in different
9 hospitals, and we were preparing for our examinations
10 and, you know, and working with him and knowing him, I 14:51
11 have complete confidence in him --

12 73 Q. Okay.

13 A. -- and his capability as a doctor, yeah.

14 74 Q. And you say that you believed in his expertise and in
15 his empathy and in his dedication to medicine. Do you 14:51
16 still stand by that?

17 A. I still stand by that as well.

18 75 Q. Okay. And then in your reference you referred to him
19 doing some community work, could you explain to the
20 Committee what that is about? 14:51

21 A. Well, he had told me that he had been to Pakistan where
22 he was part of the, you know, the polio vaccination
23 programmes and stuff, and especially during the period
24 of time when there were [inaudible] as well that he had
25 gone and done a period of work as well. 14:52

26 76 Q. Okay. And are you aware that he married last year?

27 A. He vaguely mentioned that he got married, but I didn't
28 get into the details of it, because as I mentioned
29 that, you know, our touch had been reduced.

1 77 Q. okay.

2 A. But I definitely [inaudible - lost connection] --

3 78 Q. I think you have frozen a little there, Dr. Sarfaraz,

4 you might just have to repeat that?

5 A. Sorry, can you hear me? 14:52

6 79 Q. Yes, we can hear you. Can you hear me?

7 A. Yes, I can hear you, yeah, perfectly.

8 80 Q. You are back again. Were you aware that he was on

9 medication for anxiety and for sleep medication, were

10 you aware of that? 14:53

11 A. I did know that he was taking some anti-anxiety tablets

12 when we were studying for an examination. You know, it

13 was I think in the year 2017, if I -- I vaguely

14 remember those circumstances. I did find him very

15 stressed during that phase as well. I pretty much 14:53

16 thought that it was all examination or, you know, work

17 stress-related environment. So I do remember, yes,

18 that he was on anti-anxiety tablets at that stage,

19 yeah.

20 81 Q. Okay. And regarding your opinion of the doctor, do you 14:53

21 still stand by him as a person of good character and

22 integrity?

23 A. As far as I know him, yes, I do, yes, I have had a lot

24 of experiences with him. Like I was preparing for the

25 exam and I pretty much used to go to his home to do the 14:54

26 exam with him and, you know, he was always

27 motivational. He took his profession very serious.

28 And I had worked with him in the hospital as well and

29 the first time when we dealt with a patient, which

1 again was a long, long time ago.

2
3 But overall my experience of him has been great. He is
4 a great professional. And I think he is very
5 pleasurable, a team player, and I think I was very 14:54
6 impressed by his communication skills, the way he dealt
7 with the patients, all of our teams were slightly
8 different at that stage, because he was in medicine and
9 I was in A&E, and I would always refer him, the
10 patients for medical review. And he would come back 14:54
11 and discuss those patients with me, I think that was a
12 great, you know, way of, you know, dealing and gaining
13 medical knowledge. So it is just based on those facts
14 I say that he has had a [inaudible] in my dealing with
15 him. 14:55

16 82 Q. Okay.

17 A. Can you hear me?

18 83 Q. Yes, we can, yes. Thank you, Dr. Sarfaraz, if you just
19 answer any questions that my colleague has now.

20 A. Yeah, sure no problem. 14:55

21
22 DR. SARFARAZ WAS CROSS-EXAMINED BY MR. McDOWELL AS
23 FOLLOWS:

24
25 84 Q. MR. McDOWELL: Hello Dr. Sarfaraz, I am a lawyer acting 14:55
26 on behalf of the Chief Executive of the Medical
27 Council.

28
29 I wonder could you explain to the Committee what your

1 understanding is of the circumstances in which you are
2 giving evidence today, or that you are addressing the
3 Committee today?

4 A. So what I have been told is that there had been some
5 issue with some allegations made against witness B, and 14:55
6 it was just a reference for his character, you know,
7 and his professionalism in dealing with the patients,
8 so I am just... yeah.

9 85 Q. And what is your understanding of the status of those
10 allegations? 14:56

11 A. Witness B did not highlight to me in details. Again he
12 is someone who keeps things very to himself, but I did
13 ask him what has happened and he told me there was some
14 issues with a girl in -- a colleague where they didn't
15 get along, and allegations made against him and he 14:56
16 asked me to give his, you know, character reference for
17 this. But again I have not gone into details of what
18 has been going on in the background.

19 86 Q. Sorry, did you use the word director there?

20 A. No, no, no, his character. 14:57

21 87 Q. His character, excuse me?

22 A. Character reference.

23 88 Q. So your understanding is that there was an issue with a
24 colleague that allegations had been made against him
25 and that you have been asked to give a character 14:57
26 reference?

27 A. Reference, yes.

28 89 Q. And what is your understanding of the contents of the
29 allegations?

1 A. I am not aware of any of those things.

2 90 Q. Very good.

3 A. Of about what is going on in the background. I have --

4 it is just as a friend and as a colleague he had asked

5 for a character reference and I said, I am happy to do 14:57

6 that, but again I didn't go into details of what is

7 going on. You know, it is just purely for his

8 character that I can vouch, that he is somebody who is

9 sound and has his profession and he has a good medical

10 knowledge on the background. 14:58

11 91 Q. And did he tell you whether he accepts or disputes the

12 allegations against him?

13 A. No, he hasn't given me anything.

14 92 Q. Okay. So you are not aware then, I take it, that

15 witness B has in fact admitted to eight allegations of 14:58

16 professional misconduct?

17 A. No, I haven't.

18 93 Q. No?

19 A. He told me that he did accept a few of them, but again

20 I didn't go into the details of it. As I mentioned, it 14:58

21 was just purely a character reference that he has asked

22 me for and, therefore, I had, you know, considered it

23 for him.

24 94 Q. Yes. Your written reference is dated 11th March 2025,

25 I know you don't have it in front of you, but you are 14:58

26 aware of it?

27 A. That's correct. No, I don't, no, I am on holiday at

28 the moment.

29 95 Q. Very good. Can you remember when witness B asked you

1 to put together that reference?

2 A. I think it was the end of February, I believe, if I
3 recall properly.

4 96 Q. Yes.

5 A. It was around that time. 14:59

6 97 Q. Yes. Because as of the end of February Witness B was
7 still contesting the allegations made against him, but
8 on the morning of 11th March, which is the date of your
9 reference, he admitted all of the allegations against
10 him. 14:59

11

12 So, are you telling the Committee that prior to the
13 11th March he had asked you to provide him with a
14 character reference?

15 A. Yes. 14:59

16 98 Q. I see.

17 A. But I didn't know what was going on in the background.

18 99 Q. Very good.

19 A. You know, yeah, yeah, I just gave a character reference
20 of how much I know him, and based on the fact that I 14:59
21 have worked with him and he had been my colleague and a
22 friend. But again, as I have mentioned before, our
23 paths alleviated once I had a family. So I did not or
24 was not aware of what was going on in his life. We
25 just speak three or four times in a year -- 15:00

26 100 Q. Yes.

27 A. -- to see how things are, yeah.

28 101 Q. And did you write this character reference yourself?

29 A. I did, yes.

1 102 Q. Did anybody help you write it?
2 A. No, I wrote it myself. But, you know, I had used the
3 dictionary and chosen words for him.
4 103 Q. Yes, but did witness B look at this document before you
5 signed it? 15:01
6 A. No, he gave me his lawyer's e-mail address and it went
7 straight to them.
8 104 Q. Yes. And did his lawyers help you write this document?
9 A. No.
10 MS. McNALLY: Asked and answered. Asked and answered. 15:01
11 MR. McDOWELL: It hasn't been asked.
12 MS. McNALLY: The question has already been put.
13 A. No, I just sent the e-mail and that's it. And this is
14 the next time I am giving -- only the first time I
15 mentioned about this time. Initially I was saying I am 15:01
16 not able to attend it because I am on leisure leave at
17 the moment, but I think it was twice cancelled, it was
18 twice cancelled before. So, he requested me if I could
19 kindly come and I said okay, I will do it, just to put
20 an end to this. 15:01
21 105 Q. So Dr. Sarfaraz, I am going to read to you now the
22 first paragraph from your letter?
23 A. Sure, yeah.
24 106 Q. It says:
25
26 "I am writing this letter to offer a character
27 reference for Witness B, a highly trusted healthcare
28 professional with 15 years of experience. Throughout
29 my time knowing Witness B, I have seen an individual

1 who is not only committed to their medical profession
2 but also deeply compassionate and ethical in his
3 interactions with both patients and colleagues."
4
5 A. That's right. 15:02
6 107 Q. So you wrote those words yourself?
7 A. I did, yes.
8 108 Q. I am now going to read the first paragraph from a
9 letter from somebody else that is before the Committee,
10 another doctor, and it says the following: 15:02
11
12 "I am writing this letter to provide a character
13 reference for Witness B, who has been a trusted
14 healthcare professional for the last 15 years.
15 Throughout my association with Witness B, I have 15:02
16 witnessed a person who is not only dedicated to their
17 profession, but also deeply compassionate and ethical
18 in their interactions with patients and colleagues
19 alike."
20 15:02
21 A. Okay.
22 109 Q. would you agree with me that that paragraph is almost
23 identical to the paragraph that appeared in your
24 letter?
25 A. It does sound identical, it does sound identical, yeah. 15:02
26 110 Q. And can you offer any explanation as to why those two
27 paragraphs are identical?
28 A. I am not sure, but, as I said, most of my -- when we
29 were writing this, we do take help off, you know, the

1 [inaudible] for the character reference through the
2 computer. So I am not sure how it is very identical,
3 but this is what I had taken from the computer at the
4 time I was writing this letter for witness B.

5 111 Q. well, what do you mean when you say you took it from 15:03
6 the computer?

7 A. You know when you write or Google character references,
8 it gives you a few images that you can, you know,
9 choose as a benchmark of writing your own.

10 112 Q. I see. So you -- 15:03

11 A. It could be completely coincidental, yeah, yeah.

12 113 Q. So, I asked you had you had any assistance in writing
13 the letter and you said, no. But I think now you are
14 saying did you use, and are you saying that you used a
15 template or some document that you found on Google? 15:03

16 A. Yes, yes, on the computer, Google, yes, I had used
17 dictionaries and Google templates to put it down.

18 114 Q. And why did you not say that when I asked you earlier?
19 MS. McNALLY: well, now, Chair, the way the question
20 was put, the implicit behind the question was, was it 15:04
21 witness B who sent him the reference or the solicitor,
22 not was there help from whatever it is, the AI
23 dictionaries or whatever.

24 MR. McDOWELL: well, if that's the explanation, it's an
25 explanation that Dr. Sarfaraz has given, but
26 Ms. McNally doesn't need to come to his rescue.

27 MS. McNALLY: I am not coming to his rescue. This is
28 on the basis of he knows well the question that he put,
29 he is now trying to twist it to say that that question

1 also encapsulated whatever IT help is available on
2 computers and systems, et cetera.
3 MR. McDOWELL: I only asked why did he not say it, and
4 if that's the reason he can explain that that's why he
5 didn't say it.
6 115 Q. So, I am going to read to you another paragraph from
7 your letter, Dr. Sarfaraz.
8 A. Yes.
9 116 Q. You say at the end:
10
11 "At no point during our professional relationship have
12 I witnessed any behaviour that could be deemed
13 inappropriate or unprofessional. Witness B has always
14 maintained clear professional boundaries and ensures a
15 safe and respective environment for everyone he
16 interacts with whether in a clinical setting or
17 beyond."
18
19 Did you write those words?
20 A. I did, yes. 15:05
21 117 Q. Did anybody --
22 A. I told you I did. I have taken them from the template
23 and the dictionary. This is the first time I am giving
24 a character reference, so I did look it up. But, as I
25 said, that letter is completely written by me, and 15:05
26 neither witness B's lawyer or he himself, you know,
27 gave me any part of this.
28 118 Q. So the words I just read out, did you write them or did
29 you take them from a template?

1 A. I took them from a template, but then, you know, I
2 wanted the essence that I wanted to get across.

3 119 Q. Yes.

4 A. But of course I had taken the help of that template and
5 made sure that, you know, everything was okay. And 15:05
6 once it was completed I had forwarded it to the
7 lawyer --

8 120 Q. Yes.

9 A. -- that witness B had given me the e-mail address of.

10 121 Q. So now I am going to read to you an equivalent 15:06
11 paragraph from the other letter. It is at the end of
12 the letter, it says:
13

14 "Throughout our association I have never witnessed any
15 behaviour that could be considered inappropriate, 15:06
16 unprofessional or disrespectful. Witness B has always
17 been conscientious about maintaining boundaries and
18 creating a respectful safe environment for all those he
19 interact with whether in clinical settings or outside
20 of work." 15:06
21

22 Now, would you agree with me that that is nearly
23 identical to the paragraph that you say you wrote?

24 A. I would say, yeah.

25 122 Q. Okay. I am now going to read -- sorry, Dr. Sarfaraz, 15:06
26 go on?

27 A. No problem. I will tell you one thing that when you
28 are -- if you Google all this character references,
29 they pretty much will sound very identical, You know.

1 123 Q. Yes. And now Dr. Sarfaraz, I am going to read to you
2 from a third letter from another doctor called
3 Dr. Muhammad Ghaznain, and he says:
4
5 "Throughout my years of knowing Witness B, I found him 15:06
6 to be a highly competent professional and ethical
7 doctor. He consistently demonstrates dedication,
8 compassion and integrity in his medical practice. His
9 strong clinical skills combined with a kind and
10 empathetic approach towards patients make him a valued 15:07
11 colleagues and a trusted healthcare professional."
12
13 Now, would you agree with me that that is again nearly
14 identical to the paragraph that you wrote, and nearly
15 identical to the paragraph in the second letter that I 15:07
16 read from?
17 A. Yeah, they sound similar.
18 124 Q. But there are very small differences between them,
19 isn't that right?
20 A. There are I would say, yeah. 15:07
21 125 Q. Yes. And they didn't therefore come from the same
22 template, isn't that so?
23 A. I don't think so, but there is a possibility, I am not
24 sure. But, as I said, I am not sure whether the other
25 two references have used the same template, you pretty 15:07
26 much go with the first template that comes on. There
27 could be a possibility that the thing is... has been
28 based on that template as well.
29 MR. McDOWELL: Thank you very much, Dr. Sarfaraz. I

1 don't have any -- sorry, I didn't mean to cut you off,
2 but I don't have any other questions for you.

3
4 DR. SARFARAZ WAS RE-EXAMINED BY MS McNALLY AS FOLLOWS:

5
6 126 Q. MS. McNALLY: Sorry, Dr. Sarfaraz, just before I hand
7 you over to the Chair; you stand by everything that's
8 in this written reference that you have given to the
9 Committee?

10 A. Yes, I do, I do, yes.

15:08

11 MS. McNALLY: Thank you very much for your time,
12 Dr. Sarfaraz, I will just hand you over to the Chair.

13 A. Sure.

14 CHAIRPERSON: So I will invite my Committee colleagues
15 if they have any questions for the witness?

15:08

16 MS. DEVINS: No, thank you, Chair.

17 DR. DAVIN-POWER: No, thank you, Chair.

18 CHAIRPERSON: I have no questions either. So I just
19 want to take this opportunity, Dr. Sarfaraz, to thank
20 you for your attendance today, to thank you for your
21 clinical service in Ireland, and also to wish you well
22 on your holiday.

15:08

23 DR. SARFARAZ: Thank you so much. Thank you so much.
24 And I wish you all the very best. Take care, thank
25 you, bye bye.

15:08

26
27 THE WITNESS WITHDREW

28
29 MS. McNALLY: Chair, the next witness, if he is online,

1 is Dr. Yusuf Baig from Kerachi. And if he is not we
2 could try and telephone Dr. Ghaznain in
3 Roscommon/Sligo. He is not online. It is 15:09
4 according to my phone.

15:11

5
6 (SHORT PAUSE IN THE HEARING)

7
8 MS. McNALLY: Apparently Dr. Yusuf is trying to log in
9 if that helps in any way.

15:12

10
11 (SHORT PAUSE IN THE HEARING)

12
13 CHAIRPERSON: Just for the benefit of my Committee
14 colleagues, we are waiting for the next witness to
15 connect, so if you bear with us.

15:12

16
17 (SHORT PAUSE IN THE HEARING)

18
19 MS. HORAN: Good afternoon, doctor, can you hear me?

20 DR. BAIG: Hello, good afternoon.

15:13

21 MS. HORAN: Just before give your evidence today you
22 will need to be sworn in. If you have a holy book to
23 hand, you can swear on the holy book, or you can affirm
24 and attest.

25 DR. BAIG: I can affirm and attest.

15:13

26 MS. HORAN: Affirm and attest?

27 DR. BAIG: I am sorry, I am just having some internet
28 issues here.

29 MS. HORAN: Can you hear me?

1 DR. BAIG: Hello?
2 MS. HORAN: Hello, can you hear me?
3 DR. BAIG: Hello.
4 MS. HORAN: Hello, can you hear me now?
5 DR. BAIG: Hello. 15:14
6 MS. HORAN: Hello, can you hear me?
7 DR. BAIG: Yes, that's better.
8 MS. HORAN: If you could just repeat the following
9 after me please.
10 15:14
11 (Dr. Yusuf Baig affirmed)
12
13 CHAIRPERSON: Good evening, Dr. Baig, I believe you are
14 four hours ahead of us in Kerachi, thank you for
15 joining us today. 15:15
16
17 My name is Paul Harkin and I Chair this Inquiry
18 Committee. Also on the Committee are Ms. Mary Devins
19 and Dr. Mary Davin-Power. Ms. Devins and myself are
20 not medical practitioners, Dr. Davin-Power is a medical 15:15
21 practitioner.
22
23 So thank you again for your attendance today. I am
24 going to hand you over to Ms. McNally who can take you
25 through your evidence, but thanks for attending. 15:15
26 DR. BAIG: You're welcome.
27
28
29 DR. YUSUF BAIG, HAVING AFFIRMED, WAS DIRECTLY EXAMINED

1 BY MS. McNALLY AS FOLLOWS:

2
3 127 Q. MS. McNALLY: Dr. Yusuf, my name is Maura McNally and I
4 am here for witness B, and you have furnished a medical
5 report in respect of him, isn't that correct?

15:15

6 A. Yes.

7 128 Q. Okay.

8 A. That's correct.

9 129 Q. Sorry, pardon?

10 A. That is correct.

15:15

11 130 Q. Okay. And could I ask you firstly just to confirm your
12 qualifications, what it is you do, what it is you work
13 at?

14 A. Okay. So my full name is Dr. Yusuf Baig and my
15 qualifications are I have done my graduation, MBBS and
16 RCPS in internal medicine and RCPS in critical care
17 medicine. I work as an intensivist at the hospital
18 here, as well as I work as a general practitioner in a
19 clinic which is a medical and dental clinic.

15:16

20 131 Q. Okay. And could I ask you how long you have known
21 Witness B?

15:16

22 A. I -- that is very long time ago and probably I know him
23 from before 2016, around 2016 when he was -- but I have
24 been treating multiple members of his family as a
25 family physician before.

15:16

26 132 Q. Okay. And just in respect of your treatment of him,
27 when did that start do you recall?

28 A. To be proper, it started from 2016.

29 133 Q. Okay. And could I ask you what his presentation was

1 when he first came to you back in 2016, what were the
2 issues?

3 A. So, he was having some very unusual issues at that
4 time, he was talking very fast, he was confused, he was
5 fearful, he was waking up at night, he had jumbled 15:17
6 speech, his sound didn't make any sense and he was
7 waking up in sleep.

8 134 Q. Okay. And did you commence him on any medication back
9 then in 2016?

10 A. Yes, at that time I just gave him some anxiolytics, 15:17
11 which were a Diazepam injection and Xanax tablets.

12 135 Q. Okay. And did you see him in person or was it over the
13 phone when you first saw him in respect of that
14 Diazepam and Xanax?

15 A. That was in person, and on his family's request. 15:17

16 136 Q. Okay. And I take it obviously that he was home in
17 Pakistan at that stage?

18 A. Yes, at that time he was at home.

19 137 Q. Okay. And then your medical report refers to seeing
20 him three days later on over the phone, a consultation 15:18
21 over the phone, is that correct?

22 A. Yes, that's correct.

23 138 Q. And what was his presentation then three days later
24 after you had commenced him on the injection of
25 Diazepam and the Xanax? 15:18

26 A. He was better and he was able to give a lot of things
27 in the history at that time.

28 139 Q. And can you recall what he said to you?

29 A. Okay. So he said a lot of things about being

1 overworked at his place and he had to work unscheduled
2 hours, and he had issues that they were unethical
3 requests from his colleagues. So these were the
4 issues. That was actually a very long time ago and I
5 would have to see my medical report to confirm all of 15:19
6 these things.

7 140 Q. Yes. And did you see him every year thereafter, or
8 regularly thereafter after 2016?

9 A. Yes, almost.

10 141 Q. So how -- 15:19

11 A. There were multiple consultations where some were in
12 person and some were on phone.

13 142 Q. Okay. And if I could ask you just to -- if we take,
14 for example, 2016 to about 2019, what was his
15 presentation and how were you treating him? 15:19

16 A. So, he had non organic psychiatric symptoms and most of
17 the time he was stressed and he had this, a lot of
18 mental stress and tension at the time. And initially I
19 thought he had depression and overstressed at work, non
20 organic psychosis. 15:19

21 143 Q. Okay. And could I ask you just if we skip forward to
22 now, 2025, is he on medication now?

23 A. Yes, he is taking Venlafaxine and on and off he takes
24 anxiolytics.

25 144 Q. Okay. And what is the Venlafaxine that you mentioned, 15:20
26 what is that for?

27 A. That is for his depressive psychosis.

28 145 Q. Okay. And do I take it that he has been on that
29 medication for a while?

1 A. Yes, for a long while. If I remember correctly he is
2 on it since 2018 or '19.

3 146 Q. Okay.

4 A. I would have to check the notes again, but that's
5 around the same time. 15:20

6 147 Q. And could I ask you, when in your medical opinion did
7 you see an improvement in his symptoms, considering he
8 had been presenting to you confused and fearful,
9 jumbled words, all of that, when was there a definitive
10 improvement in his presentation? 15:20

11 A. There was a definitive improvement around the time of,
12 I think, 2022 and 2023 when he was -- the problem with
13 him was the communication and all the stress that he
14 was facing at work. And he was called again and again
15 by the Council, and this was causing lot of mental 15:21
16 stress on him. And therefore, he was having those
17 problems. So once he was -- then there was some
18 colleagues of him, the female colleague, I believe, one
19 of the Complainants, she was calling him again and
20 again. And once he was off the -- he was -- I advised 15:21
21 him not to contact her. I advised him not to the
22 listen to her phone and not to contact her, because
23 that was causing him strain. And even in between in
24 2022, there was a time when I advised him not to -- he
25 was not fit at that time for online communication and 15:22
26 fitness, but there was still contact by the authorities
27 from the Irish Medical Council and the hospital, and
28 this was all causing a burden on him.

29 148 Q. Okay.

1 A. So I think it was around 2022, once the contact was
2 somewhat disrupted, he started feeling better and he
3 was kept on regular medications, he was back in
4 Pakistan, so he had persons to take care of him.

5 149 Q. Okay. You did depression screening of him to assess 15:22
6 him for depression?

7 A. Yes.

8 150 Q. Do you recall when you did that?

9 A. The first time I did that was in -- when he was first
10 seen initially at that time. And then later on when I 15:22
11 saw him in 2018, I think.

12 151 Q. Okay. Have you been responsible for giving him
13 prescriptions throughout, prescription medication
14 throughout your dealings with him?

15 A. Most of it. I had been seeing him all this time, but 15:23
16 he has been consulting the psychiatrist as well for
17 these things.

18 152 Q. Okay. When was his last presentation to you? When did
19 you last see him?

20 A. That was last month. 15:23

21 153 Q. Last month. So March of this year?

22 A. Yes.

23 154 Q. Okay. And how did he present then in March of this
24 year?

25 A. Right now he is a lot better. He is stressed still, he 15:23
26 is still scared and fearful of what has been going on,
27 but he is a lot better now.

28 155 Q. Okay. Do you know him in any professional capacity
29 doctor to doctor?

1 A. By that what do you mean?

2 156 Q. Have you ever worked with him, working side by side
3 with him doctor to doctor?

4 A. No, I have not worked with him.

5 157 Q. Okay. And you said earlier you were dealing with his 15:24
6 familiar, I take it you are kind of the family GP and
7 you have been dealing with him himself since 2016, is
8 that correct?

9 A. I have been working as a family physician since 2012
10 maybe. 15:24

11 158 Q. Okay. Has his medication increased in quantity or has
12 it levelled out? You talked about the Venlafaxine, is
13 that an increased dosage, or is he on a steady dosage
14 in respect of your prescriptions of him?

15 A. He is on a steady dosage now. 15:24

16 159 Q. Pardon?

17 A. He is on a steady dosage now.

18 160 Q. Okay. And would it be fair to say that as long as he
19 is on his prescription medications that everything is
20 under control, would that be fair to say? 15:25

21 A. Yes, that is a serious issue, he has to take the
22 medicines probably for lifelong because of suffering
23 from repeated stress problems.

24 161 Q. Okay. Do you know anything about his medical career,
25 or do you just know about him as a patient? 15:25

26 A. During his history and conversations, he has been
27 discussing a lot of things with me as part of the
28 history taking and interviews. So I only know the
29 information that he has told me.

1 162 Q. Okay. In his most recent presentation you said he was
2 with you last March, March of 2025, is he over the
3 confusion, has he stopped speaking quickly, is his
4 speech still jumbled, or has that that all improved?
5 A. He has improved a lot. 15:26
6 163 Q. Okay.
7 A. I will tell you that all he now has are the anxiety and
8 the stress, the feeling of the stress and fear.
9 164 Q. Okay. Can you comment on what those fears are, what
10 did he say to you those fears are? 15:26
11 A. Well, he has been discussing a lot of issues. First of
12 all, to start with he had a lot of problems in the
13 first place back when he was -- in 2016 when he was
14 back in Pakistan, he had issues at work there, and he
15 mentioned a lot of things, I can recall a few of them, 15:26
16 I have mentioned a few of them in my report as well.
17
18 So one of the most important things was that he was
19 made an SHO. He was recommended as an SHO at the
20 hospital where he was working, but due to the lack of 15:27
21 registrar he was made to work as a registrar as well.
22 And one of his issues was also that the consultant
23 there could not, would not come on-call at night and he
24 was supposed to -- he was asked to cover him at night
25 as well. That is a very serious issue. And he faced a 15:27
26 lot of fears, at that time he thought that the patients
27 might die because of these things, he may cause some
28 problem.
29 And then on top of that, as per his history, he said

1 that one of the consultants, he was very rude towards
2 him. And then he used to ask him to do unethical
3 things that he said. To recall a few, he mentioned
4 that the consultant, he used to -- when he used to
5 round, there were few patients, these other patients 15:28
6 who cannot sleep or eat or drink by themselves, they
7 have very low, very low conscious level, and they are
8 in almost like a vegetative state, they are near dead.

9
10 So when the consultant finished round and when he left, 15:28
11 another consultant took over and asked him to do all of
12 the things which he thought it was unethical to change
13 the board from palliative care on a patient who is
14 about to die and start, he was asked to cannulate them
15 and give them medications and do other things. 15:28

16
17 And then when the attendance of the consultant --
18 sorry, attendance of the patients, they used to argue
19 with him, because why was the board changed. And there
20 was no one else to answer all those queries other than 15:28
21 him. He was left all alone in that regards.

22
23 And every time he was expected to do everything he was
24 asked to do, cover the medical ward, he was asked to
25 cover, I think, ICU, he was asked to do emergency; 15:29
26 according to him I think he mentioned that everyone was
27 always on leave, I don't know maternity leave or exam
28 leave, so he was made to do other people's tasks as
29 well and he was made to do tasks beyond his capacity as

1 well. Remember he was recommended as an SHO.

2
3 Then he -- so these were the starting fears. Then
4 there was some female colleague, I believe one of the
5 Complainants, who started -- taking advances towards 15:29
6 him. And when he complained about those things to the
7 higher ups, HR and his boss, they said this is -- he
8 said he got that this is a normal thing and he should
9 try to socialise. And when he did not try to
10 socialise, according to them, they started spreading 15:30
11 some malicious rumours about him which caused a lot of
12 disturbance to him.

13
14 Like for example, that he is gay, he is not capable to
15 perform sexual acts, I don't recall all of those, but 15:30
16 these were some of the things that he mentioned. And
17 he was under a lot of emotional stress at that time.

18
19 Then he also mentioned that during his last days in the
20 first hospital, his consultant made him do calls when 15:30
21 he was on medications. And when he went to his room to
22 sleep, this female colleague, she came and she started
23 doing physical advances towards him. And later --
24 again was a very serious issue, because this person, he
25 is vulnerable, he was just taking, started taking 15:31
26 medication, he was just out of psychosis, he was
27 mentally stressed. Whether he consents or not, I don't
28 think he has the capacity to consent to that.
29 whether he consents or not, that is not acceptable. He

1 is mentally, he was mentally ill at that time. Then --
2 165 Q. I will just stop you there for one second. And at the
3 time he was saying all this to you, you had made the
4 diagnosis of psychotic depression and depression.
5 A. Yes. 15:31
6 166 Q. Okay. And you had commenced him at this stage when he
7 was saying all this to you on the Diazepam and on
8 venlafaxine?
9 A. Venlafaxine was started afterwards, yes.
10 167 Q. Okay. And he reported all of this to you throughout 15:32
11 that period from 2016 to about 2019, is that correct?
12 A. Yes, many of these things were reported in the second
13 contact, which was done on the phone after the first
14 contact. And then later on in subsequent, subsequent
15 interviews he kept on telling more and more things 15:32
16 about which he was afraid.
17
18 One more thing was that when he was at the hospital,
19 when he was covering for the registrar, when he was
20 supposed to cover as a registrar, this girl used to 15:32
21 call him at night saying that there are patient issues
22 and he should come and he should hurry back, hurry to
23 the hospital, even though it was not in his schedule
24 working hours, he was asked to come. And whenever he
25 used to go to the hospital, there were no patient 15:33
26 issues and this girl consultant she wanted to have a
27 drink with him or she made -- look, there was no
28 patient issues, as such. So that caused a lot of
29 stress on him coming from somewhat of a -- you can see

1 a religious or a relatively conservative background, so
2 that caused a lot of mental strain on him.

3 168 Q. Okay. But you had him on medication at that stage --
4 A. Yes.

5 169 Q. -- both the Venlafaxine and another anxiety medication? 15:33
6 A. Even with the medication he was under stress. So for
7 psychiatric problems you have to remove the stress,
8 repeated stress would just worsen his condition.

9 170 Q. Okay. In the things he was saying to you about his
10 patients, did that indicate to you that he was 15:33
11 concerned, that he had sympathy for his patients?

12 A. Yes, he particularly I can remember he mentioned that
13 he was very concerned about some unusual medications,
14 like patients were subjected to research. Like, for
15 example, he said that there was stroke patients who 15:34
16 were given high dose blood thinner intravenously which
17 can cause brain haemorrhage and he felt very bad for
18 that because that would harm his patients. And again
19 he was also worried that his stress and his condition
20 may affect the patients as well. 15:34

21 171 Q. Okay. And does that lead you to conclude that he was
22 always worried and concerned about patients?

23 A. Yes.

24 172 Q. The zolpidem, what is zolpidem for, maybe I am not
25 pronouncing it right? 15:34

26 A. It is also an anxiolytic, there was a sedative effect.

27 173 Q. Okay. And you say he is going to be on this medication
28 lifelong?

29 A. Yes, venlafaxine and zolpidem.

1 174 Q. Are you aware that he married last year, 2024?
2 A. Married?
3 175 Q. Are you aware that he got married last year, he is now
4 a married person?
5 A. I am not aware of that. 15:35
6 176 Q. Okay. Have you scheduled to see him in the future, or
7 was it just that every time he is home he comes and
8 sees you?
9 A. I am worried about him in a way that he has been my
10 patient for very long and I would really want him to 15:35
11 follow someone continuously and regularly. He just
12 comes and goes and doesn't have enough time, although
13 he has consulted various psychiatrists, I think there
14 were three GPs involved, and I think three
15 psychiatrists involved as well, I think Ireland as 15:36
16 well. But still he needs to be put in a regular proper
17 care, properly followed that is.
18 177 Q. Sorry for one second, Dr. Yusuf, sorry.
19 A. Yes.
20 MS. McNALLY: Thank you, Dr. Yusuf, if you could answer 15:36
21 any questions that my colleague has.
22
23 DR. BAIG WAS CROSS-EXAMINED BY MR. McDOWELL AS FOLLOWS:
24
25 178 Q. MR. McDOWELL: Good afternoon, Dr. Yusuf, I am a lawyer 15:36
26 acting on behalf of the Chief Executive of the Medical
27 Council. Could you just tell the Committee what your
28 understanding is of the context in which you are
29 addressing the Committee today? So, do you know what

1 stage we are at in the process?

2 A. I am not sure about it. what sort of stage are you...

3 179 Q. Do you know why we are all in this room today talking
4 about witness B, do you know what that's about?

5 A. I am not aware of all the proceedings, I just know that 15:37
6 I have to verify my medical report.

7 180 Q. Yes, but do you know what the context is of this
8 hearing, do you know why we are discussing witness B?

9 A. I think there was some complaints against witness B,
10 yes. 15:37

11 181 Q. Yes. And what do you understand those complaints to
12 be?

13 A. There was this girl, I don't know exactly what he
14 mentioned, I have no idea regarding those complaints
15 what exactly she has done, but she has made some 15:37
16 unusual allegations, like she has claimed that he is
17 her husband, like this.

18 182 Q. So you understand that her allegation is that witness B
19 is married to her when that is not true?

20 A. No, I don't think this is true from what witness B has 15:38
21 told me.

22 183 Q. But you understand that she is alleging that they are
23 married, isn't that right?

24 A. Yeah, I think that is one of the allegations.

25 184 Q. Yes. And has witness B told you what his attitude to 15:38
26 the allegations is?

27 A. His attitude, witness B's?

28 185 Q. Yes.

29 A. So, he doesn't recall much of it. He says that this is

1 not... probably say that is not true, he said this is
2 not true, and the whole event I have narrated to you,
3 he has been afraid of this thing all this time. Afraid
4 of that girl all this time. He is concerned that she
5 is making unusual advances towards him. I don't know 15:39
6 what may be the reason, but these are the problems that
7 he has been facing.

8 186 Q. And your understanding is I think that this girl, as
9 you say, has been making sexual or romantic advances
10 towards witness B and that those are unwanted, isn't 15:39
11 that right?

12 A. The context that he has told me, they are totally
13 unwanted. For example, the time they started they were
14 done with a person who is on medication, who is
15 suffering from an illness, and the problem has been 15:39
16 ongoing for a long time. And then the advances,
17 although romantic, what you can say advances, they were
18 made in the hospital during working hours. And as per
19 witness B, she used to ask him to drink and party as
20 well when he used to come as a cover for registrar. 15:40

21 187 Q. Yes, so --

22 A. That's what he told me.

23 188 Q. So, Dr. Yusuf, I am not --

24 A. The allegations are serious. I don't expect such
25 things to happen in hospitals. 15:40

26 189 Q. Yes. So I am not going to spend a long time going
27 through the detail of that with you, Dr. Yusuf, but I
28 just want you to know that your understanding of the
29 allegations is wrong, is very seriously wrong. And

1 that if witness B told you that those are the
2 allegations, he has mislead you in a very serious way,
3 okay. Sorry, if you want to comment on that please do?
4 A. You were saying something?
5 190 Q. Sorry, so I take it then that it will surprise you to 15:40
6 learn that witness B has pleaded -- he has admitted
7 seven allegations of professional misconduct which
8 relate to harassment of a female colleague between 2016
9 and 2020. I take it that's a surprise to you to learn?
10 A. This -- the allegations made by the girl, why would 15:41
11 that be, because if you look at these --
12 191 Q. Dr. Yusuf, just listen to my question for a moment. He
13 has admitted that all those allegations are true?
14 A. No, these allegations can't be true because of the
15 causation that he has told me, what he has told me. 15:41
16 192 Q. Dr. Yusuf, just forget what he told you for a moment, I
17 am telling you now that he has told his lawyers to tell
18 the Medical Council in Ireland that everything that
19 that witness said, that female doctor said, it is all
20 true. Okay, that's the position he has now adopted. 15:41
21 And if you understand otherwise, you are incorrect,
22 okay?
23 A. Then I am telling you from what he has told me, the
24 history he has told me. And I don't think that that
25 can be correct, and I don't think that he may have 15:42
26 adopted this new statement or whatever you say, because
27 he has been subjected to continuous mental stress and
28 all these, even not over a day or two, for four years,
29 so that is very serious. This guy needed support. He

1 needed -- just because, his words as well, that just
2 because he was of a coloured race, he was non-Irish, he
3 was treated in a bad way. And from what he has
4 narrated, this seems likely true, that he was harassed
5 at work. 15:42

6 193 Q. Okay, but Dr. Yusuf, I just have to interrupt you, I am
7 sorry to interrupt you, I don't doubt for a moment that
8 witness B told you all of that, okay, I don't doubt it
9 for a moment. But I am telling you now that what he
10 told you wasn't true and he now accepts -- just listen 15:43
11 to me for a second, Dr. Yusuf, and he now accepts that
12 is wasn't true. And he accepts that he engaged in a
13 very lengthy campaign of harassment against a young
14 female doctor, okay, I want you to understand that. So
15 you don't need to say that you don't believe it or you 15:43
16 don't think it is true, I am telling you it is true,
17 and just take my word for it, okay?

18 A. Okay, but --

19 194 Q. Witness B says it is true, and I am telling you it is
20 true, okay. 15:43

21 A. No, it can't be true, because he has been subjected to
22 a lot of stress. I don't think he can admit it,
23 because this has not been one, two months, this has
24 been over a lot of years, so...

25 195 Q. But Dr. Yusuf, everything that you understand that took 15:43
26 place in Ireland is based on what witness B told you,
27 isn't that right?

28 A. Yes.

29 196 Q. Okay. And I am telling you now that he has mislead you

1 in a very serious way in relation to some very serious
2 things, okay?

3 A. If you look at the causation of everything, because in
4 law we have the rule of causation, no --

5 197 Q. Dr. Yusuf, you don't need to tell me -- you are not 15:44
6 here to talk about law. Dr. Yusuf, you are not here to
7 talk about law, okay?

8 A. No, you are right, but I am here to talk about my
9 medical report. My patient has suffered a lot of
10 mental stress which has caused him to suffer from a 15:44
11 serious illness which he will probably require lifelong
12 treatment for that. And this -- who will be answerable
13 for that? For all these problems, there was -- he
14 reported all these things to HR, he reported all these
15 things to his boss, he reported all these things to 15:44
16 inquiries. When he came back to Pakistan, the girl
17 used to phone him a lot of times and he was admitted in
18 hospital and the time he picked up those phones --

19 198 Q. Dr. Yusuf, this is a public hearing, what you are now
20 saying, I am afraid to tell you, and I don't mean to be 15:45
21 critical of you, it is simply not true, okay. Witness
22 B accepts it is not true, there is no evidence at all
23 before the Committee to validate anything that you are
24 saying, okay. Witness B has made admissions to all of
25 the allegations against him, okay, do you understand 15:45
26 that?

27 A. I don't think this can be true, but --

28 199 Q. Dr. Yusuf, can I just politely ask you to stop arguing
29 with me about that, I am telling you it is true?

1 A. I am not arguing, I am listening to you.

2 200 Q. well, I am telling you it is true, okay, he admits all
3 of it. His lawyers will tell you that themselves if
4 you ask them. There is no dispute about it, he
5 harassed a female colleague for four years and he has 15:45
6 admitted that that constitutes professional misconduct,
7 okay?

8 A. How can he harass a female if he was himself a patient,
9 he was taking medications, he was under a lot of
10 stress, he was made to subject in an environment where 15:46
11 he had no support at all, not even from his superiors.

12 201 Q. Dr. Yusuf, you don't know any of that, you don't
13 know -- all of that is just you repeating, repeating
14 what witness B has told you, isn't that right? None of
15 that, none of that falls within your direct knowledge, 15:46
16 and therefore you cannot give evidence in relation to
17 any of it, okay?

18 A. Yes, but if it was just a one time presentation I would
19 have admitted to what you are saying. It was something
20 repeated again and again, so if something was 15:46
21 definitely going on wrong there. Even when he went in
22 2019/20 during that time, the Covid era, he was asked
23 by the authorities to come because of an Inquiry. And
24 even then he was -- at that time the Covid era came and
25 he was left on the street, there was nobody to take 15:47
26 care for him.

27 202 Q. Dr. Yusuf, you have to stop now, because you are
28 talking -- Dr. Yusuf, listen to me, you have to stop
29 now because you are talking about things that you don't

1 know, you are just repeating things that somebody else
2 has told you, so you can't give that evidence. So I am
3 going to stop asking you questions now and witness B's
4 lawyers can ask you any other questions that they wish
5 to ask you if they wish? 15:47

6 A. So I am not the only doctor involved, there are three
7 GPs at the time, and their reports should also be
8 included.

9 203 Q. Dr. Yusuf, please just stop, because you are talking
10 about things that you don't know about, so please just 15:47
11 stop.
12

13 DR. BAIG WAS RE-EXAMINED BY MS. McNALLY AS FOLLOWS:
14

15 204 Q. MS. McNALLY: Dr. Yusuf, just to finish off about the 15:47
16 medication, he is going to be on this lifelong
17 medication for anxiety and depression into the future?

18 A. Yes.

19 205 Q. And you say you diagnosed that he was suffering from
20 this psychotic depression, is the phrase that you have 15:47
21 used in your medical report, you diagnosed that back in
22 2016, is that correct?

23 A. Yes.

24 206 Q. And you have also give evidence that as long as he is
25 on his medication, and keeps on his medication, to use 15:48
26 my phrase, it is not a medical phrase, everything is
27 fine once he does that?

28 A. Yes, but he has to take those medications because of
29 this.

1 207 Q. okay. But he has this condition, this psychotic
2 depression that he had, this anxiety?
3 MR. McDOWELL: Just to observe, I don't think any of
4 this arises on re-examination --
5 A. Yes.
6 MR. McDOWELL: I don't think any of this arises from my
7 cross-examination.
8 MS. McNALLY: I think it does -- sorry, in my
9 submission it does in respect of certain of the answers
10 that were given, let me get my point here. When he was 15:48
11 a patient of mine, how can he be, he was a patient, he
12 was under stress, he was under medication, so I am just
13 coming back to that. And he was under stress, let me
14 get the other phrase that I wrote down. So it is
15 arising in respect of that, and I had earlier asked 15:48
16 about his diagnosis as well, so it is just arising in
17 respect of that, so that's where it comes from. And it
18 is in the medical report.
19 CHAIRPERSON: I am happy for you to proceed.
20 208 Q. MS. McNALLY: Thank you. So you stand over your 15:49
21 medical diagnosis, Dr. Yusuf?
22 A. Yes.
23 MS. McNALLY: Thank you, Dr. Yusuf. If you just answer
24 any questions that the Chair may have for you and the
25 Committee, so don't go away yet. Thank you. 15:49
26 CHAIRPERSON: Thank you, Dr. Yusuf. Committee
27 colleagues, do you have any questions for the witness?
28
29

1 QUESTIONING BY THE COMMITTEE:

2
3 MS. DEVINS: If I may, Chairman, please?

4 CHAIRPERSON: Please.

5 MS. DEVINS: Good evening, doctor, my name is Mary
6 Devins and I am a lay person on the Committee.

15:49

7 Firstly, you are a GP, I understand, and you work in a
8 hospital as well, correct?

9 A. Yes.

10 MS. DEVINS: And is it normal for a GP to prescribe
11 what lay people would consider psychiatric drugs, or
12 are the drugs on which witness B is on, are they
13 prescribed by a psychiatrist?

15:49

14 A. So the general psychiatry is usually looked after by
15 the general physicians, and it is not -- I have not
16 referred him again and again to psychiatrists. For the
17 maintenance, that is when I, that is what I have kept
18 him on.

15:50

19 MS. DEVINS: And my second question, thank you, my
20 second question is, I think you used the phrase, if my
21 note is correct, that your patient is suffering from
22 non organic psychosis?

15:50

23 A. Yes.

24 MS. DEVINS: And you have gone on to give evidence that
25 he will be on lifelong medication. Could you explain
26 that situation to me please?

15:50

27 A. So to start with that was non organic psychosis,
28 because he is not suffering from -- initially he was
29 not suffering from any proper psychiatric disease at

1 that time. But later on he does have psychotic
2 depression, he is depressed as well, even when he is
3 severely depressed he does develop psychiatric symptoms,
4 which I have mentioned in my report.

5 MS. DEVINS: And what exactly is the medication 15:51
6 supposed to do for that, is it to relieve the
7 depression which might result in psychosis, or is it to
8 counteract any psychotic effects that might arise?

9 A. So he would have to take the medicines for lifelong,
10 and also to avoid all the stresses. So during all this 15:51
11 time he has to continuously face all the stresses, he
12 has been contacted again and again by that lady and by
13 the police as well. And even though his family -- they
14 have complained the e-mails and the calls that the girl
15 was sending him when he was in Pakistan, so even though 15:52
16 he has complained to the police there, but I believe no
17 inquiry was made, this is, I think, unacceptable.

18 MS. DEVINS: And doctor, my final question, I promise,
19 why do you believe everything your patient said to you,
20 and on which you must have taken extremely detailed 15:52
21 notes? In view of the fact that he presented to you,
22 in your own words, initially as confused, tearful,
23 suffering from sleeplessness, et cetera, why have you
24 such implicit belief in what your patient said to you?

25 A. So, as I said, the first visit, which done at his home, 15:52
26 he was not able to give the history at that time
27 properly. But subsequently when he started becoming
28 better on the medication, he recalled all those things,
29 he could narrate in a better way. And then things --

1 the issues with him kept on happening again and again.
2 And he has had multiple conversations. He has had
3 multiple consultations physically as well as on the
4 phone. That's why I believe that something serious was
5 going on and on and on, which kept on repeating.

15:53

6
7 For example, if he was a complete psychiatric patient
8 making fabrications, making up stories, the stories
9 would not be so coherent.

10
11 So, he is always talking about the same problem that he
12 has faced, and all the problems are linked to that
13 afterwards. So that stress is continuously there. And
14 I am not the only person who has been seeing him.

15
16 As I recall, and you can check the notes as well, the
17 other doctors, three other GPs and three other
18 psychiatrists have also seen him, and their reports
19 have not been included in this document. There has
20 been a psychiatrist, I think Dr [inaudible], he was
21 occupational health worker, he gave a detailed
22 recommendation about his condition. He was a
23 psychiatrist, he would be a better person than me to
24 give a recommendation on these things, so...

15:54

25 MS. DEVINS: Thank you.

15:54

26 A. Thank you.

27 CHAIRPERSON: Can I ask Dr. Davin-Power, do you have
28 any questions for the witness?

29 DR. DAVIN-POWER: I just have two questions. I suppose

1 one is concerning in that witness B reported to you
2 some unethical medical procedures being performed in
3 one of our hospitals with regard to patients who were
4 begin an IV drug, and I missed the name of that drug,
5 Dr. Yusuf, I couldn't hear it? 15:55

6 A. Yeah, so what I recall, he told me that it was Clexane
7 --

8 209 Q. Clexane?

9 A. Yes, Clexane. Usually he mentioned Clexane, in proper
10 terms, so Clexane is usually given subcutaneously, and 15:55
11 it is an anticoagulant, it is a blood thinner. Usually
12 we give it subcutaneously and they give half the dose
13 in heart attacks only. So according to witness B this
14 medication was given in full dose to the stroke
15 patients intravenously just because of some research 15:55
16 purposes.

17 DR. DAVIN-POWER: Thank you. And --

18 A. And other events as well, I don't even recall, but I
19 couldn't jot down everything that he said. I was quite
20 surprised that these things were happening in a 15:55
21 hospital.

22 DR. DAVIN-POWER: And could I ask you, do you think at
23 any stage that witness B exhibits any symptoms of a
24 paranoid psychosis? Did he exhibit any symptoms of
25 paranoia? 15:56

26 A. I don't think -- I think the proper person to ask that
27 would be a psychiatrist, but I don't think that he is
28 exhibiting paranoia.

29 DR. DAVIN-POWER: Okay, thank you very much, Dr. Yusuf.

1 A. Thank you.

2 CHAIRPERSON: Thank you, Dr. Yusuf. I think most of my
3 questions have been asked by my colleagues, but I will
4 try -- so my apologies if I repeat any of the
5 questions, but I just want to make sure that I have 15:56
6 covered everything. You are not qualified as a
7 psychiatrist, is that correct?

8 A. Yes.

9 CHAIRPERSON: The diagnosis of psychosis is your
10 diagnosis, is it? 15:56

11 A. That has been my diagnosis, and that has been confirmed
12 by other psychiatrists as well.

13 CHAIRPERSON: Confirmed by others. And have you
14 referred the doctor to other specialists?

15 A. Yes, multiple times. 15:57

16 CHAIRPERSON: Okay.

17 A. I don't understand -- he was always called back to
18 Ireland and he would not have a proper medical
19 treatment for a very long time.

20 CHAIRPERSON: Okay. You had a back and forwards with 15:57
21 Mr. McDowell where he explained to you that the
22 witness, sorry the Registrant had admitted to conduct.
23 And you were very firm in your contesting that it was
24 not possible for him to make those admissions. Do you
25 feel that he is well enough at present to make 15:57
26 admissions?

27 A. Such admissions.

28 CHAIRPERSON: Any -- is he currently in a state where
29 he can make decisions for himself or act rationally and

1 give instructions to his counsel, would you say?

2 A. I think the proper person to answer that would be a

3 psychiatrist.

4 CHAIRPERSON: Okay.

5 A. But I don't see any reason that he can not make proper 15:58

6 decisions.

7 CHAIRPERSON: Okay, you have no reason to believe he

8 can't make proper decisions. So when he makes

9 admissions, does that change your opinion of your

10 history taking to date. 15:58

11 A. Sorry, I cannot understand what you are saying.

12 CHAIRPERSON: So this is a Fitness to Practise Inquiry,

13 so our only concern is whether this doctor is fit to

14 practise medicine in Ireland. Some serious allegations

15 have been put forward against him, and he has made 15:58

16 admissions as to fact that those did actually take

17 place.

18 A. So far I have not seen him, not anything. The sort of

19 which you are talking about, I have not seen it, but I

20 think the proper person to judge that would be a 15:58

21 psychiatrist. He is capable of making decisions, but

22 this proper decision lies with a psychiatrist. He

23 recalls almost everything correctly when he says, I

24 don't see any loss of memory or any problems with

25 recollection, so that's what I have. 15:59

26 CHAIRPERSON: Very good.

27 A. Got from him.

28 CHAIRPERSON: Thanks excellent, thank you very much,

29 and that concords with how he has presented to this

1 Inquiry, he has been clear and consistent. So that's
2 what I wanted to just reassure myself.

3
4 You have said several times that it can't possibly be
5 true, because you are basing your assessment based on 15:59
6 information that the doctor has told you. Can you
7 conceive of the possibility that what he told you was
8 not correct?

9 A. Still I would say I cannot conceive that because I have
10 seen the medical notes that I sent; they mention 15:59
11 multiple contacts with multiple doctors as well, and he
12 has seen multiple doctors as well, there are a lot of
13 witnesses to these events, for example, at Covid era
14 when he was stranded there. His cousin -- his
15 caretaker had to call his cousin and he had to travel 16:00
16 back to Pakistan. He had to arrange a travel back to
17 Pakistan when he was ill and nobody to take care of
18 him. So those people can also affirm these things.

19
20 Then if his colleagues can confirm it, there are -- I 16:00
21 am not the only person who has been looking after him.
22 CHAIRPERSON: No, I understand that, that's very
23 helpful, but you are here today to give advice on your
24 medical treatment of him. And in case I forget to say,
25 thank you for your care to the doctor over the last 16:00
26 number of the years. You didn't at any stage, am I
27 correct in saying, you didn't at any stage conclude
28 that he was delusional or paranoid in any way?

29 A. No, I have never seen any delusion or paranoia from

1 him.

2 CHAIRPERSON: Are you qualified to make such a

3 conclusion, if he did exhibit delusional behaviour, do

4 you think?

5 A. Again I would say that the exact proper assessment lies 16:01

6 with the psychiatrist.

7 CHAIRPERSON: I get that. I understand that. But you

8 didn't make that conclusion, you feel that he is

9 coherent and consistent in his presentation to you?

10 A. What I have screened, I have screened him for 16:01

11 delusional thoughts and hallucination and all these

12 organic psychosis problems. And in all my screening he

13 never exhibited those problems.

14 CHAIRPERSON: That's perfect, thank you very much,

15 that's very clear. I will just ask the two counsels if 16:01

16 there are any matters that arise? No, no matter

17 arises.

18

19 So I just want to thank you again for your attendance

20 and your participation in this Inquiry. And also, as I 16:01

21 said, thank you for your care to the doctor over the

22 last number of years. You can disconnect now. Thank

23 you.

24 DR. BAIG: Thank you.

25 16:02

26 THE WITNESS WITHDREW

27

28 MS. McNALLY: The next witness is Dr. Ghaznain, this is

29 the final doctor.

1 CHAIRPERSON: This is the doctor who is connecting from
2 Sligo.

3 MS. McNALLY: Roscommon/Sligo, he lives in Sligo, he is
4 French Park Medical Centre in Roscommon.

5 CHAIRPERSON: And is he available now? 16:02

6 MS. McNALLY: 4 o'clock is what he had said. My clock
7 says two minutes past four, but I will be guided by
8 you.

9 CHAIRPERSON: would it be possible to take a
10 five-minute break and give the Executive a chance to 16:02
11 connect him. We will just take five minutes. Thank
12 you.

13

14 THE HEARING ADJOURNED BRIEFLY AND RESUMED AS FOLLOWS:

15 16:11

16 MS. HORAN: Just before you give your evidence this
17 afternoon, you will need to be sworn in. If you have a
18 holy book to hand, you can swear on the holy book or
19 you can affirm and attest.

20 DR. GHAZNAIN: I can affirm and attest. 16:12

21

22 (Dr. Mohd Ghaznain affirmed)

23

24 CHAIRPERSON: Dr. Ghaznain, my name is Paul Harkin, I
25 chair this Inquiry Committee. First of all -- 16:12

26 DR. GHAZNAIN: Hi.

27 CHAIRPERSON: I would like to welcome you here today
28 and thank you for your attendance. Other members of
29 the Committee you will see on screen include Ms. Mary

1 Devins and Dr. Mary Davin-Power. Myself and Ms. Devins
2 are not medical practitioners, Dr. Davin-Power is a
3 medical practitioner. So together the three of us form
4 this Fitness to Practise Committee.

5
6 I am going to hand you over now to Ms. McNally, counsel
7 for the Registrant, who will take you through your
8 evidence. So once again thank you for your attendance
9 today.

10 DR. GHAZNAIN: Thank you so much.

16:13

1 DR. MOHD GHAZNAIN, HAVING AFFIRMED, WAS DIRECTLY
2 EXAMINED BY MS. McNALLY AS FOLLOWS:
3

4 MS. McNALLY: Dr. Ghaznain, my name is Maura McNally, I
5 am representing Witness B. You are a GP at French Park 16:13
6 Medical Centre in Co. Roscommon, is that correct?

7 A. Yes, I am, yeah.

8 210 Q. And I gather you live in Sligo, is that correct?

9 A. Yes, I do, yeah.

10 211 Q. And how long have you known the doctor, could I ask 16:13
11 you?

12 A. So I know Witness B for like 12 years now.

13 212 Q. 12 years. And where did you meet?

14 A. So, like, I was working in Mayo General Hospital in
15 Castlebar, so he was my colleague over there for a 16:13
16 couple of years, and then I moved to Tullamore, so I --
17 like, you can say I met there for the first time over
18 there, back in 2014.

19 213 Q. Okay. And what has your contact with him been over the
20 last decade, or 12 years rather? 16:14

21 A. So, like, you know, honestly speaking, like, he is like
22 very courteous, very honest, a respectful person. And
23 as a team, like, when we were working he was good, he
24 was very professional and very empathetic towards
25 patients and also very responsible for his duties and 16:14
26 very caring and, like, you know, he was always
27 punctual. And in terms of patient care he was very
28 efficient and very professional.

29 214 Q. Okay. And just in respect of your dealings with him,

1 we will say over the last year, do you still come
2 across him regularly?

3 A. Yes, I do, like, you know, because I know him for long
4 and then we also worked together in Tullamore. So
5 after that, like, I went to Cork, like, he was working 16:15
6 nearby. And now he is doing locums here and there and
7 so, you know, I am in contact with him for, like, you
8 know, since then.

9 215 Q. Okay. So, would you meet him regularly, would you meet
10 him every month or telephone him every month? 16:15

11 A. You could say that, you know, maybe at least a
12 telephone, because we are busy. But if he is working
13 around somewhere near Sligo, he would come over to see
14 me.

15 216 Q. Okay. And in your reference you describe him as 16:15
16 honest, respectful and dependable. Do you still stand
17 by that?

18 A. Yes, I do, yeah, yeah.

19 217 Q. Okay. And you felt that he had the highest standards
20 of professionalism, and that you would recommend him 16:16
21 for any position of responsibility. Do you still stand
22 by that?

23 A. I do, yes, definitely.

24 218 Q. And you also said -- oh sorry?

25 A. Yeah, I always like found him very professional and 16:16
26 very compassionate towards his work, and he is a proper
27 responsible doctor that we expect for someone to be our
28 doctor --

29 219 Q. Okay.

1 A. -- in simple words.

2 220 Q. And you say:

3

4 "He has strong clinical skills combined with a kind and
5 empathetic approach to patients."

16:16

6

7 Do you stand by that?

8 A. Yes, I do. So, like, let's say if, you know, as a team

9 if you are working together and the patient's needs for

10 some urgent issue, he was always here, because we carry 16:16

11 the bleep for our, like, if we are not around that

12 specific part of the hospital, and the nurses, you

13 know, bleep us like for the response. And that means

14 that there is something urgent going on. So he

15 always -- I found him always, you know, very, you know, 16:17

16 prompt response to his duties. And when it comes to

17 the patient care, he always showed a good attitude,

18 very caring attitude, very empathetic. And in between

19 the team members he has been always very professional

20 and very kind. So, anything else like? 16:17

21 MS. McNALLY: No, I am going to ask you to answer any

22 questions that my colleague has, and your reference is

23 going in as part of the exhibits, so thank you,

24 Dr. Ghaznain

25

16:17

26 DR. GHAZNAIN WAS CROSS-EXAMINED BY MR. McDOWELL AS

27 FOLLOWS:

28

29 221 Q. MR. McDOWELL: Dr. Ghaznain, I am a lawyer acting on

1 behalf of the Chief Executive of the Medical Council.
2 Can I ask you, when did you write this reference for
3 Witness B?
4 A. I don't exactly know the date, but it could be like a
5 month roughly. 16:18
6 222 Q. A month ago?
7 A. Yeah.
8 223 Q. And did you write it yourself?
9 A. Oh, yes, yes.
10 224 Q. Did you receive any help from anybody? 16:18
11 A. No, no, no, whatever, you know, I could think of, I
12 just wrote.
13 225 Q. Yeah. And did you -- did Witness B's lawyers help you
14 write this document?
15 A. No, no. 16:18
16 226 Q. Did Witness B help you write the document?
17 A. No, no, no, no.
18 227 Q. Did you rely on any templates or anything like that for
19 professional references?
20 A. Not really, I just found like when I was asked just 16:18
21 about his, you know, professionalism and being a doctor
22 and being an individual, how I find him.
23 228 Q. Yes.
24 A. So I just wrote whatever, you know, I could, maybe I
25 could have written more, maybe but this is what I... 16:19
26 229 Q. Yes, but these words are all your own words, is that
27 right?
28 A. Oh, yes, yes.
29 230 Q. Because the words you use at certain passages in your

1 report are nearly identical to the words used by other
2 witnesses in their written references for Witness B.
3 Can you explain that?

4 A. Okay. So what happened actually, you know, because
5 when we write a reference for anyone, sometimes, like, 16:19
6 you know we use technical words that would help to get
7 a job for the other doctor. So probably that would be
8 one reason. Like for instance, if I say Witness B is
9 honest, it means like, do you know, if he makes any
10 mistake in the treatment of a patient, he would agree 16:19
11 like he could accept his mistake and he will promptly,
12 you know, talk to the team or his coordinators. And if
13 I say he is respectful, like, it means he is courteous.
14 And we always use these technical words, do you know
15 what I mean. Like if we want to give a reference to 16:20
16 any of our junior colleagues, for instance, if he wants
17 to, you know, seek a job, like. So maybe that would be
18 one reason, but I don't know.

19 231 Q. But that's the only explanation you can offer as to why
20 there are parts of your reference that are almost 16:20
21 identical to paragraphs from two other references that
22 are before the Committee?

23 A. I can't comment on other references.

24 232 Q. Very good, but your evidence is that you wrote all of
25 this yourself? 16:20

26 A. Yes, I did, like, you know. I mean I wrote like, I can
27 see one second, I can open that. So if I say:
28
29 "I am pleased to provide this character reference for

1 Witness B, for whom I have worked professionally and
2 personally for 12 years."

3
4 That's a fact. My name is there, a GP, and I first met
5 him there and we moved there:

16:21

6
7 "Throughout my years of knowing him, I found him to be
8 very highly competent, professional and ethical
9 doctor."

10
11 So these are, like -- I don't see anything like that
12 that could not be duplicated for some reason, but I can
13 only tell like, I would write these words to anyone who
14 wants, you know, the reference for the job or just you
15 know their character as well.

16:21

16 233 Q. Dr. Ghaznain, what is your understanding of the context
17 in which you are addressing the Committee today?

18 A. This means like, you know, I am just giving the
19 reference for his character, what I found him as a
20 professional.

16:21

21 234 Q. But do you understand why we are all in this room
22 discussing him?

23 A. So I know he has some issue like going on, like, there
24 was some issue, but I was not there when that happened.

25 235 Q. And what is your understanding of the issue?

16:22

26 A. So my understanding of the issue is that there was
27 some -- like, you know, he has some issues with his
28 colleague when he was working in the hospital, and he
29 tried to text or something and then things got

1 aggravated, and then that specific colleague went to
2 guards or IMC.

3 236 Q. Yes, and what is your understanding of witness B's
4 attitude to those allegations?

5 A. So like when we asked, like, if you have any mistake, I 16:22
6 will be honest like, you know, maybe, you know,
7 apologise if you have done anything wrong, this is what
8 we normally would do, because everyone can commit a
9 mistake, like, something that, you know, any other
10 person won't like, so the best thing is to say sorry. 16:23
11 That was my prompt response. And this is what I think,
12 like, you know, that things got escalated. And after
13 that even when I was telling him, like, you know, if he
14 has done anything wrong he should say sorry and just
15 try to, you know, not to escalate things. 16:23

16 237 Q. Yeah, so that's what you said to him. But what do you
17 understand his attitude to the allegations to be?

18 A. Now, like, you know, I don't know, he said yes, I will
19 do that, but he -- I know that, you know, we are all,
20 his friends, if I talk about his friends, all of them 16:23
21 are married, they have their own families and they
22 live, and he was living alone. So maybe his mental
23 health was not optimal, I would say, and probably he
24 just kept it to himself and that also elevated the
25 problems. 16:24

26 238 Q. And do you have any further -- do you have any further
27 detail in your understanding of the allegations other
28 than that there was an issue with a colleague and that
29 he sent some texts, is there anything else that you

1 know about it?

2 A. This is what I know that he sent some texts and that

3 specific person talked to the, you know, the

4 authorities, like the Gardai, the hospital, and he

5 apologised, but probably he's texted again and then the 16:24

6 things got aggravated.

7 239 Q. Do you know what was in the texts?

8 A. I don't know.

9 240 Q. Is there anything else you know about the allegations?

10 A. No, because I was not there in Mayo Hospital when it 16:24

11 happened.

12 241 Q. Yes. But has witness B told you anything about else

13 about the allegations?

14 A. He just simply said, this is what I did, I didn't do

15 anything else. And I said, okay, if you just texted 16:24

16 please say sorry.

17 MR. McDOWELL: Yes. Okay, thank you very much,

18 Dr. Ghaznain, I have no further questions.

19 CHAIRPERSON: Ms. McNally, do you have any follow-up

20 questions? 16:25

21 MS. McNALLY: No, I have no further questions, thank

22 you.

23 CHAIRPERSON: Committee colleagues, do you have any

24 questions for the witness?

25 MS. DEVINS: No, thank you, Chair. 16:25

26

27 QUESTIONING BY THE COMMITTEE:

28

29 DR. DAVIN-POWER: Yes, Chair, if I may ask a question?

1 CHAIRPERSON: Please do.

2 DR. DAVIN-POWER: Thank you, doctor. I just want to
3 get a better sense of how well you know witness B.
4 When, for instance, would be the last time that you met
5 him face-to-face have been? 16:25

6 A. Last week.

7 DR. DAVIN-POWER: And how often would you meet him
8 face-to-face?

9 A. Once a month, or -- it could be sometimes, you know,
10 like, I use his car, or sometimes, you know, you 16:25
11 interact with your friends if you need something or you
12 want to see them, you just want to say hello, so we,
13 you know, meet or, you know, I am in contact.

14 DR. DAVIN-POWER: And over the last while that you have
15 known him, have you had any concerns about his health? 16:26

16 A. I think, like, he [inaudible] obviously maybe due to
17 the current issue as well, but when it first happened I
18 was not -- when I first met him, he was totally fine,
19 like, you know, a typical normal funny guy, but later
20 on I realised that his friend that is from his own 16:26
21 medical school, he got married and he started living
22 alone, middle of, you know, nowhere, he had a no one
23 living around, so like there were all farms and no
24 house around. So then that rang a bell, I said, look,
25 please, witness B, I think you need to live near 16:26
26 people, because I was working in Tullamore at that
27 time. I told him at least live in the town, it is not
28 good for your health, you are living alone. That was
29 the first time I noticed that his mental health is not

1 great. But, you know, there are a few personal things
2 nobody should want to share, or this is what I would
3 tell him sometime, you know, you cannot jump into some
4 other shoe like if they don't want to. But I know that
5 since 2016, he had some mental issues and he kept it to 16:27
6 himself and they were not addressed at that time.
7 DR. DAVIN-POWER: And to your knowledge does he have a
8 partner or a wife at the moment?
9 A. You know, he just -- maybe when he was in Pakistan, he
10 was probably getting married, it was in the past, but 16:27
11 if I say, like, a year ago, he didn't have any partner.
12 DR. DAVIN-POWER: But you are not sure if he is married
13 now?
14 A. He is married now, like, ceremonially, but I think wife
15 is not here. 16:28
16 DR. DAVIN-POWER: Oh I see, okay, thank you, doctor.
17 DR. GHAZNAIN: Okay, thank you.
18 CHAIRPERSON: Thank you, Dr. Ghaznain. My question to
19 you is, you said in your reference that the Registrant
20 displayed high standards of professionalism? 16:28
21 A. Mm-hmm.
22 CHAIRPERSON: He has admitted to conduct, very serious
23 allegations of misconduct?
24 A. I understand.
25 CHAIRPERSON: If a doctor made such admissions and 16:28
26 behaved in such a manner to a colleague who was more
27 junior than him, would you still say that that exhibits
28 high standards of professionalism?
29 CHAIRPERSON: From my knowledge, you know, when I

1 interacted with him for the first time back in 2014,
2 that was my understanding of that time, number one.
3 Number two, when I met him again in Tullamore, the
4 issue was resolved at that time, but there were
5 obviously, you know, working in that environment, we 16:29
6 work with male and female colleagues. So again he was
7 totally fine. I never, you know, found anything that
8 he is not respectful to any of his colleagues, male or
9 female. And then I never heard like somebody, you
10 know, complaining at that time as well. 16:29

11
12 After that, like, if I see him individually apart from
13 only that specific, you know, incident, he never, like,
14 you know, he always has been very respectful.

15 CHAIRPERSON: Thank you. 16:29

16 A. So, like, let's say, you know, I am married, so I have
17 my wife, and if let's say it is getting late and he
18 wants to stay at my place, I won't be like
19 uncomfortable or something like, he is not that kind of
20 person that I won't allow him to meet my family. 16:30

21 CHAIRPERSON: Okay, thank you very much. I want to
22 just take this opportunity to thank you for your
23 service here in Ireland and to wish you well. And once
24 again, thank you for participating in today's Inquiry.

25 DR. GHAZNAIN: Thank you so much. Thank you. 16:30

26
27 THE WITNESS WITHDREW

28
29 CHAIRPERSON: So at this point I am going to invite

1 Mr. McGuinness to give the Committee some advice on the
2 evidence that we have just heard, so thank you.

3
4 LEGAL ADVICE BY MR. MCGUINNESS:

5
6 MR. MCGUINNESS: Thank you, Chairman. My advice at
7 present is limited to the evidential aspects of the
8 evidence that the Committee has heard this afternoon,
9 and it has heard obviously viva voce on affirmation
10 from the various doctors, and they have identified that 16:30
11 they have produced the reports, and the reports have
12 been admitted into evidence as exhibits by consent of
13 the parties, as I understand it.

14
15 And my advice is simply limited to the evidential 16:31
16 issues concerning those reports. They are of course
17 admissible as evidence of the reports that the doctors
18 have made, and they have identified those reports, and
19 in general terms the dates upon which they were signed.

20
21 Obviously an issue was raised in relation to the method
22 or mode by which they were composed, and that's an
23 issue, or may not be an issue for the Committee, and
24 the Committee will no doubt hear any submissions in
25 relation to those. 16:31

26
27 My advice is limited to the content of the reports,
28 insofar as it retails or relates or encloses or
29 encompasses information given to the doctors. And my

1 advice to the Committee in relation to that portion of
2 the reports is that anything related to the doctors by
3 a patient is, as far as the product of the report is
4 concerned, hearsay evidence, as far as the Committee is
5 concerned, because the admission of the reports does 16:32
6 not make what is related to the doctor evidence of the
7 truth of the contents of what is reported by the
8 doctor. And I think it is illustrated by the evidence
9 of the doctor who gave evidence and was cross-examined
10 about what he had recorded from his patient. 16:32

11
12 He admitted, as is the case with all doctors, that they
13 are dependent and necessarily dependent upon the
14 history that they take from their patient, and the
15 recording of the history doesn't prove the truth of the 16:33
16 history, and that's the essence of the advice.

17
18 Insofar as it may be relevant to other matters, it is a
19 matter for the Committee to consider whether any of the
20 recorded matters are relevant to the actions of the 16:33
21 parties of any particular stage. And that's a matter
22 that there may be submissions on, and I don't want to
23 say anything further at this point, other than to make
24 that simple evidential point that the matters recorded
25 as having been said by the patient to the doctor is not 16:33
26 proof of the truth of the contents of any of those
27 matters.

28 CHAIRPERSON: Thank you, Mr. McGuinness. Any matter
29 arise or any comment?

1 MR. McDOWELL: No, thank you.

2 MS. McNALLY: No.

3 CHAIRPERSON: Thank you. So we are now at 16:34 on my
4 clock. Can I ask your positions for the rest of today,
5 are you in a position to make submissions in respect of 16:34
6 sanction?

7 MR. McDOWELL: I am Chair, yes.

8 CHAIRPERSON: Can I ask how long you think you will
9 need?

10 MR. McDOWELL: I will certainly be less than half an 16:34
11 hour.

12 CHAIRPERSON: And Ms. McNally?

13 MS. McNALLY: I will be very short, but I have to be
14 honest I have to be out of here by half five.

15 CHAIRPERSON: You have to be out at half five, okay. 16:34

16 MR. McDOWELL: We will do that.

17 CHAIRPERSON: Well, then why don't we try and aim for
18 that. Thank you.

19

20 CLOSING SUBMISSION BY MR. McDOWELL: 16:34

21

22 MR. McDOWELL: Because of Ms. McNally's position I will
23 be as quick as I can, Chair.

24

25 So under section 69, following the conclusion of a 16:34
26 report of an Inquiry by the Fitness to Practise
27 Committee, it shall make a report to the Council
28 setting out certain matters, including the nature of
29 the complaint, the evidence presented, findings that

1 were found to be proven, undertakings and any other
2 matters that relate to the registered medical
3 practitioner, the subject of the complaint.
4

5 I think in the ordinary course, a Committee such as 16:35
6 this would usually include with it a recommendation as
7 to sanction, and that's proper, because unlike the
8 Council you have the benefit of being close to the
9 Inquiry and having heard all the evidence, and you
10 necessarily have a fuller understanding of the case 16:35
11 than the Council will have when it comes to deliberate
12 on the question of sanction. So, in that sense your
13 recommendation is important.
14

15 In my submissions I am going to talk briefly about the 16:35
16 approach that the Committee ought to take to the
17 question of sanction, and that's by reference to the
18 Medical Council's own sanctions guidance document.
19

20 I am going to discuss the Inquiry and certain aspects 16:35
21 of it which I say are relevant to the Committee's
22 decision on sanction.
23

24 And at the conclusion of that, I am going to suggest
25 that when you look at the sanctions guidance documents 16:35
26 and the facts of this case and the manner in which the
27 Inquiry has unfolded, the only appropriate sanction
28 that the Committee can recommend to the Council is the
29 cancellation of witness B's registration.

1 So, under Section 71, the types of sanction that are
2 available to the Council are set out. Those are
3 advice, admonishment or censure, a censure in writing
4 and a fine not exceeding €5,000, the attachment of
5 conditions to a practitioner's registration, the
6 transfer of a practitioner's registration to another
7 division, the suspension of the practitioner's
8 registration, cancellation of the practitioner's
9 registration or a prohibition from applying for
10 restoration of registration for a period of time.

16:36

16:36

11
12 The purpose of sanction is set out in the sanctions
13 guidance document at Section 2, and the Council's
14 primary objective in imposing sanction is to act in the
15 public interests. The public's interest, and that
16 includes protecting the public, promoting and
17 maintaining of public confidence in the profession and
18 the regulatory process. And promoting and upholding
19 professional standards and conduct.

16:36

20
21 Sanctions may be imposed by the Council to deter a
22 medical practitioner from carrying out a similar act or
23 omission, again to demonstrate professional standards
24 and conduct expected of medical practitioners, and to
25 demonstrate to the medical practitioner and the
26 profession the seriousness of a matter.

16:37

27
28 Although the purpose of imposing sanction is not to
29 punish a practitioner, certain sanctions may

1 nonetheless have a punitive effect. This does not mean
2 that sanctions should not be imposed if the imposition
3 of the sanction is required to act in the public
4 interest.

5
6 And when considering the appropriate sanction to
7 impose, the Council may take into account the wider
8 concern of the reputation of the profession over the
9 interests of the particular medical practitioner.

10
11 The Committee will also be familiar with the concept of
12 proportionality and leniency. So, proportionality
13 requires that any sanction you impose is proportionate
14 to the wrongdoing in the case. And leniency requires
15 that you impose as lenient a sanction as is reasonably
16 available to you on the facts of a given case.

17 Sometimes that manifests, that approach manifests
18 itself in what's called the step approach, where you
19 start with the least severe sanction and work your way
20 upwards in terms of severity until you reach the
21 sanction which you regard as being appropriate and
22 proportionate to the wrongdoing involved.

23
24 Committee members, the Council's sanction guidance
25 document sets out certain mitigating and aggravating
26 circumstances, which the Council can have regard in
27 imposing a sanction. Those begin at page 7 of the
28 document, and I am going to draw a couple of those to
29 your attention now and then I am going to return to

1 them in the course of my submissions later.

2
3 And the Committee will appreciate that in many cases,
4 mitigating and aggravating factors are two sides of the
5 same coin. So, the absence of a mitigating factor can
6 be seen as the presence of an aggravating factor and
7 vice versa.

16:38

8
9 So some mitigating factors that are set out are the
10 question of insight at 6.1, remediation at 6.2,
11 cooperation at 6.3. And then at 6.8, the issue of
12 references and testimonials is addressed. And you will
13 see at 6.8 it says:

16:38

14
15 "When reviewing such information, the Council should
16 consider:

16:39

17 6.8.1.1 how the author knows the medical practitioner;
18 6.8.1.2 whether the author is aware of the events
19 leading to the findings made by the FTPC, including the
20 extent of the author's knowledge about the findings and
21 the source of their knowledge;

22 6.8.1.3 how recently the author has worked with, or has
23 been in contact with, the medical practitioner;

24 6.8.1.4 the date on which the reference or testimonial
25 was provided or made;

26 6.8.1.5 whether it specifies the author's contact
27 details, including, as relevant, the author's role/work
28 position and place of employment;

29 6.8.1.6 whether the reference or testimonial has been

1 independently verified; and
2 6.8.1.7 whether there is any conflict of interest."

3
4 So just to address the question of the references and
5 testimonials that you have heard today. Some of those 16:39
6 factors obviously don't arise because the referees have
7 attended to give evidence under oath in relation to
8 Witness B.

9
10 But the first observation to make is that although they 16:39
11 seem to have known Witness B personally, their
12 professional interactions with him have been limited
13 and took place quite a long time ago, and for the most
14 part pre-dated the wrongdoing that has been admitted in
15 this Inquiry. So that's the first point to make. 16:40

16
17 I think that were the circumstances different, I would
18 make a much bigger point about the stark similarities
19 that existed between three of the references and the
20 inconsistent, incomplete and somewhat unsatisfactory 16:40
21 explanations that were given to the Committee as to how
22 those similarities arose.

23
24 But I don't actually think that that issue needs to be
25 addressed by the Committee, because a critical factor 16:40
26 in determining the weight to be attached to a reference
27 is whether the author is aware of the events leading to
28 the findings made by the FTPC.

1 And in this case it is very clear that the authors
2 either knew next to nothing about the allegations, or
3 at best had a very vague idea that the allegations
4 concerned an interpersonal issue between Witness A and
5 Witness B, and perhaps a question of text messages.

16:41

6
7 I think of the four witnesses you heard from, three of
8 them were not aware that Witness B had admitted all of
9 the allegations of misconduct against him. And
10 therefore it is clear that really the referees gave
11 their references entirely divorced from the context in
12 which they were being asked to do that, and with no
13 idea as to the nature of Witness B's admitted
14 wrongdoing in this case.

16:41

15
16 And in those circumstances, I would invite the
17 Committee to attach no weight at all to what they said
18 about Witness B's professionalism, his professional
19 performance, his approach as a doctor and their
20 experience of him, because when they uttered those
21 words none of them knew what Witness B had done in this
22 case and the admissions that he had made, and therefore
23 the references really count for very little, if
24 anything.

16:41

16:41

25
26 Then in relation to aggravating factors at Section 7,
27 you will see at 7.1, a lack of insight is stated to be
28 an aggravating factor, it says:
29

16:41

1 "A medical practitioner is likely to lack insight where
2 the practitioner refuses to accept their mistakes or
3 apologise, does not provide any evidence of attempts to
4 remediate or only does so immediately before or during
5 the hearing, does not adequately or appropriately
6 engage with the investigation or inquiry process, or
7 does not show the timely development of insight."
8

9 Then on page 11, you will see at 7.4:

10
11 "Cases requiring more serious action.
12

13 7.4.1 There are certain cases which, by their nature,
14 are considered more serious when balanced against the
15 public interest, and therefore may lead the Council to
16 impose a more severe level of sanctions.
17

18 "7.4.2 Cases requiring more serious action may contain
19 one or more of the following aggravating factors and
20 are considered in more detail in section 9 below."
21

22 And you will see at 7.4.2.3 that sexual misconduct is
23 one of those. And in my respectful submission this
24 case is a case which involves a type of sexual
25 misconduct.
26

16:42

27 Then if I could ask the Committee to look at --

28 MS. McNALLY: I wonder, it is probably a little late to
29 ask for the document to be shared, but I don't seem to

1 be able to pull it up.

2 MR. McDOWELL: I am very sorry about that.

3 CHAIRPERSON: I can give Ms. McNally my copy. I am

4 very familiar with the guidance document.

5 MS. McNALLY: As long as you don't mind my marking it 16:43

6 as I go through it.

7 CHAIRPERSON: Please do.

8 MS. McNALLY: Perfect, it means you may not get it

9 back. Thank you.

10 CHAIRPERSON: I know you are under time pressure, but 16:43

11 obviously there will an opportunity to make more formal

12 submissions to Council based on our recommendation. So

13 I would advise that that document is perhaps the most

14 helpful place to start in making those submissions,

15 because the Council will have reference to that same 16:43

16 guidance.

17 MR. McDOWELL: Then, Chair, at page 17, under heading

18 8.6, so this deals with where cancellation of a medical

19 practitioner's registration might be appropriate. It

20 says: 16:43

21

22 "Cancellation of a medical practitioner's registration

23 is the most serious sanction that can be imposed. The

24 imposition of this sanction means that the medical

25 practitioner's name will be removed from the register

26 and will not be allowed to work as a medical

27 practitioner in Ireland."

28

29 And then at 8.6.2 is sets out certain examples of where

1 that might be the appropriate sanction. And you will
2 see at 8.6.2.5, that is where there are offences of a
3 sexual nature.

4
5 Then at Section 9.3 on page 20, you will see the
6 heading, under the heading "sexual misconduct", it
7 says:

16:44

8
9 "Sexual misconduct encompasses a broad range of conduct
10 and may include sexual assault, sexual abuse of
11 children, accessing or possessing child pornography, or
12 pursuing or forming a sexual or inappropriate
13 relationship with a patient or with someone close to
14 them. Sexual assault also includes unnecessary or
15 non-consensual physical examination of patients.

16
17 "Sexual misconduct often results in serious and
18 unacceptable harm to a patient or others, and in all
19 circumstances seriously undermines the public's
20 confidence in the profession. It is particularly
21 serious where a medical practitioner has abused their
22 position, particularly where the findings relate to
23 children or vulnerable adults, or where the medical
24 practitioner has been convicted of an offence. Where
25 such factors are present this is more likely to
26 indicate that the medical practitioner's registration
27 should be cancelled, unless there are significant
28 mitigating circumstances which result in a reduction in
29 the severity of the sanction."

1 So that's all I want to draw to your attention from the
2 guidance document.

3
4 I now just want to make some submissions to you about
5 the conduct in this case. So the first thing I wanted 16:45
6 to address is the nature and seriousness of the
7 misconduct that I say arises in this case.

8
9 So, the allegations in this case involved a very
10 significant attack on the personal and professional 16:45
11 dignity of a young registered medical practitioner at
12 the outset of her career. The evidence disclosed that
13 her autonomy and her privacy were not respected by
14 witness B. Her personal life was invaded in a very
15 serious way, not only in relation to contact by witness 16:45
16 B towards her, but also towards her friends and
17 colleagues.

18
19 And the Committee has heard evidence that she was made
20 feel very unsafe for a period of years, and that on her 16:45
21 own evidence that is a feeling which persists until
22 this day.

23
24 The second thing about it is that there was undoubtedly
25 a sexual dimension to witness B's conduct. The 16:46
26 evidence clearly established that there was an
27 unrequited attraction on witness B's part towards
28 witness A, which ultimately developed into an
29 obsession. There were suggestions of meetings for

1 dinner. There were suggestions of marriage. There was
2 no evidence to suggest that witness A had invited,
3 provoked or otherwise caused any of this conduct or
4 behaviour by witness B.

5
6 And I am going to come back to the time span of the
7 conduct in a moment, but it reached a crescendo in
8 messages sent in July of 2020, which the Committee will
9 recall is over a year after witness A had complained
10 against witness B, not only to An Garda Síochána, but 16:46
11 to the Medical Council.

12
13 And I just wanted to -- I am not going to bring you to
14 all the messages that witness B sent to witness A, but
15 I do want to bring you just to the July 2020 messages, 16:47
16 because I say that they are the most egregious messages
17 and the most egregious conduct on witness B's part.

18
19 So those appear at tab 50 of the Core Book, page 114.
20 And I will just very briefly read what he said in those 16:47
21 messages, he said:

22
23 "Witness A please don't block. Contact me or allow me
24 to contact you. Please don't involve Gardaí. I beg
25 you. I will do whatever you say. I am missing you 16:47
26 very badly. Please talk to me. I can't do anything.
27 Just give me one chance, I will die without you. Don't
28 be so cruel. Just talk to me. I am in serious stress,
29 I need your support. I love you. I will die without

1 you. Don't do that. Simply reactivate your Instagram
2 profile and I will myself correct everything. You
3 don't have to do anything. I am not asking you for any
4 romance, but at least as a human you can give me this
5 favour. If you don't want me to try for you just don't 16:47
6 block me, you have enough proof to get me locked. It
7 is up to you what you want. I try to live without you
8 and fail. I don't know about you, I can't live without
9 you in Ireland, so if you don't reply I will leave your
10 country. God bless you. I haven't seen for a while, 16:48
11 upload your recent pics and either add me or make it
12 public. Let's go to Spain and get Corona. Please
13 forgive me."

14
15 Then: 16:48

16
17 "Witness A is always right. Pic please. Where is
18 Witness A? You are ruining my life, please do
19 communicate, I want to sort out complaint what you
20 want." 16:48

21
22 So in my submission, by demanding access to witness A's
23 social media profile in that way and by asking her to
24 provide him with photographs, witness B was involved in
25 a clear objectification of witness A, which utterly 16:48
26 undermined her personal dignity and is made all the
27 worse by the fact that it took place a year after he
28 had been complained to An Garda Síochána and to the
29 Medical Council.

1 In terms of the time span of the wrongdoing in this
2 case, it commenced in the first half of 2016 and
3 continued until July 2020, so that's a period of in
4 excess of four years.

5
6 Specifically after the events that took place in Mayo
7 University Hospital there was admitted unwanted contact
8 towards witness A in March/April 2017, in July 2017, in
9 June 2018, in May 2019, in January 2020, and in July
10 2020. So in no sense could the wrongdoing in this case 16:49
11 be characterised as being a one-off or an isolated
12 nature, quite the opposite. It was persistent, and it
13 persisted despite multiple efforts on the part of
14 witness A to bring it to a halt.

15
16 So in that respect you have evidence that on 15th April
17 2016, witness B was told by staff at Mayo University
18 Hospital not to contact witness A any more.

19
20 You have evidence on 1st April 2017, he was told by 16:49
21 witness A by text message not to contact her, that
22 after she had blocked his advanced on WhatsApp.

23
24 And on 20th May 2019, Gardaí in Galway told witness B
25 not to contact witness A. And it can only have been 16:49
26 clear from the complaint to the Medical Council on 26th
27 June 2019, that the contact was unwanted. And yet
28 despite all of that, the contact persisted.

1 The conduct also involved a very significant degree of
2 premeditation, by my count ten different phone numbers
3 are involved. It required effort and the use of
4 technology to obtain and utilise all of these different
5 phone numbers. The purpose of that exercise, which was 16:50
6 to circumvent the steps that witness A had taken not to
7 be contacted by Witness B. And he went as far as to
8 apparently go to Galway, go to the Roisin Dubh pub and
9 wait for her there in the hope or expectation of
10 meeting her. 16:50

11
12 As I said, the contact wasn't confined to contact
13 towards witness A, there was also contact towards
14 Claire Cullen on 1st April 2017, and contact towards
15 Shane Russell in January 2020, after the complaint was 16:50
16 made.

17
18 You might recall that it was suggested in
19 cross-examination of witness A that the purpose of the
20 contact towards Shane Russell was because witness B's 16:51
21 landlord was also called Shane, and that's how that
22 arose. But we now know because of the admissions made
23 that it was a false proposition that was put up to
24 witness A in cross-examination, and that the purpose of
25 the contact to Dr. Russell in January 2020 was 16:51
26 obliquely to contact, or indirectly to contact witness
27 A.

28
29 I now want to just say something about the manner in

1 which witness B approached the fitness to practise
2 process. So, you will recall that a mitigating factor
3 in the sanctions guidance document is, and I quote:

4
5 "Evidence that the medical practitioner has actively
6 engaged and cooperated with the Council and its
7 Committees from the outset of the regulatory
8 investigation process."

16:51

9
10 And in my respectful submission, here you have
11 precisely the opposite course of conduct, and that I
12 say should amount to an aggravating factor in the
13 Committee's analysis. So, the chronology of events is
14 as follows:

16:51

15
16 Witness A made her complaint on 26th June 2019. And on
17 19th August 2019, so just short of two months later,
18 witness B then made, I think what can only be regarded
19 as a retaliatory complaint against witness A to the
20 Medical Council, which was withdrawn less than a month
21 later on 17th September 2019.

16:52

22
23 And in my respectful submission, in light of the
24 admissions that have now been made, the Committee
25 should regard the making of that complaint against
26 witness A as an abuse of process on the part of witness
27 B.

16:52

28
29 You will recall that there were lengthy delays in

1 having the matter fixed for hearing, including multiple
2 adjournment applications on the part of witness B. And
3 I accept absolutely that witness B's adjournment
4 applications were not the sole reason for the delay in
5 the matter coming on for hearing, but in my respectful 16:52
6 submission they were the principal reason in the matter
7 firstly being delayed in coming on for hearing. And
8 then secondly for the matter taking so long -- for the
9 Inquiry taking so long to conclude having opened.

10
11 There were further adjournment applications during the
12 Inquiry, various sets of lawyers were retained and
13 discharged, and that provided the context for further
14 adjournment applications.

15
16 There was even an application, as I said earlier, in
17 July 2024, for the matter to be heard in private to
18 preserve witness B's presumption of innocence. And now
19 of course he accepts all of the wrongdoing alleged
20 against him, which calls into question the bona fides 16:53
21 of the application for the matter to be heard in
22 private last July.

23
24 You will recall a lengthy row last October, on 11th
25 October, about the sequence of cross-examinations owing 16:53
26 to the availability of certain witnesses.

27
28 You will then recall an application for this Committee
29 to recuse itself on the grounds of bias because of

1 information it had heard about witness B's conduct
2 outside of the parameters of this Inquiry.

3
4 In terms of the evidence that was required to be
5 presented, because witness B put the CEO to full proof 16:53
6 of all of the allegations, that necessitated the
7 calling of evidence from two members of An Garda
8 Síochána, staff members from the RCSI and the RCPI, a
9 staff member from the Medical Council, two members of
10 staff at Mayo University Hospital, being Dr. Lee and 16:54
11 Ms. Kelly, as well as Dr. Shane Russell, who had to
12 give evidence from Canada, Dr. Claire Cullen, who made
13 herself available for evidence on a number of
14 occasions, and of course witness A herself.

15 16:54
16 Many of the witnesses that gave evidence on the CEO's
17 behalf were cross-examined vigorously as to their
18 accounts, including witness A and Dr. Cullen, whose
19 credibility was challenged before the Committee.

20
21 And then it was only at the eleventh hour, as the time
22 came for witness B to go into evidence, that he elected
23 instead to accept all of the allegations against him.

24
25 And none of what I said there should be taken as 16:54
26 meaning that a person accused of wrongdoing is not
27 entitled to fully defend themselves and to
28 cross-examination witnesses as vigorously as they wish.
29 But that being said, the Committee is entitled where --

1 when it comes to the question of sanction, a Committee
2 is entitled to take into account the taking of that
3 course of action by a Registrant, who then presumably
4 will seek to rely on questions of an apology and
5 insight and so on, to seek to mitigate the sanction 16:55
6 that the Committee ultimately recommends to the
7 Council.

8
9 You will recall that Ms. McNally on behalf of Witness B
10 delivered an apology on 13th February 2025 to, I think 16:55
11 that was the date, but I am open to correction, to
12 Witness A. And I do think it is important given that
13 this is a complaint made by witness A about events
14 concerning her, that something is said about the impact
15 of witness B's wrongdoing of her -- on her, excuse me. 16:55

16
17 So, she gave evidence last April, I think, where she, I
18 think, laid bare to the Committee the distress and
19 anguish that witness B's wrongdoing had caused to her,
20 the worry, the stress and the impact that it had on her 16:56
21 professional career.

22
23 You will recall that she also provided the Committee
24 with a letter at the opening of the Inquiry in an
25 efforts to persuade the Committee not to adjourn the 16:56
26 matter any further, and that again set out in some
27 detail how profound an effect all of this had had on
28 her, and continues to have on her.

1 It should be recalled that, and again this is not --
2 the wrongdoing is the wrongdoing, as set out in the
3 allegations, but when it comes to questions of insight,
4 contrition and so on, it should be recalled that since
5 2021, witness B has complained about witness A to the 16:56
6 Medical Council, An Garda Síochána and the WRC --
7 sorry, excuse me, since 2019, he has complained to the
8 Medical Council, An Garda Síochána and the WRC.

9
10 He has sought to make her life, I respectfully submit, 16:56
11 as difficult as possible in taking that course of
12 action. And I just want to say something to you,
13 Committee members, about the manner in which witness A
14 was cross-examined when she came to give her evidence,
15 and this cross-examination I think needs to be seen in 16:57
16 the context of the admissions that have since been
17 made.

18
19 So, witness A was cross-examined by counsel on behalf
20 of, not Ms. McNally, but counsel on behalf of witness B 16:57
21 on Day 3 of the Inquiry. And I just want to draw to
22 your attention certain extracts from the transcript of
23 that day.

24
25 So you will recall that there were some text messages 16:57
26 that witness A referred to in her evidence which she no
27 longer had copies of and which weren't before the
28 Committee because she lost her phone. And it was put
29 to her that those messages were, and I quote now from

1 line 24 on page 35, this is witness B's counsel. This
2 is what he said:

3
4 "He would say that that was an attempt at failed
5 sarcasm, that you were let us say squabbling, as it
6 were, over this and that, and that it was merely a kind
7 of expression of frustration on the basis that, you
8 know, 'shall we get married'. Such were the arguments
9 that were going on between you."

10
11 At page 41, the following sequence of questions and
12 answers took place:

13
14 "Q: Don't take this offensively, but are you hard to
15 deal with?

16 A: I don't know how to answer that, I don't believe I
17 am, I don't think anyone has ever told me that.

18 Q: Your friend Claire Cullen in her statement to the
19 Medical Council says at paragraph 8 that you are a very
20 straightforward and blunt person. What do you think
21 that means?

22 A: I am honest and I don't, you know, I don't create
23 elaborate stories or I don't, I just get to the point.

24 Q: But in respect of elaborate stories, towards the
25 end of your evidence on Day 2 you spoke of, you gave
26 evidence regarding the messages that came in to you to
27 your older phone in 2020 and 2021, isn't that correct?

28 A: Yeah.

29 Q: And some of the concerns you expressed were fairly

1 elaborate in terms of kidnapping and taken to another
2 country."

3
4 So that was the suggestion made by counsel on witness
5 B's behalf.

16:59

6
7 At page 43, she was asked:

8
9 "Q: Do you think that you exaggerated the threat from
10 Witness B from the get-go?"

16:59

11
12 At page 46, it was suggested that the text message from
13 1st April 2017, that was sent by witness A to witness B
14 wasn't in fact sent. And that proposition is now no
15 longer being stood over.

16:59

16
17 Just bear with me, you will recall, as I said earlier,
18 that it was suggested to witness A that the contact
19 with Shane Russell was all a mistake. That's no longer
20 being -- that line is no longer being pursued.

17:00

21
22 It was suggested at page 62, line 99, that -- or sorry,
23 question 99, that witness A had catastrophized this
24 incident.

17:00

25
26 And at page 71, the following question was put to her:

27
28 "Q: Is it fair to characterise your reaction to this
29 as catastrophizing on stilts?"

1 And on page 72, she was asked:

2
3 "Q: Do you think you can reasonably be accused of
4 creating a mountain out of a molehill. There were
5 difficulties of interpersonal relations, even working 17:00
6 relations, whatever it was, but you allowed them to get
7 out of control. Is that fair?"

8
9 So if the Committee hears a submission to the effect
10 that witness B has in some way demonstrated some 17:00
11 insight or contrition, the Committee should bear in
12 mind that that was the line of approach that was taken
13 to witness A when she gave her evidence.

14
15 And in my respectful submission, witness B should 17:01
16 expect no sympathy whatsoever from the Committee, or
17 any bonus of any substantial nature for having admitted
18 the conduct complained of after having had witness A
19 cross-examined in that way.

20 17:01
21 And in truth the cross-examination of witness A was
22 just another episode in a lengthy and intense campaign
23 of harassment of her by witness B, which continued long
24 after she made complaints about him to the Medical
25 Council and to the Gardaí. 17:01

26
27 And in light of all of that, I say that the Committee
28 should attach very little weight to the very belated
29 apology that was offered at the conclusion of the Chief

1 Executive's presentation of the evidence.

2
3 And really apart from that apology, you have very
4 little evidence before you at all to suggest any
5 insight on the part of witness B into the extent or 17:01
6 seriousness of his wrongdoing or its effect on witness
7 A, and in fact the evidence points in the opposite
8 direction. You also have no evidence at all of any
9 remediation being taken by witness B in light of these
10 events. 17:02

11
12 I do also want to touch briefly on the question of CPD,
13 so that is undoubtedly a less, or perhaps not
14 undoubtedly, but I think it is probably a less serious
15 issue than the issues related to witness A. But it 17:02
16 still stands as a very significant falling short on
17 witness B's part, in that he failed to undertake CPD
18 required of him by law for five separate periods.

19
20 And I think that is something to which you should have 17:02
21 regard to, because it might be stated that witness B's
22 infatuation with witness A was somehow a confined
23 episode, or that it has been suggested to you in the
24 referrals that he is a very fine doctor with an
25 excellent practice and that no issues arise. But it 17:02
26 doesn't seem that any of the doctors who gave evidence
27 today, or the referees, had any idea that witness B
28 hadn't complied with his CPD for five separate periods.
29 And again you have heard nothing by way of contrition,

1 insight or remediation into that issue. You have only
2 a belated admission on the part of witness B. And in
3 fact the Chief Executive was put to the trouble of
4 having to call witnesses from the various professional
5 bodies in order to prove that this falling short had in fact taken place. 17:03

6
7 So in light of all of that, the question arises as to
8 why cancellation is the appropriate sanction in this
9 case, and I go back to the three purposes of sanction
10 that are set out in the sanction guidance document. 17:03

11
12 So the first is protection of the public. The CEO's
13 position is that nothing less than cancellation will
14 adequately protect the public. It is not feasible for
15 a person who is engaged in such egregious conduct over
16 such a lengthy period to be permitted to continue as a 17:03
17 registered medical practitioner. And that is
18 particularly so when there has been so little by way of
19 genuine insight or contrition on his part.

20 17:04
21 The second purpose of sanction is to uphold public
22 confidence in the profession. The CEO's position is
23 that to allow witness B to continue as a registered
24 medical practitioner would significantly erode public
25 confidence in the profession. It would send entirely 17:04
26 the wrong message to the public if a doctor found
27 guilty of the misconduct alleged in this case would be
28 permitted to continue as a registered medical
29 practitioner.

1
2 And then finally, the question of promoting
3 professional standards and conduct. Again it would
4 send the wrong signal to the profession if this
5 wrongdoing was seen to be tolerated in any way. And I 17:04
6 say that the only way that the Council can send the
7 correct message to the profession as regards standards
8 and conduct is to cancel witness B's registration.

9
10 In relation to the issues of leniency and 17:04
11 proportionality, in my respectful submission the
12 sanction of cancellation would in the circumstances of
13 this case be proportionate to the wrongdoing which
14 occurred, and that there isn't a more lenient sanction
15 available to the Council or to the Committee which 17:04
16 would properly reflect witness B's wrongdoing.

17
18 So for all of those reasons, Chair, in my submission,
19 while it is ultimately a matter for the Committee, the
20 appropriate recommendation to make is a recommendation 17:05
21 to cancel witness B's registration under Section 71 of
22 the 2007 Act.

23
24 I should also say, Chair, that I think the Committee
25 should at some stage deal with the question of the 17:05
26 ongoing anonymity order. And I suppose while I am not
27 formally making an application to lift that, I think
28 the Committee should have regard to the default
29 position that hearings take place in public, and that

1 the justification for witness B's anonymisation has
2 fallen away.

3
4 And sorry, but for the avoidance of any doubt, I am not
5 suggesting that the anonymisation of witness A would be 17:05
6 varied or that the Committee should decide to name her.
7 So subject to any questions you have, Committee
8 members, those are my submissions.

9 CHAIRPERSON: Thank you very much, Mr. McDowell, those
10 are very clear. Ms. McNally, we have something like 25 17:06
11 minutes.

12 MS. McNALLY: And counting.

13 CHAIRPERSON: But please take as much time as you need,
14 and if we need to continue on another day we can do
15 that. Mr. McDowell, can I just get you to mute. Thank
16 you.

17
18 CLOSING SUBMISSION BY MS. McNALLY:

19
20 MS. McNALLY: So I would submit to the Committee that 17:06
21 the very first starting point, particularly considering
22 what I would submit is the very heavy hammer being used
23 in respect of the nut in this case, where one has to
24 look at the equivalent of the charges that have been
25 brought against the doctor. And they are, if you look 17:06
26 at no. 1 in the Notice of Inquiry, and I am sorry, but
27 I am going to go through them one by one, it is that:

28
29 "On one or more occasions during the period between in

1 or around June 2016 and in or around July 2016,
2 attempted to make contact and/or contacted and/or
3 attempted to approach and/or approached Witness A in
4 circumstances where you knew or ought to have known
5 that:

6
7 i. This was inappropriate and/or this was not in
8 connection with your employment; and/or

9
10 ii. This was unwanted and/or uninvited, and/or that on
11 or around 15 April 2016, you had been requested by one
12 or more members of staff and/or the Medical Manpower
13 Manager at Mayo University Hospital ('the Hospital')
14 not to contact and/or approach Witness A."

15
16 Then no. 2:

17
18 "Notwithstanding one or more request(s) made by
19 one or more members of staff and/or the Medical
20 Manpower Manager at the Hospital on or around 15 April
21 2016 not to contact and/or approach Witness A, on one
22 or more occasions during the period between in or
23 around 31 March 2017 and in or around 1 April 2017,
24 you sent one or more text messages and/or Whatsapp
25 messages and/or made one or more phone calls to Witness
26 A, in circumstances where you knew or ought to have
27 known this was inappropriate and/or unwanted; and/or

28
29 3. Notwithstanding one or more request(s) made by one

1 or more members of staff and/or the Medical Manpower
2 Manager at the Hospital on or around 15 April 2016
3 not to contact and/or approach Witness A and/or a
4 request(s) made by Witness A on or around 1 April
5 2017 not to contact her, on one or more occasions
6 during the period between in or around 7 July 2017
7 and in or around 20 May 2019, you sent one or more
8 text messages and/or Whatsapp messages and/or made one
9 or more phone calls to Witness A, in circumstances
10 where you knew or ought to have known it was
11 inappropriate and/or unwanted; and/or
12

13 4. Notwithstanding one or more request(s) made by one
14 or more members of staff and/or the Medical Manpower
15 Manager at the Hospital on or around 15 April 2016
16 not to contact and/or approach Witness A and/or a
17 request(s) made by Witness A on or around 1 April
18 2017 not to contact her, on one or more occasions
19 during the period between in or around 18 May 2019
20 and in or around 20 May 2019, you sought to meet
21 Witness A, in circumstances where you knew or ought
22 to have known it was inappropriate and/or unwanted;
23 and/or
24

25 "Notwithstanding one or more request(s) made by
26 one or more members of staff and/or the Medical
27 Manpower Manager at the Hospital on or around 15 April
28 2016 not to contact and/or approach Witness A and/or a
29 request(s) made by Witness A on or around 1 April 2017

1 not to contact her and/or a request made by Witness A
2 and/or An Garda Síochána on or around 20 May 2019 not
3 to contact Witness A, on one or more occasions during
4 the period between 21 May 2019 and 19 July 2020, you
5 sent one or more text messages and/or Whatsapp messages
6 and/or made one or more phone calls to Witness A in
7 circumstances where you knew or ought to have known it
8 was inappropriate and/or unwanted; and/or
9

10 6. On or around 1 April 2017, sent one or more text
11 messages and/or Whatsapp messages to Dr. Claire Cullen
12 for the purposes of trying to establish contact with
13 Witness A, in circumstances where you knew or ought to
14 have known it was inappropriate and/or unwanted; and/or
15

16 7. On or around 22 January 2020, sent one or more
17 text messages and/or Whatsapp messages to Mr. Shane
18 Russell for the purposes of trying to establish contact
19 with Witness A, in circumstances where you knew or
20 ought to have known it was inappropriate and/or
21 unwanted."
22

23 And then no. 8 is in respect of the CPD points. And
24 the reason I say that this is a sledgehammer being used
25 in respect of the nut is where the CEO, who should be
26 put to the pin of his collar in order to bring a case
27 properly and appropriately before the Committee, has
28 jumped to paragraph 7.4.2.3, sexual misconduct, and
29 suggesting that numbers 1 to 7 encapsulate that.

17:09

1
2 The words "sexual misconduct" are not in any way
3 visible in respect of the charges to which witness B
4 has held up his hands, belatedly or otherwise. But the
5 words "sexual conduct" does not appear anywhere in the 17:10
6 charges. And I submit that it is a huge leap, not one
7 of faith, but a huge leap that is inappropriate on the
8 part of the CEO to jump to sexual misconduct,
9 considering its own definitions in respect thereof.

10
11 And if we jump to the definition, just bear with me,
12 the page is page 20, so sexual misconduct is described
13 as follows:

14
15 "Sexual misconduct encompass a broad range of conduct 17:10
16 and may include sexual assault, sexual abuse of
17 children, accessing or possessing child pornography, or
18 pursuing or forming a sexual or inappropriate
19 relationship with a patient or with someone close to
20 them. Sexual assault also includes unnecessary or non 17:10
21 consensual physical examination of patients."

22
23 Paragraph 9.3.2:

24
25 "Sexual misconduct often results in serious and 17:11
26 unacceptable harm to a patient or others, and in all
27 the circumstances seriously undermines the public's
28 confidence in the profession. It is particularly
29 serious where a medical practitioner has abused their

1 position, particularly where the findings relate to
2 children or vulnerable adults or where the medical
3 practitioner has been convicted of an offence. Where
4 such factors are present, this is more likely to
5 indicate that the medical practitioner's registration 17:11
6 should be cancelled unless there are significant
7 mitigating circumstances which result in a reduction of
8 the severity of the sanction."
9

10 Now, I am sorry, perhaps I have missed the medical 17:11
11 report that was led in respect of witness A that
12 suggested that somehow she was vulnerable, or perhaps I
13 have missed something that suggested that there was a
14 sexual assault perpetrated upon her. But it is
15 certainly not in the brief that I have. 17:11
16

17 And to jump, to jump from the wording, and I am
18 presuming it was carefully worded, the wording of the
19 charges that are proffered before this Committee, that
20 time and energy and consideration went into the wording 17:12
21 of it. But in respect of those charges, and I use that
22 word because I think it is appropriate considering the
23 approach of the CEO; numbers 1 to 7, there is no
24 mention of that phrase "sexual misconduct" nor is there
25 use of the word "sexual" in any of those charges to 17:12
26 which witness B has held up his hands. And I am sorry,
27 but to jump automatically to paragraph 7.4.2.3
28 suggesting that sexual misconduct has occurred and that
29 therefore cancellation should occur, is, I submit,

1 egregious behaviour on the part of the CEO when asking
2 the Committee to make its decision.

3
4 As I say, perhaps I have missed it, perhaps there is a
5 medical report that suggests that there was some kind 17:12
6 of sexual assault or that witness A is vulnerable, but
7 I certainly haven't seen it. And if there is and it is
8 already before the Committee, then obviously I will be
9 looking for a copy of that for later purposes. But it
10 is certainly not within the brief that I have. And as 17:12
11 I say, it is a sledgehammer to a nut.

12
13 The CEO, as I say, should be presenting all of the
14 relevant evidence, etc., and regarding the approach to
15 the sanctions, you have heard evidence from a treating 17:13
16 doctor, just let me get my names here correctly, the
17 doctor in Kerachi, Dr. Yusuf Baig, who has been
18 treating him together with references from three other
19 doctors who have known him. And in respect of the
20 findings, I would submit that in respect of the three 17:13
21 doctors outside of the doctor who furnished the medical
22 report, the three were furnishing character references
23 in respect of witness B and certainly no approaches
24 were made. The phrase was used once and I let it
25 slide, his lawyers. I can assure you his lawyers made 17:13
26 no contact whatsoever with those referees or with the
27 person providing the medical report in that a
28 straightforward character reference in respect of
29 witness B was what was simply sought and it was

1 generated by those persons themselves with zero input I
2 can assure you from counsel and zero input from the
3 solicitors of witness B.

4
5 So those references are as they stand and when you 17:14
6 consider the medical report of Dr. Yusuf, Dr. Yusuf's
7 report has to be considered against the personal issues
8 that were being suffered by witness B at the time. And
9 personal and professional issues, paragraph 6.7, it is
10 at page 8: 17:14

11
12 "A medical practitioner may present evidence of
13 personal or professional issues as mitigation,
14 including for example, work-related stress. The
15 Council in considering these matters should seek
16 information as to whether the issues have been
17 resolved, and the extent to which the professional or
18 personal matters are connected with the findings made
19 by the FTPC. Personal circumstances which are
20 completely unconnected with the findings of the FTPC
21 should not substantially go to mitigation."

22
23 I am not aware of witness B despite us indicating and
24 providing the three references on the last occasion, I
25 am not aware of his being assessed in any way by any 17:15
26 medical practitioner in respect of his personal medical
27 circumstances like an ordinary medical report for
28 example in a personal injuries action, but I am not
29 aware of any assessment of witness B or any request

1 being made as to access the prescription medications he
2 has required or has been prescribed since 2016. I am
3 not aware of that.

4
5 But I would submit -- I am sorry, there's awful 17:15
6 whispering going on, I'm sorry. Sorry, I just find it
7 a little off-putting. Where was I? Yes, as I was
8 saying --

9 CHAIRPERSON: You were referencing the absence of
10 prescriptions. 17:15

11 MS. McNALLY: In the absence of any investigation being
12 made by the CEO into these particular circumstances, I
13 submit that the personal and professional issues as are
14 referred to not only in the character references but
15 also the medical report should be taken into 17:16
16 consideration by the Committee when addressing the fact
17 that witness B has held up his hands.

18
19 In respect of insight, insight whether it be belated or
20 not, that insight has in fact occurred. 17:16

21
22 And remediation, I am not certain as to what type of
23 remediation programme would be considered for a person
24 who up until 2020 was using WhatsApps, etc., and that
25 behaviour has ceased unless there is some kind of 17:16
26 programme available as to how not to use WhatsApp.

27
28 But I would ask the Committee to consider the fact that
29 he has been in receipt of medical advice, has been in

1 receipt of medical treatment, he has received both
2 psychiatric and treatment from the GP and he is on
3 medication and will be on lifelong medication, and the
4 phraseology used by Dr. Yusuf was that he would require
5 it life-long and as long as he stays on the medication 17:16
6 which he requires, it seems to be fully under control,
7 that medical condition.

8
9 And Dr. Devins asked questions as to whether or not he
10 was paranoid, and the evidence from the GP, Dr. Yusuf, 17:17
11 who also works in intensive medication in Kerachi was
12 that no, he was not paranoid and he was not delusional.

13
14 He has held up his hands. Has it been dishonest of him
15 to wait until this Day 6 of the evidence before he held 17:17
16 up his hands? But also you have to take into
17 consideration that he was going through the stressors
18 as were described by Dr. Yusuf at the time and that
19 each time this matter came up for hearing, it did cause
20 issues regarding stress and that that is a mitigating 17:17
21 circumstance as well.

22
23 So other issues that I would ask you to take into
24 consideration regarding the mitigation is the fact that
25 there has been insight whether it be belated or not; is 17:17
26 to take into consideration his medical presentation,
27 the evidence of which is in the report of Dr. Yusuf;
28 the fact that he has been on medication and is on
29 medication and that it has been under control; there is

1 no complaint in respect of behaviour against him for
2 the use of text messages or whatsApps since 2020, July;
3 the fact that there is adherence to principles of good
4 practice.

5
6 You have heard from the three referees that in their
7 opinion he has been, I use the word exemplary, an
8 exemplary medical practitioner. Their words were that
9 he was a highly trusted healthcare professional, people
10 who had complete confidence in him amongst his peers. 17:18
11 He did community work. They were happy to vouch for
12 his capacity as a doctor. High-quality medical care.
13 He was empathetic in his approach to patients. He was
14 approachable, respectful and supportive. All of that
15 is in the three references but also you must take into 17:18
16 consideration the evidence that is in the medical
17 report of Dr. Yusuf.

18
19 The circumstances surrounding events, that is something
20 that was also touched upon by Dr. Yusuf which may have 17:18
21 arisen at its commencement by reason of a
22 misunderstanding, possibly by reason of
23 misunderstanding of cultures and I think that that was
24 actually mentioned by one of the doctors, I am sorry
25 but their name escapes me, on the very first day. I 17:19
26 believe it was Mr. Lee referred to difference of
27 cultures, and I am open to correction on whether it was
28 he or not, a misinterpretation, they being from
29 different cultures and different backgrounds.

1
2 But there has been no evidence of sexual misconduct
3 whatsoever. So I submit that there is no justification
4 for the Committee to consider sexual misconduct as an
5 issue before it. There is no criminal conviction. 17:19

6 That is another of the issues, the list of aggravating
7 factors. The lack of insight, I submit that he does
8 have insight. The fact that he went looking for
9 medical intervention and has sought and continues with
10 that medical intervention I would submit is an element 17:19
11 of insight. There has been no previous finding against
12 him. There is no criminal conviction against him and
13 also there has not been any of this sexual misconduct.
14 There is no evidence or suggestion of there being drug
15 or alcohol abuse or disorder, no prior breaches of 17:20
16 conditions or undertakings.

17
18 The abuse of the professional position, if one
19 considers not attending CPD to be that, then so be it
20 but I would submit that even if it were, if one was to 17:20
21 lack at it as a pendulum, that is very much on the
22 lower end of the scale.

23
24 And as for dishonesty, it is not a case of dishonesty
25 from witness B's perspective, it is a case of 17:20
26 misunderstanding and also a case of his not
27 understanding that there was a difference in cultures,
28 his also suffering under the medical depressive
29 psychosis as was diagnosed by Dr. Yusuf and also his

1 suffering from depression at the time.

2
3 And even the referee Dr. Ghaznain referred to the fact
4 that he felt that there were medical issues with him
5 back in 2016 when witness B's friend married and he was 17:20
6 suddenly on his own. There was referenced by the other
7 referees that he was on his own and Dr. Ghaznain
8 specifically mentioned that he felt it wasn't good for
9 his mental health to be living on his own in the
10 countryside and suggested that he moved to a town. In 17:21
11 other words there was isolation and I believe that was
12 also one of the words that he used in respect of
13 Witness B.

14
15 Regarding the list of other factors that I would ask 17:21
16 you to take into consideration is the fact that his
17 circumstances have changed. There has been no
18 recurrence since the July I believe it was of 2020. He
19 continues with his medication. He sits in abeyance
20 waiting to see what will happen with his courses in 17:21
21 respect of the becoming a GP because whilst this hangs
22 over him, he cannot progress his medical career. He
23 cannot go forward. There is nothing more he can do, he
24 has to await the outcome of this. And, yes, it has
25 held over him by a sword of Damocles and, yes, to a 17:22
26 degree he has been the author of his own misfortune in
27 respect of the longevity of time during which that
28 sword of Damocles has hung over him but he has held up
29 his hands, he has sought medical intervention, there

1 has been no criminal conviction, there has been no
2 recurrence. There were no previous convictions prior
3 to this situation arising with Dr. A and there
4 certainly was no sexual misconduct.

5
6 He has made his apology through me to the Committee.
7 He is happy to undergo whatever courses might be
8 available. He is happy to undergo whatever CPD might
9 be available. He was a hard-working, dedicated and
10 empathetic doctor. He would like to continue and
11 proceed in that particular profession and to continue
12 if possible to becoming a qualified GP.

13
14 As I said to you previously, he is now married. His
15 wife works in the area of gynaecology, she is not a
16 fully qualified gynaecologist as yet. There was talk
17 of his and she emigrating to Australia. That was even
18 mentioned by I think it was Dr. Ghaznain today who
19 mentioned that as well, although it may have been one
20 of the other referees, but there is talk and has been
21 talk previously of his emigrating abroad, something
22 that has been always part of his hope and plan for
23 himself.

24
25 But I would ask you to take into consideration these
26 factors that should mitigate against the sledgehammer
27 approach to the nut where he has apologised, he has
28 held up his hands, he was suffering under depressive
29 psychosis, he was suffering from depression, he is on

1 medication and takes his medication, there is no
2 criminal conviction and, as I say, there is certainly
3 no sexual misconduct or reports, Gardaí reports or any
4 kind of report or medical report in respect of that.
5 Nor have I seen any medical report to suggest that 17:23
6 witness A is a vulnerable individual or a vulnerable
7 person. I haven't seen any medical report to suggest
8 that she in any way suffered psychiatrically in respect
9 of the misconduct to which he has held up his hands.
10 And I would ask you to look to the wording of the 17:24
11 charges themselves because that is what he has held up
12 his hands to is the charges that have been levelled
13 against him no. 1 to 8.

14
15 And regarding the CPD, he holds up his hands. He 17:24
16 maintained that there was a difference between how CPD
17 was registered at one stage and then thereafter he just
18 fell between the cracks in respect of that but he is
19 willing to undertake whatever courses are prescribed,
20 whatever courses are necessary in order to ensure that 17:24
21 he is fully professionally proficient medically and up
22 to date with what is going on medically.

23
24 To this date he works as a locum working some 20/30
25 hours a week. He is still in the medical sphere and 17:24
26 the medical field. As I say, no complaints for the
27 last almost five years, we are now in 2025, the end of
28 the April of the 2025. I would ask the Committee to
29 take all that into consideration and also to take into

1 consideration the years of hard work that went into the
2 formulation or the moulding of witness B becoming to
3 the particular professional standard he had achieved
4 prior to his engaging in this conduct to which he has
5 held up his hands.

17:25

6
7 If you need me to say any more, I would be happy to
8 think about it.

9 CHAIRPERSON: Thank you, Ms. McNally. As I said to
10 you, both parties will have an opportunity when this --
11 when our report and recommendation goes to Council,
12 there will be an opportunity afforded to both of you to
13 make further submissions if you feel that you have been
14 unduly constrained here today.

17:25

15 MR. McDOWELL: Chair, just before you continue, I
16 wonder could I just respond. I just want to make three
17 very brief points in response but I am conscious of the
18 time pressure.

17:25

19 MS. McNALLY: Is it allowed under the procedures?

20 MR. McDOWELL: I think ordinarily I am afforded a
21 response.

17:25

22 MS. McNALLY: We are not in a court of law. I am just
23 asking. I haven't seen any practice and procedure to
24 the Council.

17:26

25
26 LEGAL ADVICE BY MR. McGUINNESS:

27
28 MR. McGUINNESS: My advice to the Committee is that it
29 is allowed because there are points being made in the

1 entirety of the submission on behalf of the Registrant
2 which have never been heard before and a right of reply
3 is customarily always given.
4

5 REPLYING SUBMISSION BY MR. McDOWELL:
6

7 MR. McDOWELL: I will be very, very brief. So the
8 first thing is just in relation to the question of
9 whether this amounts to sexual misconduct, obviously
10 the words "sexual misconduct" don't appear in the 17:26
11 allegations that have been admitted but it is -- but
12 that is not remotely surprising, and sexual misconduct
13 is not a legal term that appears in the Act for example
14 and it is for the Committee to decide whether it
15 regards this as being a case that involves sexual 17:26
16 misconduct. In my respectful submission there is only
17 one answer to that question. It is blindingly obvious
18 that this is a case of sexual misconduct. And even if
19 one looks at the definition provided in the sanctions
20 document, which a non-exhaustive list and is stated to 17:26
21 encompass a broad range of conduct that may include
22 certain things, but one of the things that it may
23 include is:

24
25 "...pursuing or forming a sexual or inappropriate
26 relationship with a patient or with someone close to
27 them."
28

29 So that is precisely what witness B attempted here. So

1 I struggle to see how this could be seen anything as
2 other than a sexual misconduct case.

3
4 The second thing just to say is that, and maybe I
5 misunderstood Ms. McNally, if it is being suggested 17:27
6 that the CEO ought to have arranged a medical
7 examination of Witness B, I reject that submission and
8 I think the Committee should be very zealous in making
9 sure that this does not become a relevant medical
10 disability case by the back door. This is a case of 17:27
11 professional misconduct. Obviously Witness B's
12 personal circumstances at the time of the misconduct
13 may be relevant but it is not a case where because of
14 some medical condition, that there is any lowered
15 culpability on his part and I suppose that's all I say 17:27
16 about that.

17
18 Then the third thing just say is on an evidential point
19 I think the Committee should be reluctant to allow for
20 example the testimony of Dr. Baig to be considered 17:28
21 first-hand evidence of what Witness B might say were
22 the circumstances that existed at the time of the
23 wrongdoing. You didn't hear from Witness B. He didn't
24 explain why he did what he did and it is in fact clear
25 from the evidence that Dr. Baig had a very fundamental 17:28
26 misunderstanding of what had taken place in Ireland and
27 you should therefore not allow Dr. Baig's testimony to
28 act as a substitute for first-hand testimony from
29 Witness B. He has opted not to go into evidence,

1 that's his right but that has certain consequences for
2 him.

3 CHAIRPERSON: Thank you, Mr. McDowell. I know you are
4 under a time pressure.

5
6 REPLYING SUBMISSION BY MS. McNALLY:

7
8 MS. McNALLY: I do have a comment particularly in
9 respect of paragraph 9.3.1. Perhaps it is a matter of
10 misinterpretation but I doubt it. The wording is:

17:28

11
12 "Sexual misconduct encompasses a broad range of conduct
13 and may include sexual assault, sexual abuse of
14 children, accessing or possessing child pornography, or
15 pursuing or forming a sexual or inappropriate
16 relationship with a patient or with someone close to
17 them."

18
19 "With someone close to them" is reference to the
20 patient.

17:29

21 MR. McDOWELL: I don't accept that but it is a matter
22 for the Committee.

23 MS. McNALLY: Perhaps we are going to have to have some
24 kind of further steps elsewhere to determine precisely
25 what that means but the CEO is interpreting it in a
26 particular way, again the sledgehammer approach.

17:29

27 CHAIRPERSON: I understand. I am happy to return to
28 this on our next day because I think we are going to
29 have to reconvene on another day because the Committee

1 will have to hear from Mr. McGuinness, his advice to
2 the Committee on the issue of sanctioning before we
3 make our recommendations.
4

5 I am conscious this is a public Inquiry and we haven't 17:29
6 formally read our findings into the public record. I
7 know admissions were made but we will need to reconvene
8 anyway to do that, to read those formally into the
9 public record.

10 17:30
11 Can I just ask you, Ms. McNally, the issue of -- sorry,
12 there was one point I wanted to say. The suggestion
13 that there was any inappropriate behaviour by your team
14 or your lawyers, I don't think the Committee needs to
15 trouble itself with that. So you can be reassured we 17:30
16 are not --

17 MS. McNALLY: The suggestion was always the solicitor
18 and then on the last occasion the suggestion was the
19 lawyers plural.

20 CHAIRPERSON: Sure. Happy to discount that suggestion 17:30
21 in any way and completely exonerate your team.

22 MR. McDOWELL: And in fairness I only asked the
23 question, I didn't suggest --

24 CHAIRPERSON: No, that's accepted as well. But I just
25 wanted to address the point of anonymisation which 17:30
26 Mr. McDowell says falls away on the basis of these
27 admissions that have been made. Do you have a view on
28 that?

29 MS. McNALLY: Sorry, I missed the start of it.

1 CHAIRPERSON: The issue of anonymisation?

2
3 SUBMISSION BY MS. McNALLY:

4
5 MS. McNALLY: The harm was already done at the very 17:30
6 start where there was no anonymity sought in respect of
7 Witness B in that my very first dealings was just a
8 simple Google and it's everywhere. So I am in the
9 Committee's hands, the damage was already done.

10 CHAIRPERSON: Okay. So maybe it is something you might 17:31
11 come back to on the next day when we reconvene. I am
12 keen that I don't want to in any way be unfair to your
13 client and that's why to date I have always tried to
14 refer to him as the Registrant or Witness B.

15 MS. McNALLY: Yes.

16 CHAIRPERSON: Because we made a determination. We will
17 go back and look at the rationale behind that
18 determination and we might include in our report to
19 Council our recommendations because that is material
20 obviously to the issue of publication of sanction. But 17:31
21 what I want to do is we will need to reconvene on
22 another day. We want to hear advice from
23 Mr. McGuinness and consider the submissions you have
24 both made. I will give both parties another
25 opportunity if there is anything further you want to 17:31
26 say because I don't want you to be in any way
27 trammelled in your presentations but thank you for your
28 submissions to date. Any matter arise that needs
29 urgent attention before I adjourn?

1 MS. McNALLY: Other than when were you thinking
2 reconvening?

3 CHAIRPERSON: As soon as possible. I am conscious that
4 witness A is on line here today and I hadn't addressed
5 witness A. I have thanked various people for their 17:32
6 attendance. I want to just take this opportunity to
7 thank you witness A for her attendance. I understand
8 this has been a long drawn-out process. It is my
9 intention to bring this matter to a conclusion as
10 quickly as possible and if I offer any reassurance to 17:32
11 witness A, this matter is slowly progressing to a
12 definitive conclusion which I hope will happen very
13 soon.

14

15 So I think what I might do is ask the Executive staff 17:32
16 to liaise with both counsels. Our Committee will make
17 themselves available. I suggest we probably convene
18 online as the easiest way to get all parties together
19 if that's acceptable to you both, is it?

20 MR. McDOWELL: Early morning some day. 17:32

21 DR. DAVIN-POWER: That's acceptable to me.

22 CHAIRPERSON: Just for my Committee colleagues, the
23 counsels are just consulting for a moment.

24 MS. McNALLY: Sorry, apologies.

25 MR. McDOWELL: We might come back with some dates but 17:33
26 maybe a 9 o'clock start some day next week if that
27 suited everybody?

28

29 CHAIRPERSON: We will check our availability, you can

1 check yours as well and leave your availability for the
2 next two weeks. I suggest we will get a slot.

3 MS. McNALLY: I am not available from the 3rd May until
4 the end of May between being abroad and then Sligo High
5 Court.

17:33

6 CHAIRPERSON: Okay. Can I just get you to give your
7 availability to Ms. Horan and we will make ourselves
8 available at the earliest opportunity. I will check
9 with the Committee here as well.

10 MS. McNALLY: I am much obliged. I am sorry about my
11 diary.

17:33

12 CHAIRPERSON: That's fine. I thank you very much for
13 your attention today and I think we will now adjourn
14 for this evening and we will resume at the earliest
15 opportunity. So thank you.

17:33

16 MS. McNALLY: Thank you very much.

17
18 LEGAL ADVICE BY MR. McGUINNESS:

19
20 MR. McGUINNESS: Might I just give advice to the
21 Committee at this stage, as is customary on my part.
22 The Committee, whilst it has heard all the evidence in
23 the matter, and has heard certain submissions in the
24 matter also, but it has not yet received any legal
25 advice from me as legal assessor.

17:33

17:34

26
27 And in the circumstances, it would therefore be
28 inappropriate for the Committee to enter into any
29 discussion on any issue connected to its function,

1 either fact-finding or issues concerning that, or
2 indeed of course the issue of any appropriate sanction
3 that it might consider recommending, because any advice
4 I give must be given in the presence of the parties,
5 who have the right to offer a view on the advice,
6 whether it is agreed with or disagreed with to any
7 extent. Thank you.

17:34

8 MR. McDOWELL: Thank you.

9 CHAIRPERSON: And if I might impose upon you for one
10 more minutes, you have reminded me, Mr. McGuinness,
11 there was some evidence led to the Committee in respect
12 of social media contacts, the via street, those don't
13 form part of the allegations or the admissions, so you
14 might the next day address the significance or
15 otherwise of that evidence that has been led to us.

17:35

16 And perhaps, Ms. McNally, whether your client is
17 admitting to that conduct as was suggested or not. But
18 thank you, and we will now adjourn for this evening.

19 MS. McNALLY: Much obliged.

20 CHAIRPERSON: Thank you.

17:35

21
22 THE HEARING WAS ADJOURNED TO A DATE TO BE DECIDED

	121:20, 122:2, 123:12 20/30 [1] - 133:24 2003 [1] - 13:11 2007 [4] - 1:8, 5:12, 5:16, 118:22 2012 [1] - 55:9 2014 [3] - 34:17, 80:18, 90:1 2015 [4] - 16:21, 24:8, 24:11 2016 [24] - 50:23, 50:28, 51:1, 51:9, 52:8, 52:14, 55:7, 56:13, 59:11, 64:8, 68:22, 89:5, 106:2, 106:17, 120:1, 120:11, 120:21, 121:2, 121:15, 121:28, 127:2, 131:5 2017 [13] - 36:13, 106:8, 106:20, 107:14, 114:13, 120:23, 121:5, 121:6, 121:18, 121:29, 122:10 2018 [3] - 53:2, 54:11, 106:9 2019 [15] - 14:28, 52:14, 59:11, 106:9, 106:24, 106:27, 108:16, 108:17, 108:21, 112:7, 121:7, 121:19, 121:20, 122:2, 122:4 2019/20 [1] - 67:22 2020 [14] - 64:9, 104:8, 104:15, 106:3, 106:9, 106:10, 107:15, 107:25, 113:27, 122:4, 122:16, 127:24, 129:2, 131:18 2021 [2] - 112:5, 113:27 2022 [3] - 53:12, 53:24, 54:1 2023 [1] - 53:12 2024 [3] - 29:17, 61:1, 109:17 2025 [11] - 1:19,	5:2, 13:6, 17:19, 34:11, 39:24, 52:22, 56:2, 111:10, 133:27, 133:28 20th [1] - 106:24 21 [1] - 122:4 22 [1] - 122:16 24 [7] - 13:11, 14:3, 19:2, 19:14, 19:16, 22:28, 113:1 25 [1] - 119:10 25TH [2] - 1:19, 5:1 26th [2] - 106:26, 108:16 28 [1] - 3:12 29 [1] - 3:13 2:30 [5] - 7:17, 7:18, 10:18, 11:15, 32:1 2:45 [1] - 32:2 2pm [1] - 11:7	6.3 [1] - 97:11 6.7 [1] - 126:9 6.8 [2] - 97:11, 97:13 6.8.1.1 [1] - 97:17 6.8.1.2 [1] - 97:18 6.8.1.3 [1] - 97:22 6.8.1.4 [1] - 97:24 6.8.1.5 [1] - 97:26 6.8.1.6 [1] - 97:29 6.8.1.7 [1] - 98:2 61 [1] - 3:22 62 [1] - 114:22 68 [1] - 3:23 69 [1] - 93:25 6th [2] - 13:6, 17:18	5:13, 100:20, 140:26 9.3 [1] - 102:5 9.3.1 [1] - 137:9 9.3.2 [1] - 123:23 91 [1] - 3:31 93 [1] - 4:1 99 [2] - 114:22, 114:23	137:14 Accident [1] - 34:19 accommodate [3] - 8:8, 8:10, 32:5 according [4] - 48:4, 57:26, 58:10, 73:13 account [5] - 21:24, 22:14, 23:18, 96:7, 111:2 accounts [1] - 110:18 accused [3] - 25:24, 110:26, 115:3 achieved [1] - 134:3 Act [5] - 5:12, 5:16, 5:18, 118:22, 135:13 act [5] - 74:29, 95:14, 95:22, 96:3, 136:28 ACT [1] - 1:8 acting [3] - 37:25, 61:26, 82:29 action [6] - 1:29, 100:11, 100:18, 111:3, 112:12, 126:28 actions [1] - 92:20 actively [1] - 108:5 acts [1] - 58:15 actual [1] - 5:26 add [1] - 105:11 address [6] - 41:6, 45:9, 98:4, 103:6, 138:25, 142:14 addressed [4] - 89:6, 97:12, 98:25, 140:4 addressing [4] - 38:2, 61:29, 85:17, 127:16 adequately [2] - 100:5, 117:14 adherence [1] - 129:3 adjourn [4] - 111:25, 139:29, 141:13, 142:18 ADJOURNED [2] - 78:14, 142:22	
1				A		
1 [9] - 119:26, 120:23, 121:4, 121:17, 121:29, 122:10, 122:29, 124:23, 133:13 10 [1] - 3:7 11 [1] - 100:9 114 [1] - 104:19 119 [1] - 4:3 11th [5] - 34:11, 39:24, 40:8, 40:13, 109:24 12 [4] - 80:12, 80:13, 80:20, 85:2 13 [1] - 3:10 134 [1] - 4:5 135 [1] - 4:7 137 [1] - 4:9 139 [1] - 4:11 13th [1] - 111:10 141 [1] - 4:13 15 [14] - 10:19, 18:10, 18:24, 18:29, 19:3, 19:10, 19:14, 41:28, 42:14, 120:11, 120:20, 121:2, 121:15, 121:27 15:09 [1] - 48:3 15th [1] - 106:16 16 [1] - 10:19 16:34 [1] - 93:3 17 [2] - 3:11, 101:17 17th [1] - 108:21 18 [1] - 121:19 19 [1] - 122:4 19th [1] - 108:17 1st [3] - 106:20, 107:14, 114:13				A&E [1] - 37:9 A's [1] - 105:22 abeyance [1] - 131:19 able [9] - 9:12, 14:26, 15:2, 16:9, 29:26, 41:16, 51:26, 71:26, 101:1 above-named [1] - 1:29 abroad [2] - 132:21, 141:4 absence [3] - 97:5, 127:9, 127:11 absolutely [3] - 15:23, 27:3, 109:3 abuse [6] - 102:10, 108:26, 123:16, 130:15, 130:18, 137:13 abused [2] - 102:21, 123:29 abuses [1] - 25:25 accept [9] - 26:2, 27:1, 31:17, 39:19, 84:11, 100:2, 109:3, 110:23, 137:21 acceptable [3] - 58:29, 140:19, 140:21 accepted [2] - 27:14, 138:24 accepts [7] - 26:19, 39:11, 65:10, 65:11, 65:12, 66:22, 109:19 access [3] - 7:23, 105:22, 127:1 accessing [3] - 102:11, 123:17,		
		3	7			
		3 [3] - 7:18, 112:21, 120:29 3-ish [1] - 32:1 31 [1] - 120:23 34 [1] - 3:16 35 [1] - 113:1 37 [1] - 3:17 3rd [1] - 141:3	7 [6] - 96:27, 99:26, 121:6, 122:16, 122:29, 124:23 7.1 [1] - 99:27 7.4 [1] - 100:9 7.4.1 [1] - 100:13 7.4.2 [1] - 100:18 7.4.2.3 [3] - 100:22, 122:28, 124:27 70 [1] - 3:24 71 [3] - 95:1, 114:26, 118:21 72 [1] - 115:1			
		4		8		
		4 [3] - 7:22, 78:6, 121:13 405670 [1] - 1:13 41 [1] - 113:11 43 [1] - 114:7 46 [1] - 114:12 47 [1] - 3:18 49 [1] - 3:21	8 [6] - 1:8, 5:12, 113:19, 122:23, 126:10, 133:13 8.6 [1] - 101:18 8.6.2 [1] - 101:29 8.6.2.5 [1] - 102:2 80 [1] - 3:27 82 [1] - 3:28 87 [1] - 3:29	25:25 accept [9] - 26:2, 27:1, 31:17, 39:19, 84:11, 100:2, 109:3, 110:23, 137:21 acceptable [3] - 58:29, 140:19, 140:21 accepted [2] - 27:14, 138:24 accepts [7] - 26:19, 39:11, 65:10, 65:11, 65:12, 66:22, 109:19 access [3] - 7:23, 105:22, 127:1 accessing [3] - 102:11, 123:17,		
		5	9			
		50 [1] - 104:19	9 [5] - 1:19, 3:5,			
2		6				
2 [5] - 1:18, 7:17, 95:13, 113:25, 120:16 20 [6] - 17:2, 102:5, 121:7,		6 [2] - 122:10, 128:15 6.1 [1] - 97:10 6.2 [1] - 97:10				

adjournment [4] - 109:2, 109:3, 109:11, 109:14 admissible [1] - 91:17 admission [2] - 92:5, 117:2 admissions [15] - 10:4, 66:24, 74:24, 74:26, 74:27, 75:9, 75:16, 89:25, 99:22, 107:22, 108:24, 112:16, 138:7, 138:27, 142:13 admit [1] - 65:22 admits [1] - 67:2 admittance [1] - 28:23 admitted [22] - 26:6, 26:14, 26:22, 28:19, 31:13, 39:15, 40:9, 64:6, 64:13, 66:17, 67:6, 67:19, 74:22, 89:22, 91:12, 92:12, 98:14, 99:8, 99:13, 106:7, 115:17, 135:11 admitting [1] - 142:17 admonishment [1] - 95:3 adopted [2] - 64:20, 64:26 adults [2] - 102:23, 124:2 advanced [1] - 106:22 advances [6] - 58:5, 58:23, 63:5, 63:9, 63:16, 63:17 advice [22] - 6:21, 6:23, 6:26, 10:23, 15:28, 16:1, 76:23, 91:1, 91:6, 91:15, 91:27, 92:1, 92:16, 95:3, 127:29, 134:28, 138:1, 139:22, 141:20, 141:25, 142:3, 142:5 ADVICE [6] - 3:31, 4:5, 4:13, 91:4, 134:26,	141:18 advise [1] - 101:13 advised [3] - 53:20, 53:21, 53:24 affect [2] - 24:5, 60:20 affirm [10] - 11:20, 11:22, 11:23, 32:17, 48:23, 48:25, 48:26, 76:18, 78:19, 78:20 affirmation [1] - 91:9 affirmed [4] - 11:25, 32:20, 49:11, 78:22 AFFIRMED [4] - 13:1, 34:1, 49:29, 80:1 afforded [2] - 134:12, 134:20 afraid [4] - 59:16, 63:3, 66:20 afternoon [13] - 5:4, 5:10, 10:25, 11:5, 13:4, 32:7, 32:10, 48:19, 48:20, 61:25, 78:17, 91:8 afterwards [2] - 59:9, 72:13 aggravated [2] - 86:1, 87:6 aggravating [8] - 96:25, 97:4, 97:6, 99:26, 99:28, 100:19, 108:12, 130:6 ago [7] - 35:7, 37:1, 50:22, 52:4, 83:6, 89:11, 98:13 agree [4] - 42:22, 45:22, 46:13, 84:10 agreed [1] - 142:6 ahead [1] - 49:14 AHSAN [2] - 3:15, 34:1 Ahsan [4] - 18:16, 31:24, 32:10, 32:20 AI [1] - 43:22 aim [1] - 93:17	AINE [1] - 2:10 alcohol [1] - 130:15 alike [2] - 19:26, 42:19 allegation [2] - 27:8, 62:18 allegations [46] - 5:13, 5:22, 10:4, 16:3, 16:4, 26:2, 26:13, 26:15, 27:6, 27:21, 38:5, 38:10, 38:15, 38:24, 38:29, 39:12, 39:15, 40:7, 40:9, 62:16, 62:24, 62:26, 63:24, 63:29, 64:2, 64:7, 64:10, 64:13, 64:14, 66:25, 75:14, 86:4, 86:17, 86:27, 87:9, 87:13, 89:23, 99:2, 99:3, 99:9, 103:9, 110:6, 110:23, 112:3, 135:11, 142:13 alleged [3] - 26:6, 109:19, 117:27 alleging [1] - 62:22 alleviated [1] - 40:23 allow [5] - 90:20, 104:23, 117:23, 136:19, 136:27 allowed [4] - 101:26, 115:6, 134:19, 134:29 almost [9] - 20:13, 20:22, 22:18, 42:22, 52:9, 57:8, 75:23, 84:20, 133:27 alone [5] - 16:22, 57:21, 86:22, 88:22, 88:28 ALSO [1] - 2:18 amended [1] - 5:29 amount [1] - 108:12 amounts [1] - 135:9 analysis [1] - 108:13 AND [1] - 78:14	anguish [1] - 111:19 anonymisation [7] - 9:21, 10:2, 10:9, 119:1, 119:5, 138:25, 139:1 anonymised [2] - 5:21, 5:23 anonymity [2] - 118:26, 139:6 answer [13] - 20:18, 23:9, 23:29, 37:19, 57:20, 61:20, 69:23, 75:2, 82:21, 113:16, 135:17 answerable [1] - 66:12 answered [4] - 23:24, 41:10 answering [2] - 23:12 answers [2] - 69:9, 113:12 anti [2] - 36:11, 36:18 anti-anxiety [2] - 36:11, 36:18 anticoagulant [1] - 73:11 antidepressant [1] - 14:21 anxiety [8] - 15:6, 36:9, 36:11, 36:18, 56:7, 60:5, 68:17, 69:2 anxiolytic [1] - 60:26 anxiolytics [2] - 51:10, 52:24 anxious [2] - 7:23, 8:8 anything.. [1] - 8:21 anyway [1] - 138:8 apart [2] - 90:12, 116:3 apologies [3] - 7:13, 74:4, 140:24 apologise [2] - 86:7, 100:3 apologised [2] - 87:5, 132:27 apology [5] - 111:4, 111:10, 115:29, 116:3,	132:6 appear [3] - 104:19, 123:5, 135:10 APPEARANCE [1] - 2:2 appeared [1] - 42:23 appearing [1] - 17:15 appellant [1] - 2:32 application [5] - 9:27, 109:16, 109:21, 109:28, 118:27 applications [4] - 109:2, 109:4, 109:11, 109:14 applying [1] - 95:9 appreciate [2] - 10:23, 97:3 appreciated [1] - 30:21 approach [18] - 46:10, 82:5, 94:16, 96:17, 96:18, 99:19, 115:12, 120:3, 120:14, 120:21, 121:3, 121:16, 121:28, 124:23, 125:14, 129:13, 132:27, 137:26 approachable [2] - 16:26, 129:14 approached [2] - 108:1, 120:3 approaches [1] - 125:23 appropriate [10] - 10:8, 94:27, 96:6, 96:21, 101:19, 102:1, 117:8, 118:20, 124:22, 142:2 appropriately [2] - 100:5, 122:27 APRIL [2] - 1:19, 5:2 April [16] - 106:16, 106:20, 107:14, 111:17, 114:13, 120:11, 120:20, 120:23, 121:2, 121:4, 121:15, 121:17, 121:27, 121:29, 122:10, 133:28	area [1] - 132:15 argue [1] - 57:18 arguing [2] - 66:28, 67:1 arguments [2] - 6:18, 113:8 arise [7] - 6:18, 71:8, 77:16, 92:29, 98:6, 116:25, 139:28 arisen [1] - 129:21 arises [5] - 69:4, 69:6, 77:17, 103:7, 117:7 arising [3] - 69:15, 69:16, 132:3 arose [2] - 98:22, 107:22 arrange [1] - 76:16 arranged [1] - 136:6 article [5] - 25:15, 25:18, 25:28, 26:27, 27:28 AS [13] - 5:1, 13:2, 17:11, 28:4, 34:2, 37:22, 47:4, 50:1, 61:23, 68:13, 78:14, 80:2, 82:26 aspects [2] - 91:7, 94:20 assault [7] - 102:10, 102:14, 123:16, 123:20, 124:14, 125:6, 137:13 assess [1] - 54:5 assessed [1] - 126:25 assessment [3] - 76:5, 77:5, 126:29 ASSESSOR [1] - 2:6 assessor [4] - 6:13, 6:15, 6:27, 141:25 assist [3] - 6:17, 17:24, 18:2 assistance [2] - 8:23, 43:12 association [4] - 19:22, 22:9, 42:15, 45:14 assure [2] -
--	--	---	---	---	---

125:25, 126:2 AT [1] - 1:18 attach [2] - 99:17, 115:28 attached [1] - 98:26 attachment [1] - 95:4 attack [1] - 103:10 attacks [1] - 73:13 attempt [1] - 113:4 attempted [3] - 120:2, 120:3, 135:29 attempts [1] - 100:3 attend [1] - 41:16 attendance [11] - 6:17, 33:5, 47:20, 49:23, 57:17, 57:18, 77:19, 78:28, 79:8, 140:6, 140:7 attended [2] - 15:12, 98:7 attending [2] - 49:25, 130:19 attention [8] - 9:21, 9:28, 10:24, 96:29, 103:1, 112:22, 139:29, 141:13 attest [8] - 11:20, 11:23, 32:17, 48:24, 48:25, 48:26, 78:19, 78:20 attitude [6] - 62:25, 62:27, 82:17, 82:18, 86:4, 86:17 attraction [1] - 103:27 August [1] - 108:17 Australia [2] - 30:6, 132:17 author [5] - 97:17, 97:18, 97:22, 98:27, 131:26 author's [3] - 97:20, 97:26, 97:27 authorities [3] -	53:26, 67:23, 87:4 authors [1] - 99:1 automatically [1] - 124:27 autonomy [1] - 103:13 availability [4] - 109:26, 140:29, 141:1, 141:7 available [16] - 10:18, 30:15, 31:29, 32:24, 44:1, 78:5, 95:2, 96:16, 110:13, 118:15, 127:26, 132:8, 132:9, 140:17, 141:3, 141:8 avoid [1] - 71:10 avoidance [1] - 119:4 await [1] - 131:24 aware [31] - 14:29, 15:3, 15:7, 15:10, 15:11, 26:5, 26:20, 26:21, 26:22, 27:15, 27:16, 27:27, 28:23, 35:26, 36:8, 36:10, 39:1, 39:14, 39:26, 40:24, 61:1, 61:3, 61:5, 62:5, 97:18, 98:27, 99:8, 126:23, 126:25, 126:29, 127:3 awful [1] - 127:5	background [6] - 28:16, 38:18, 39:3, 39:10, 40:17, 60:1 backgrounds [1] - 129:29 bad [4] - 26:4, 27:5, 60:17, 65:3 badly [1] - 104:26 Baig [9] - 7:18, 14:12, 48:1, 49:11, 49:13, 50:14, 125:17, 136:20, 136:25 BAIG [13] - 3:20, 48:20, 48:25, 48:27, 49:1, 49:3, 49:5, 49:7, 49:26, 49:29, 61:23, 68:13, 77:24 Baig's [1] - 136:27 balanced [1] - 100:14 bare [1] - 111:18 barrister [1] - 17:15 based [7] - 28:7, 37:13, 40:20, 46:28, 65:26, 76:5, 101:12 basing [1] - 76:5 basis [5] - 9:23, 10:2, 43:28, 113:7, 138:26 BE [1] - 142:22 bear [4] - 48:15, 114:17, 115:11, 123:11 because.. [1] - 19:14 become [1] - 136:9 becoming [4] - 71:27, 131:21, 132:12, 134:2 BEFORE [1] - 1:17 beg [2] - 7:11, 104:24 begin [3] - 5:4, 73:4, 96:27 behalf [11] - 8:6, 17:15, 37:26, 61:26, 83:1, 110:17, 111:9, 112:19, 112:20, 114:5, 135:1 behaved [1] -	89:26 behaviour [9] - 29:1, 44:12, 45:15, 77:3, 104:4, 125:1, 127:25, 129:1, 138:13 behind [2] - 43:20, 139:17 belated [4] - 115:28, 117:2, 127:19, 128:25 belatedly [1] - 123:4 belief [1] - 71:24 bell [1] - 88:24 below [1] - 100:20 benchmark [1] - 43:9 benefit [3] - 6:3, 48:13, 94:8 beside [1] - 28:16 best [5] - 8:11, 27:20, 47:24, 86:10, 99:3 better [10] - 32:17, 49:7, 51:26, 54:2, 54:25, 54:27, 71:28, 71:29, 72:23, 88:3 between [17] - 13:26, 31:29, 46:18, 53:23, 64:8, 82:18, 98:19, 99:4, 113:9, 119:29, 120:22, 121:6, 121:19, 122:4, 133:16, 133:18, 141:4 beyond [2] - 44:17, 57:29 bias [1] - 109:29 bigger [1] - 98:18 bit [3] - 13:27, 24:26, 30:4 BL [1] - 2:8 bleep [2] - 82:11, 82:13 bless [1] - 105:10 blindingly [1] - 135:17 block [2] - 104:23, 105:6 blocked [1] -	106:22 blood [2] - 60:16, 73:11 blunt [1] - 113:20 board [2] - 57:13, 57:19 bodies [1] - 117:5 bona [1] - 109:20 bonus [1] - 115:17 book [6] - 11:19, 11:21, 48:22, 48:23, 78:18 Book [1] - 104:19 boss [2] - 58:7, 66:15 boundaries [2] - 44:14, 45:17 brain [1] - 60:17 breaches [1] - 130:15 break [1] - 78:10 brief [6] - 14:26, 24:23, 124:15, 125:10, 134:17, 135:7 briefly [4] - 8:4, 94:15, 104:20, 116:12 BRIEFLY [1] - 78:14 bring [6] - 6:29, 104:13, 104:15, 106:14, 122:26, 140:9 bringing [1] - 10:24 broad [4] - 102:9, 123:15, 135:21, 137:12 brought [1] - 119:25 burden [1] - 53:28 busy [1] - 81:12 button [1] - 7:13 BY [50] - 2:10, 2:15, 3:5, 3:7, 3:10, 3:11, 3:12, 3:13, 3:16, 3:17, 3:18, 3:21, 3:22, 3:23, 3:24, 3:27, 3:28, 3:29, 3:31, 4:1, 4:3, 4:5, 4:7, 4:9, 4:11, 4:13, 9:16, 10:14, 13:2,	17:11, 28:4, 29:10, 34:2, 37:22, 47:4, 50:1, 61:23, 68:13, 70:1, 80:2, 82:26, 87:27, 91:4, 93:20, 119:18, 134:26, 135:5, 137:6, 139:3, 141:18 bye [4] - 30:24, 47:25
C					
camera [1] - 11:11 campaign [2] - 65:13, 115:22 Canada [1] - 110:12 cancel [2] - 118:8, 118:21 cancellation [8] - 94:29, 95:8, 101:18, 101:22, 117:8, 117:13, 118:12, 124:29 cancelled [4] - 41:17, 41:18, 102:27, 124:6 cannot [8] - 8:18, 57:6, 67:16, 75:11, 76:9, 89:3, 131:22, 131:23 cannulate [1] - 57:14 capabilities [1] - 35:5 capability [1] - 35:13 capable [2] - 58:14, 75:21 capacity [4] - 54:28, 57:29, 58:28, 129:12 car [1] - 88:10 care [14] - 28:26, 30:23, 47:24, 50:16, 54:4, 57:13, 61:17, 67:26, 76:17, 76:25, 77:21, 80:27, 82:17, 129:12 career [6] - 29:25, 29:26, 55:24, 103:12, 111:21, 131:22					

carefully ^[1] - 124:18 caretaker ^[1] - 76:15 caring ^[2] - 80:26, 82:18 carry ^[1] - 82:10 carrying ^[1] - 95:22 case ^[40] - 13:28, 24:5, 24:27, 25:8, 25:20, 25:21, 30:4, 30:7, 30:10, 32:2, 76:24, 92:12, 94:10, 94:26, 96:14, 96:16, 99:1, 99:14, 99:22, 100:24, 103:5, 103:7, 103:9, 106:2, 106:10, 117:9, 117:27, 118:13, 119:23, 122:26, 130:24, 130:25, 130:26, 135:15, 135:18, 136:2, 136:10, 136:13 Cases ^[1] - 100:18 cases ^[3] - 97:3, 100:11, 100:13 Castlebar ^[7] - 13:23, 24:6, 24:10, 24:18, 24:25, 30:19, 80:15 catastrophized ^[1] - 114:23 catastrophizing ^[1] - 114:29 causation ^[3] - 64:15, 66:3, 66:4 caused ^[6] - 58:11, 59:28, 60:2, 66:10, 104:3, 111:19 causing ^[3] - 53:15, 53:23, 53:28 ceased ^[1] - 127:25 censure ^[2] - 95:3 Centre ^[2] - 78:4, 80:6 CEO ^[11] - 2:8, 7:4, 110:5, 122:25, 123:8,	124:23, 125:1, 125:13, 127:12, 136:6, 137:25 CEO's ^[3] - 110:16, 117:12, 117:22 ceremonially ^[1] - 89:14 ceremony ^[1] - 15:12 certain ^[14] - 69:9, 83:29, 93:28, 94:20, 95:29, 96:25, 100:13, 101:29, 109:26, 112:22, 127:22, 135:22, 137:1, 141:23 certainly ^[8] - 22:22, 93:10, 124:15, 125:7, 125:10, 125:23, 132:4, 133:2 certificate ^[1] - 30:8 certify ^[1] - 1:27 cetera ^[2] - 44:2, 71:23 Chair ^[24] - 6:5, 7:25, 9:18, 11:28, 24:2, 31:14, 32:23, 43:19, 47:7, 47:12, 47:16, 47:17, 47:29, 49:17, 69:24, 78:25, 87:25, 87:29, 93:7, 93:23, 101:17, 118:18, 118:24, 134:15 CHAIR ^[1] - 2:4 Chairman ^[4] - 8:1, 8:12, 70:3, 91:6 CHAIRPERSON ^[99] - 5:4, 5:10, 7:11, 7:26, 7:29, 8:2, 8:15, 8:20, 8:23, 8:29, 9:7, 9:14, 10:10, 10:20, 10:28, 11:3, 11:27, 12:3, 21:4, 21:10, 29:5, 29:13, 30:13, 30:18, 30:23, 30:28, 31:4, 31:10, 31:16, 31:22, 31:25, 31:27, 32:4, 32:22, 47:14,	47:18, 48:13, 49:13, 69:19, 69:26, 70:4, 72:27, 74:2, 74:9, 74:13, 74:16, 74:20, 74:28, 75:4, 75:7, 75:12, 75:26, 75:28, 76:22, 77:2, 77:7, 77:14, 78:1, 78:5, 78:9, 78:24, 78:27, 87:19, 87:23, 88:1, 89:18, 89:22, 89:25, 89:29, 90:15, 90:21, 90:29, 92:28, 93:3, 93:8, 93:12, 93:15, 93:17, 101:3, 101:7, 101:10, 119:9, 119:13, 127:9, 134:9, 137:3, 137:27, 138:20, 138:24, 139:1, 139:10, 139:16, 140:3, 140:22, 140:29, 141:6, 141:12, 142:9, 142:20 challenged ^[1] - 110:19 chance ^[2] - 78:10, 104:27 change ^[2] - 57:12, 75:9 changed ^[6] - 28:7, 28:11, 28:12, 28:19, 57:19, 131:17 character ^[30] - 14:9, 18:8, 18:22, 19:8, 28:22, 36:21, 38:6, 38:16, 38:20, 38:21, 38:22, 38:25, 39:5, 39:8, 39:21, 40:14, 40:19, 40:28, 41:26, 42:12, 43:1, 43:7, 44:24, 45:28, 84:29, 85:15, 85:19, 125:22, 125:28, 127:14 characterise ^[1] - 114:28 characterised ^[1] - 106:11 charges ^[8] -	119:24, 123:3, 123:6, 124:19, 124:21, 124:25, 133:11, 133:12 check ^[7] - 5:5, 8:29, 53:4, 72:16, 140:29, 141:1, 141:8 checked ^[1] - 20:26 Chief ^[6] - 17:15, 37:26, 61:26, 83:1, 115:29, 117:3 child ^[3] - 102:11, 123:17, 137:14 children ^[6] - 34:27, 102:11, 102:23, 123:17, 124:2, 137:14 choose ^[1] - 43:9 chosen ^[1] - 41:3 chronology ^[1] - 108:13 circumstance ^[1] - 128:21 circumstances ^[27] - 10:3, 10:9, 36:14, 38:1, 96:26, 98:17, 99:16, 102:19, 102:28, 118:12, 120:4, 120:26, 121:9, 121:21, 122:7, 122:13, 122:19, 123:27, 124:7, 126:19, 126:27, 127:12, 129:19, 131:17, 136:12, 136:22, 141:27 circumvent ^[1] - 107:6 claimed ^[1] - 62:16 Claire ^[4] - 107:14, 110:12, 113:18, 122:11 clear ^[9] - 44:14, 76:1, 77:15, 99:1, 99:10, 105:25, 106:26, 119:10, 136:24 clearly ^[1] - 103:26 Clexane ^[5] - 73:6, 73:8, 73:9,	73:10 client ^[2] - 139:13, 142:16 clinic ^[2] - 50:19 clinical ^[6] - 28:26, 44:16, 45:19, 46:9, 47:21, 82:4 clock ^[3] - 32:1, 78:6, 93:4 close ^[6] - 94:8, 102:13, 123:19, 135:26, 137:16, 137:19 CLOSING ^[4] - 4:1, 4:3, 93:20, 119:18 clue ^[1] - 27:24 Co ^[1] - 80:6 coherent ^[2] - 72:9, 77:9 coin ^[1] - 97:5 coincidental ^[1] - 43:11 collar ^[1] - 122:26 colleague ^[19] - 17:5, 27:25, 37:19, 38:14, 38:24, 39:4, 40:21, 53:18, 58:4, 58:22, 61:21, 64:8, 67:5, 80:15, 82:22, 85:28, 86:1, 86:28, 89:26 colleagues ^[22] - 5:5, 8:24, 10:28, 19:25, 20:10, 29:6, 42:3, 42:18, 46:11, 47:14, 48:14, 52:3, 53:18, 69:27, 74:3, 76:20, 84:16, 87:23, 90:6, 90:8, 103:17, 140:22 college ^[2] - 14:6, 14:16 coloured ^[1] - 65:2 combined ^[2] - 46:9, 82:4 coming ^[7] - 11:13, 14:3, 43:27, 59:29, 69:13, 109:5, 109:7 commence ^[1] - 51:8	commenced ^[5] - 14:13, 15:4, 51:24, 59:6, 106:2 commencement ^[1] - 129:21 comment ^[6] - 10:16, 56:9, 64:3, 84:23, 92:29, 137:8 comments ^[1] - 10:11 Commission ^[1] - 17:6 commit ^[1] - 86:8 committed ^[3] - 20:8, 22:2, 42:1 Committee ^[114] - 5:5, 5:11, 6:5, 6:6, 6:11, 6:13, 6:16, 6:17, 6:22, 6:25, 7:4, 9:22, 10:7, 11:29, 12:5, 20:12, 22:17, 23:4, 23:23, 23:26, 25:12, 28:24, 29:2, 29:6, 32:23, 32:27, 35:20, 37:29, 38:3, 40:12, 42:9, 47:9, 47:14, 48:13, 49:18, 61:27, 61:29, 66:23, 69:25, 69:26, 70:6, 78:25, 78:29, 79:4, 84:22, 85:17, 87:23, 91:1, 91:8, 91:23, 91:24, 92:1, 92:4, 92:19, 93:27, 94:5, 94:16, 94:28, 96:11, 96:24, 97:3, 98:21, 98:25, 99:17, 100:27, 103:19, 104:8, 108:24, 109:28, 110:19, 110:29, 111:1, 111:6, 111:18, 111:23, 111:25, 112:13, 112:28, 115:9, 115:11, 115:16, 115:27, 118:15, 118:19, 118:24, 118:28, 119:6, 119:7, 119:20, 122:27, 124:19,
---	--	--	--	---	--

125:2, 125:8, 127:16, 127:28, 130:4, 132:6, 133:28, 134:28, 135:14, 136:8, 136:19, 137:22, 137:29, 138:2, 138:14, 140:16, 140:22, 141:9, 141:21, 141:22, 141:28, 142:11 COMMITTEE [9] - 1:7, 1:17, 2:4, 3:13, 3:24, 3:29, 29:10, 70:1, 87:27 Committee's [5] - 9:21, 9:28, 94:21, 108:13, 139:9 Committees [1] - 108:7 communicate [1] - 105:19 communication n [3] - 37:6, 53:13, 53:25 community [2] - 35:19, 129:11 compassion [1] - 46:8 compassionate e [5] - 19:24, 20:9, 42:2, 42:17, 81:26 competent [2] - 46:6, 85:8 Complainant [1] - 5:21 Complainants [2] - 53:19, 58:5 complained [8] - 58:6, 71:14, 71:16, 104:9, 105:28, 112:5, 112:7, 115:18 complaining [1] - 90:10 complaint [10] - 93:29, 94:3, 105:19, 106:26, 107:15, 108:16, 108:19, 108:25, 111:13, 129:1 complaints [5] - 62:9, 62:11, 62:14, 115:24, 133:26 complete [4] - 35:4, 35:11, 72:7,	129:10 completed [1] - 45:6 completely [4] - 43:11, 44:25, 126:20, 138:21 complex [1] - 16:7 complied [1] - 116:28 composed [1] - 91:22 computer [4] - 43:2, 43:3, 43:6, 43:16 computers [1] - 44:2 conceive [2] - 76:7, 76:9 concept [1] - 96:11 concern [2] - 75:13, 96:8 concerned [7] - 60:11, 60:13, 60:22, 63:4, 92:4, 92:5, 99:4 concerning [4] - 73:1, 91:16, 111:14, 142:1 concerns [3] - 9:24, 88:15, 113:29 conclude [3] - 60:21, 76:27, 109:9 conclusion [7] - 77:3, 77:8, 93:25, 94:24, 115:29, 140:9, 140:12 concords [1] - 75:29 condition [6] - 60:8, 60:19, 69:1, 72:22, 128:7, 136:14 conditions [2] - 95:5, 130:16 conduct [23] - 74:22, 89:22, 95:19, 95:24, 102:9, 103:5, 103:25, 104:3, 104:7, 104:17, 107:1, 108:11, 110:1, 115:18, 117:15, 118:3, 118:8, 123:5, 123:15, 134:4, 135:21, 137:12,	142:17 confidence [8] - 35:4, 35:11, 95:17, 102:20, 117:22, 117:25, 123:28, 129:10 confined [2] - 107:12, 116:22 confirm [3] - 50:11, 52:5, 76:20 confirmed [2] - 74:11, 74:13 conflict [6] - 25:4, 25:9, 25:13, 26:24, 27:26, 98:2 confused [3] - 51:4, 53:8, 71:22 confusion [1] - 56:3 connect [2] - 48:15, 78:11 connected [2] - 126:18, 141:29 connecting [1] - 78:1 connection [2] - 36:2, 120:8 conscientious [1] - 45:17 conscious [5] - 22:24, 57:7, 134:17, 138:5, 140:3 consensual [2] - 102:15, 123:21 consent [2] - 58:28, 91:12 consents [2] - 58:27, 58:29 consequences [1] - 137:1 conservative [1] - 60:1 consider [8] - 70:11, 92:19, 97:16, 126:6, 127:28, 130:4, 139:23, 142:3 consideration [10] - 124:20, 127:16, 128:17, 128:24, 128:26, 129:16, 131:16, 132:25, 133:29, 134:1 considered [7] - 39:22, 45:15, 100:14, 100:20,	126:7, 127:23, 136:20 considering [6] - 53:7, 96:6, 119:21, 123:9, 124:22, 126:15 considers [1] - 130:19 consistent [2] - 76:1, 77:9 consistently [2] - 21:20, 46:7 constitutes [1] - 67:6 constrained [1] - 134:14 constraints [2] - 8:7, 31:28 consultant [7] - 56:22, 57:4, 57:10, 57:11, 57:17, 58:20, 59:26 consultants [1] - 57:1 consultation [1] - 51:20 consultations [2] - 52:11, 72:3 consulted [1] - 61:13 consulting [2] - 54:16, 140:23 contact [46] - 13:24, 26:16, 34:25, 34:29, 53:21, 53:22, 53:26, 54:1, 59:13, 59:14, 80:19, 81:7, 88:13, 97:23, 97:26, 103:15, 104:23, 104:24, 106:7, 106:18, 106:21, 106:25, 106:27, 106:28, 107:12, 107:13, 107:14, 107:20, 107:25, 107:26, 114:18, 120:2, 120:14, 120:21, 121:3, 121:5, 121:16, 121:18, 121:28, 122:1, 122:3, 122:12, 122:18, 125:26 contacted [3] - 71:12, 107:7, 120:2 contacts [2] -	76:11, 142:12 contain [1] - 100:18 content [1] - 91:27 contents [4] - 17:28, 38:28, 92:7, 92:26 contesting [2] - 40:7, 74:23 context [7] - 61:28, 62:7, 63:12, 85:16, 99:11, 109:13, 112:16 continue [10] - 21:7, 21:10, 32:6, 117:16, 117:23, 117:28, 119:14, 132:10, 132:11, 134:15 continued [2] - 106:3, 115:23 continues [3] - 111:28, 130:9, 131:19 continuous [1] - 64:27 continuously [3] - 61:11, 71:11, 72:13 contravention [1] - 5:15 contribute [1] - 17:28 contributed [2] - 20:17, 20:19 contrition [4] - 112:4, 115:11, 116:29, 117:19 control [4] - 55:20, 115:7, 128:6, 128:29 convene [1] - 140:17 conversations [2] - 55:26, 72:2 convicted [2] - 102:24, 124:3 conviction [4] - 130:5, 130:12, 132:1, 133:2 convictions [1] - 132:2 cooperated [1] - 108:6 cooperation [1] - 97:11 coordinators [1] - 84:12	copied [5] - 21:26, 22:29, 23:1, 24:4 copies [1] - 112:27 copy [5] - 17:18, 19:17, 22:22, 101:3, 125:9 COPYRIGHT [1] - 2:30 Core [1] - 104:19 Cork [1] - 81:5 Corona [1] - 105:12 correct [28] - 5:29, 10:19, 13:7, 24:16, 24:27, 34:8, 34:9, 34:12, 39:27, 50:5, 50:8, 50:10, 51:21, 51:22, 55:8, 59:11, 64:25, 68:22, 70:8, 70:21, 74:7, 76:8, 76:27, 80:6, 80:8, 105:2, 113:27, 118:7 correction [2] - 111:11, 129:27 correctly [3] - 53:1, 75:23, 125:16 COUNCIL [3] - 1:3, 2:19, 2:21 Council [38] - 13:15, 17:16, 26:12, 37:27, 53:15, 53:27, 61:27, 64:18, 83:1, 93:27, 94:8, 94:11, 94:28, 95:2, 95:21, 96:7, 96:26, 97:15, 100:15, 101:12, 101:15, 104:11, 105:29, 106:26, 108:6, 108:20, 110:9, 111:7, 112:6, 112:8, 113:19, 115:25, 118:6, 118:15, 126:15, 134:11, 134:24, 139:19 Council's [3] - 94:18, 95:13, 96:24 counsel [10] - 6:12, 12:6, 33:3, 75:1, 79:6, 112:19, 112:20,
---	--	--	--	---	--

113:1, 114:4, 126:2 counsels [3] - 77:15, 140:16, 140:23 count [2] - 99:23, 107:2 counteract [1] - 71:8 counting [1] - 119:12 country [2] - 105:10, 114:2 countryside [1] - 131:10 couple [2] - 80:16, 96:28 course [15] - 6:19, 31:16, 34:24, 34:28, 34:29, 45:4, 91:16, 94:5, 97:1, 108:11, 109:19, 110:14, 111:3, 112:11, 142:2 courses [4] - 131:20, 132:7, 133:19, 133:20 Court [1] - 141:5 court [1] - 134:22 courteous [2] - 80:22, 84:13 cousin [2] - 76:14, 76:15 cover [5] - 56:24, 57:24, 57:25, 59:20, 63:20 covered [1] - 74:6 covering [1] - 59:19 Covid [3] - 67:22, 67:24, 76:13 CPD [8] - 116:12, 116:17, 116:28, 122:23, 130:19, 132:8, 133:15, 133:16 cracks [1] - 133:18 create [1] - 113:22 creating [2] - 45:18, 115:4 credibility [1] - 110:19 crescendo [1] -	104:7 criminal [4] - 130:5, 130:12, 132:1, 133:2 critical [3] - 50:16, 66:21, 98:25 CROSS [8] - 3:11, 3:17, 3:22, 3:28, 17:11, 37:22, 61:23, 82:26 cross [12] - 69:7, 92:9, 107:19, 107:24, 109:25, 110:17, 110:28, 112:14, 112:15, 112:19, 115:19, 115:21 cross- examination [6] - 69:7, 107:19, 107:24, 110:28, 112:15, 115:21 cross- examinations [1] - 109:25 cross- examined [5] - 92:9, 110:17, 112:14, 112:19, 115:19 CROSS- EXAMINED [8] - 3:11, 3:17, 3:22, 3:28, 17:11, 37:22, 61:23, 82:26 cruel [1] - 104:28 cullen [1] - 110:18 Cullen [4] - 107:14, 110:12, 113:18, 122:11 culpability [1] - 136:15 cultures [4] - 129:23, 129:27, 129:29, 130:27 current [2] - 30:1, 88:17 customarily [1] - 135:3 customary [1] - 141:21 cut [1] - 47:1	D damage [1] - 139:9 Damocles [2] - 131:25, 131:28 DATE [1] - 142:22 date [9] - 40:8, 75:10, 83:4, 97:24, 111:11, 133:22, 133:24, 139:13, 139:28 dated [5] - 13:6, 17:18, 34:11, 39:24, 98:14 dates [4] - 15:2, 24:7, 91:19, 140:25 DAVIN [24] - 2:5, 5:8, 7:25, 7:27, 8:19, 8:22, 29:12, 29:14, 29:20, 29:29, 30:11, 47:17, 72:29, 73:17, 73:22, 73:29, 87:29, 88:2, 88:7, 88:14, 89:7, 89:12, 89:16, 140:21 Davin [10] - 5:6, 6:9, 7:26, 8:13, 32:29, 49:19, 49:20, 72:27, 79:1, 79:2 DAVIN-POWER [24] - 2:5, 5:8, 7:25, 7:27, 8:19, 8:22, 29:12, 29:14, 29:20, 29:29, 30:11, 47:17, 72:29, 73:17, 73:22, 73:29, 87:29, 88:2, 88:7, 88:14, 89:7, 89:12, 89:16, 140:21 Davin-Power [10] - 5:6, 6:9, 7:26, 8:13, 32:29, 49:19, 49:20, 72:27, 79:1, 79:2 DAY [1] - 1:19 days [4] - 17:2, 51:20, 51:23, 58:19 dead [1] - 57:8 deal [2] - 113:15, 118:25	dealing [5] - 37:12, 37:14, 38:7, 55:5, 55:7 dealings [3] - 54:14, 80:29, 139:7 deals [1] - 101:18 dealt [2] - 36:29, 37:6 decade [1] - 80:20 decide [2] - 119:6, 135:14 DECIDED [1] - 142:22 decision [4] - 6:26, 75:22, 94:22, 125:2 decisions [4] - 74:29, 75:6, 75:8, 75:21 dedicated [4] - 19:23, 22:10, 42:16, 132:9 dedication [2] - 35:15, 46:7 deemed [1] - 44:12 deeply [5] - 19:24, 20:9, 22:2, 42:2, 42:17 default [2] - 9:28, 118:28 defend [1] - 110:27 definitely [4] - 16:28, 36:2, 67:21, 81:23 definition [2] - 123:11, 135:19 definitions [1] - 123:9 definitive [3] - 53:9, 53:11, 140:12 degree [3] - 26:15, 107:1, 131:26 delay [3] - 11:17, 12:4, 109:4 delayed [1] - 109:7 delays [1] - 108:29 deliberate [1] - 94:11 delivered [1] - 111:10 delusion [1] -	76:29 delusional [4] - 76:28, 77:3, 77:11, 128:12 demanding [1] - 105:22 demonstrate [2] - 95:23, 95:25 demonstrated [3] - 21:1, 21:14, 115:10 demonstrates [1] - 46:7 denied [1] - 27:7 dental [1] - 50:19 denying [1] - 27:6 dependable [1] - 81:16 dependent [2] - 92:13 depressed [2] - 71:2, 71:3 depression [14] - 15:7, 16:17, 52:19, 54:5, 54:6, 59:4, 68:17, 68:20, 69:2, 71:2, 71:7, 131:1, 132:29 depressive [3] - 52:27, 130:28, 132:28 describe [1] - 81:15 described [4] - 15:21, 16:25, 123:12, 128:18 despite [3] - 106:13, 106:28, 126:23 detail [4] - 63:27, 86:27, 100:20, 111:27 detailed [2] - 71:20, 72:21 details [13] - 22:29, 25:7, 25:14, 27:25, 27:27, 29:29, 35:28, 38:11, 38:17, 39:6, 39:20, 97:27 deter [1] - 95:21 determination [2] - 139:16, 139:18 determine [1] - 137:24	determining [1] - 98:26 develop [1] - 71:3 developed [1] - 103:28 development [1] - 100:7 DEVINS [18] - 2:4, 5:9, 8:1, 8:12, 8:18, 8:26, 9:3, 29:8, 47:16, 70:3, 70:5, 70:10, 70:19, 70:24, 71:5, 71:18, 72:25, 87:25 Devins [9] - 5:6, 6:8, 32:28, 49:18, 49:19, 70:6, 79:1, 128:9 diagnosed [3] - 68:19, 68:21, 130:29 diagnosis [6] - 59:4, 69:16, 69:21, 74:9, 74:10, 74:11 dialling [1] - 8:8 dialogue [1] - 7:28 DIARMAID [1] - 2:6 Diarmuid [1] - 6:12 diary [1] - 141:11 Diazepam [4] - 51:11, 51:14, 51:25, 59:7 dictionaries [2] - 43:17, 43:23 dictionary [2] - 41:3, 44:23 die [4] - 56:27, 57:14, 104:27, 104:29 difference [3] - 129:26, 130:27, 133:16 differences [1] - 46:18 different [10] - 9:19, 14:14, 25:25, 35:8, 37:8, 98:17, 107:2, 107:4, 129:29 difficult [1] - 112:11 difficulties [1] - 115:5
---	--	---	--	---	---

difficulty ^[1] - 8:1 dignity ^[2] - 103:11, 105:26 dimension ^[1] - 103:25 dinner ^[1] - 104:1 direct ^[1] - 67:15 direction ^[1] - 116:8 DIRECTLY ^[8] - 3:10, 3:16, 3:21, 3:27, 13:1, 34:1, 49:29, 80:1 director ^[1] - 38:19 disability ^[1] - 136:10 disagreed ^[1] - 142:6 disagreement ^[1] - 26:25 discharged ^[1] - 109:13 disclose ^[1] - 5:28 disclosed ^[1] - 103:12 disclosures ^[1] - 6:1 disconnect ^[1] - 77:22 discount ^[1] - 138:20 discuss ^[2] - 37:11, 94:20 discussing ^[4] - 55:27, 56:11, 62:8, 85:22 discussion ^[3] - 23:3, 29:20, 141:29 discussions ^[1] - 29:23 disease ^[1] - 70:29 dishonest ^[1] - 128:14 dishonesty ^[2] - 130:24 disorder ^[1] - 130:15 displayed ^[2] - 21:20, 89:20 dispute ^[1] - 67:4 disputes ^[1] - 39:11 disrespectful ^[1]	- 45:16 disrupted ^[1] - 54:2 distress ^[1] - 111:18 disturbance ^[1] - 58:12 division ^[1] - 95:7 divorced ^[1] - 99:11 doctor ^[54] - 7:23, 11:5, 18:15, 22:25, 26:11, 26:16, 30:11, 32:28, 32:29, 33:1, 35:13, 36:20, 42:10, 46:2, 46:7, 48:19, 54:29, 55:3, 64:19, 65:14, 68:6, 70:5, 71:18, 74:14, 75:13, 76:6, 76:25, 77:21, 77:29, 78:1, 80:10, 81:27, 81:28, 83:21, 84:7, 85:9, 88:2, 89:16, 89:25, 92:6, 92:8, 92:9, 92:25, 99:19, 116:24, 117:26, 119:25, 125:16, 125:17, 125:21, 129:12, 132:10 doctor's ^[1] - 22:18 doctors ^[13] - 32:11, 72:17, 76:11, 76:12, 91:10, 91:17, 91:29, 92:2, 92:12, 116:26, 125:19, 125:21, 129:24 document ^[28] - 17:20, 17:22, 17:24, 17:29, 18:3, 18:5, 20:19, 20:22, 20:23, 22:18, 22:19, 41:4, 41:8, 43:15, 72:19, 83:14, 83:16, 94:18, 95:13, 96:25, 96:28, 100:29, 101:4, 101:13, 103:2, 108:3, 117:10, 135:20	documents ^[1] - 94:25 done ^[11] - 35:25, 50:15, 59:13, 62:15, 63:14, 71:25, 86:7, 86:14, 99:21, 139:5, 139:9 door ^[1] - 136:10 dosage ^[4] - 55:13, 55:15, 55:17 dose ^[3] - 60:16, 73:12, 73:14 double ^[2] - 5:5, 20:25 doubt ^[5] - 65:7, 65:8, 91:24, 119:4, 137:10 down ^[4] - 22:23, 43:17, 69:14, 73:19 dr ^[2] - 50:3, 68:9 Dr ^[134] - 5:6, 6:9, 7:16, 7:17, 7:18, 7:19, 7:24, 7:26, 8:13, 10:18, 11:25, 11:27, 13:4, 14:12, 17:4, 17:8, 17:14, 18:6, 18:16, 18:17, 19:5, 19:19, 20:4, 20:14, 20:22, 21:8, 21:18, 22:7, 22:22, 23:4, 23:7, 23:13, 23:29, 24:6, 26:5, 26:11, 27:13, 27:20, 28:1, 28:6, 29:2, 29:5, 29:14, 30:13, 31:8, 31:24, 32:7, 32:20, 32:22, 32:29, 34:4, 36:3, 37:18, 37:25, 41:21, 43:25, 44:7, 45:25, 46:1, 46:3, 46:29, 47:6, 47:12, 47:19, 48:1, 48:2, 48:8, 49:11, 49:13, 49:19, 49:20, 50:14, 61:18, 61:20, 61:25, 63:23, 63:27, 64:12, 64:16, 65:6, 65:11, 65:25, 66:5, 66:6,	66:19, 66:28, 67:12, 67:27, 67:28, 68:15, 69:21, 69:23, 69:26, 72:20, 72:27, 73:5, 73:29, 74:2, 77:28, 78:22, 78:24, 79:1, 79:2, 80:4, 82:24, 82:29, 85:16, 87:18, 89:18, 107:25, 110:10, 110:11, 110:12, 110:18, 122:11, 125:17, 126:6, 128:4, 128:9, 128:10, 128:18, 128:27, 129:17, 129:20, 130:29, 131:3, 131:7, 132:3, 132:18, 136:20, 136:25, 136:27 DR ^[65] - 2:5, 3:9, 3:15, 3:20, 3:26, 5:8, 7:25, 7:27, 8:19, 8:22, 11:4, 11:6, 11:12, 11:21, 12:1, 13:1, 17:9, 17:11, 28:4, 29:12, 29:14, 29:20, 29:29, 30:11, 30:17, 30:21, 30:24, 32:10, 33:6, 34:1, 37:22, 47:4, 47:17, 47:23, 48:20, 48:25, 48:27, 49:1, 49:3, 49:5, 49:7, 49:26, 49:29, 61:23, 68:13, 72:29, 73:17, 73:22, 73:29, 77:24, 78:20, 78:26, 79:10, 80:1, 82:26, 87:29, 88:2, 88:7, 88:14, 89:7, 89:12, 89:16, 89:17, 90:25, 140:21 drafting ^[1] - 18:3 draw ^[5] - 9:20, 9:27, 96:28, 103:1, 112:21 drawn ^[1] - 140:8 drawn-out ^[1] -	140:8 drink ^[3] - 57:6, 59:27, 63:19 dropped ^[1] - 21:9 drug ^[3] - 73:4, 130:14 drugs ^[2] - 70:11, 70:12 Dubh ^[1] - 107:8 Dublin ^[1] - 35:8 DUBLIN ^[1] - 1:18 due ^[2] - 56:20, 88:16 duplicated ^[1] - 85:12 during ^[17] - 6:18, 35:23, 36:15, 44:11, 55:26, 58:19, 63:18, 67:22, 71:10, 100:4, 109:11, 119:29, 120:22, 121:6, 121:19, 122:3, 131:27 duties ^[2] - 80:25, 82:16	105:11, 142:1 elaborate ^[3] - 113:23, 113:24, 114:1 elected ^[1] - 110:22 element ^[2] - 16:12, 130:10 elements ^[1] - 28:29 elevated ^[1] - 86:24 eleventh ^[1] - 110:21 elsewhere ^[2] - 30:19, 137:24 emergency ^[1] - 57:25 Emergency ^[1] - 34:20 emigrating ^[2] - 132:17, 132:21 emotional ^[1] - 58:17 empathetic ^[6] - 46:10, 80:24, 82:5, 82:18, 129:13, 132:10 empathy ^[1] - 35:15 employment ^[2] - 97:28, 120:8 encapsulate ^[1] - 122:29 encapsulated ^[1] - 44:1 encloses ^[1] - 91:28 encompass ^[2] - 123:15, 135:21 encompasses ^[3] - 91:29, 102:9, 137:12 encountered ^[1] - 25:3 end ^[9] - 40:2, 40:6, 41:20, 44:9, 45:11, 113:25, 130:22, 133:27, 141:4 ended ^[1] - 24:18 energy ^[1] - 124:20 engage ^[1] - 100:6 engaged ^[3] - 65:12, 108:6, 117:15 engaging ^[1] -
E					
e-mail ^[3] - 41:6, 41:13, 45:9 e-mails ^[1] - 71:14 earliest ^[2] - 141:8, 141:14 early ^[1] - 140:20 easiest ^[1] - 140:18 eat ^[1] - 57:6 effect ^[5] - 60:26, 96:1, 111:27, 115:9, 116:6 effects ^[1] - 71:8 efficient ^[1] - 80:28 effort ^[1] - 107:3 efforts ^[2] - 106:13, 111:25 egregious ^[4] - 104:16, 104:17, 117:15, 125:1 eight ^[1] - 39:15 either ^[5] - 5:25, 47:18, 99:2,					

134:4 enhance [1] - 14:18 enhancing [1] - 14:21 ensure [2] - 7:23, 133:20 ensures [1] - 44:14 enter [1] - 141:28 entire [1] - 9:11 entirely [2] - 99:11, 117:25 entirety [1] - 135:1 entitled [3] - 110:27, 110:29, 111:2 environment [5] - 36:17, 44:15, 45:18, 67:10, 90:5 episode [2] - 115:22, 116:23 equivalent [3] - 18:19, 45:10, 119:24 era [3] - 67:22, 67:24, 76:13 erode [1] - 117:24 escalate [1] - 86:15 escalated [1] - 86:12 escapes [1] - 129:25 especially [1] - 35:23 essence [2] - 45:2, 92:16 essential [1] - 8:26 establish [2] - 122:12, 122:18 established [1] - 103:26 et [2] - 44:2, 71:23 etc [2] - 125:14, 127:24 ethical [8] - 19:24, 20:9, 22:3, 22:11, 42:2, 42:17, 46:6, 85:8 evening [4] - 49:13, 70:5, 141:14, 142:18 event [2] - 5:25,	63:2 events [9] - 73:18, 76:13, 97:18, 98:27, 106:6, 108:13, 111:13, 116:10, 129:19 everywhere [1] - 139:8 evidence [69] - 9:1, 11:18, 15:17, 18:16, 32:15, 33:4, 38:2, 48:21, 49:25, 66:22, 67:16, 68:2, 68:24, 70:24, 78:16, 79:8, 84:24, 91:2, 91:8, 91:12, 91:17, 92:4, 92:6, 92:8, 92:9, 93:29, 94:9, 98:7, 100:3, 103:12, 103:19, 103:21, 103:26, 104:2, 106:16, 106:20, 108:5, 110:4, 110:7, 110:12, 110:13, 110:16, 110:22, 111:17, 112:14, 112:26, 113:25, 113:26, 115:13, 116:1, 116:4, 116:7, 116:8, 116:26, 125:14, 125:15, 126:12, 128:10, 128:15, 128:27, 129:16, 130:2, 130:14, 136:21, 136:25, 136:29, 141:22, 142:11, 142:15 evidential [4] - 91:7, 91:15, 92:24, 136:18 exact [3] - 15:2, 15:8, 77:5 exactly [8] - 15:19, 20:20, 24:10, 62:13, 62:15, 71:5, 83:4 exaggerated [1] - 114:9 exam [3] - 36:25, 36:26, 57:27 examination [12] - 36:12, 36:16, 69:4, 69:7, 102:15, 107:19, 107:24, 110:28,	112:15, 115:21, 123:21, 136:7 examinations [2] - 35:9, 109:25 examined [5] - 92:9, 110:17, 112:14, 112:19, 115:19 EXAMINED [22] - 3:10, 3:11, 3:12, 3:16, 3:17, 3:18, 3:21, 3:22, 3:23, 3:27, 3:28, 13:1, 17:11, 28:4, 34:2, 37:22, 47:4, 49:29, 61:23, 68:13, 80:2, 82:26 example [15] - 8:17, 15:24, 15:25, 16:14, 23:17, 52:14, 58:14, 60:15, 63:13, 72:7, 76:13, 126:14, 126:28, 135:13, 136:20 examples [1] - 101:29 exceeding [1] - 95:4 excellent [2] - 75:28, 116:25 excess [1] - 106:4 excuse [4] - 7:25, 38:21, 111:15, 112:7 Executive [10] - 8:16, 8:24, 10:28, 17:16, 37:26, 61:26, 78:10, 83:1, 117:3, 140:15 Executive's [1] - 116:1 exemplary [2] - 129:7, 129:8 exercise [1] - 107:5 exhaustive [1] - 135:20 exhibit [4] - 31:14, 31:17, 73:24, 77:3 exhibited [1] - 77:13 exhibiting [1] - 73:28 exhibits [5] -	31:15, 73:23, 82:23, 89:27, 91:12 existed [2] - 98:19, 136:22 exonerate [1] - 138:21 expect [3] - 63:24, 81:27, 115:16 expectation [1] - 107:9 expected [2] - 57:23, 95:24 experience [4] - 18:24, 37:3, 41:28, 99:20 experiences [1] - 36:24 expertise [1] - 35:14 explain [14] - 20:12, 22:17, 23:22, 23:26, 24:1, 25:27, 26:8, 26:10, 35:19, 37:29, 44:4, 70:25, 84:3, 136:24 explained [2] - 30:28, 74:21 explanation [6] - 20:21, 22:21, 42:26, 43:24, 43:25, 84:19 explanations [1] - 98:21 expressed [1] - 113:29 expression [1] - 113:7 extensive [1] - 28:27 extent [4] - 97:20, 116:5, 126:17, 142:7 extracts [1] - 112:22 extremely [1] - 71:20	23:18, 29:15, 88:5, 88:8 faced [2] - 56:25, 72:12 facilitate [1] - 9:11 facing [2] - 53:14, 63:7 fact [25] - 8:5, 9:21, 9:28, 22:14, 39:15, 40:20, 71:21, 75:16, 85:4, 105:27, 114:14, 116:7, 117:3, 117:6, 127:16, 127:20, 127:28, 128:24, 128:28, 129:3, 130:8, 131:3, 131:16, 136:24, 142:1 fact-finding [1] - 142:1 factor [6] - 97:5, 97:6, 98:25, 99:28, 108:2, 108:12 factors [10] - 97:4, 97:9, 98:6, 99:26, 100:19, 102:25, 124:4, 130:7, 131:15, 132:26 facts [3] - 37:13, 94:26, 96:16 faculties [1] - 14:18 fail [1] - 105:8 failed [2] - 113:4, 116:17 fair [4] - 55:18, 55:20, 114:28, 115:7 fairly [1] - 113:29 fairness [1] - 138:22 FAISAL [1] - 2:15 faith [1] - 123:7 fallen [2] - 10:3, 119:2 falling [2] - 116:16, 117:5 falls [2] - 67:15, 138:26 false [1] - 107:23 familiar [4] - 17:19, 55:6, 96:11, 101:4	families [1] - 86:21 family [8] - 34:27, 40:23, 50:24, 50:25, 55:6, 55:9, 71:13, 90:20 family's [1] - 51:15 far [7] - 8:9, 16:13, 36:23, 75:18, 92:3, 92:4, 107:7 farms [1] - 88:23 fast [1] - 51:4 favour [1] - 105:5 fear [1] - 56:8 fearful [3] - 51:5, 53:8, 54:26 fears [4] - 56:9, 56:10, 56:26, 58:3 feasible [1] - 117:14 February [3] - 40:2, 40:6, 111:10 fell [1] - 133:18 felt [4] - 60:17, 81:19, 131:4, 131:8 female [11] - 26:16, 53:18, 58:4, 58:22, 64:8, 64:19, 65:14, 67:5, 67:8, 90:6, 90:9 few [8] - 34:26, 39:19, 43:8, 56:15, 56:16, 57:3, 57:5, 89:1 fides [1] - 109:20 field [2] - 22:12, 133:26 FIELDFISHER [1] - 2:11 final [2] - 71:18, 77:29 finally [1] - 118:2 findings [10] - 93:29, 97:19, 97:20, 98:28, 102:22, 124:1, 125:20, 126:18, 126:20, 138:6 fine [6] - 68:27, 88:18, 90:7, 95:4,
--	--	--	---	---	---

116:24, 141:12 finish [1] - 68:15 finished [1] - 57:10 firm [1] - 74:23 first [52] - 7:6, 7:12, 7:14, 7:15, 10:29, 13:19, 13:20, 15:6, 16:5, 18:5, 18:26, 18:27, 20:12, 20:14, 21:11, 21:17, 24:20, 34:19, 34:26, 36:29, 41:14, 41:22, 42:8, 44:23, 46:26, 51:1, 51:13, 54:9, 56:11, 56:13, 58:20, 59:13, 71:25, 78:25, 80:17, 85:4, 88:17, 88:18, 88:29, 90:1, 98:10, 98:15, 103:5, 106:2, 117:12, 119:21, 129:25, 135:8, 136:21, 136:28, 139:7 first-hand [2] - 136:21, 136:28 firstly [3] - 50:11, 70:7, 109:7 fit [2] - 53:25, 75:13 FITNESS [2] - 1:7, 1:17 fitness [2] - 53:26, 108:1 Fitness [7] - 5:11, 6:4, 6:16, 32:27, 75:12, 79:4, 93:26 five [7] - 78:10, 78:11, 93:14, 93:15, 116:18, 116:28, 133:27 five-minute [1] - 78:10 fixed [1] - 109:1 flashing [2] - 9:4, 9:5 follow [2] - 61:11, 87:19 follow-up [1] - 87:19 followed [1] - 61:17	following [8] - 1:27, 32:18, 42:10, 49:8, 93:25, 100:19, 113:11, 114:26 FOLLOWS [13] - 5:1, 13:2, 17:12, 28:4, 34:2, 37:23, 47:4, 50:1, 61:23, 68:13, 78:14, 80:2, 82:27 follows [2] - 108:14, 123:13 FOR [2] - 2:8, 2:13 forget [2] - 64:16, 76:24 forgive [1] - 105:13 form [2] - 79:3, 142:13 formal [2] - 31:17, 101:11 formally [4] - 7:5, 118:27, 138:6, 138:8 forming [4] - 102:12, 123:18, 135:25, 137:15 formulation [1] - 134:2 forth [1] - 14:29 forward [3] - 52:21, 75:15, 131:23 forwarded [1] - 45:6 forwards [1] - 74:20 four [11] - 7:9, 8:5, 26:17, 31:20, 40:25, 49:14, 64:28, 67:5, 78:7, 99:7, 106:4 French [3] - 7:20, 78:4, 80:5 frequent [1] - 34:20 FRIDAY [2] - 1:19, 5:1 friend [5] - 39:4, 40:22, 88:20, 113:18, 131:5 friends [7] - 16:16, 29:22, 29:23, 86:20, 88:11, 103:16 front [2] - 7:4, 39:25 frozen [1] - 36:3	frustration [1] - 113:7 FSK [1] - 2:16 FTPC [4] - 97:19, 98:28, 126:19, 126:20 full [4] - 10:3, 50:14, 73:14, 110:5 fuller [1] - 94:10 fully [5] - 8:25, 110:27, 128:6, 132:16, 133:21 function [1] - 141:29 fundamental [1] - 136:25 funny [1] - 88:19 furnished [5] - 7:10, 13:6, 50:4, 125:21 furnishing [1] - 125:22 future [3] - 15:27, 61:6, 68:17	G	gaining [1] - 37:12 Galway [2] - 106:24, 107:8 Garda [6] - 104:10, 105:28, 110:7, 112:6, 112:8, 122:2 Gardai [1] - 87:4 Gardaí [4] - 104:24, 106:24, 115:25, 133:3 gather [2] - 7:21, 80:8 gay [1] - 58:14 gender [1] - 14:8 General [2] - 34:18, 80:14 general [5] - 30:3, 50:18, 70:14, 70:15, 91:19 generated [1] - 126:1 genuine [1] - 117:19 get-go [1] - 114:10 Ghaznain [15] - 7:19, 46:3, 48:2,	77:28, 78:22, 78:24, 80:4, 82:24, 82:29, 85:16, 87:18, 89:18, 131:3, 131:7, 132:18 GHAZNAIN [8] - 3:26, 78:20, 78:26, 79:10, 80:1, 82:26, 89:17, 90:25 girl [9] - 38:14, 59:20, 59:26, 62:13, 63:4, 63:8, 64:10, 66:16, 71:14 given [18] - 27:18, 32:16, 34:7, 34:9, 39:13, 43:25, 45:9, 47:8, 60:16, 69:10, 73:10, 73:14, 91:29, 96:16, 98:21, 111:12, 135:3, 142:4 God [1] - 105:10 Google [6] - 43:7, 43:15, 43:16, 43:17, 45:28, 139:8 GP [9] - 55:6, 70:7, 70:10, 80:5, 85:4, 128:2, 128:10, 131:21, 132:12 GPs [3] - 61:14, 68:7, 72:17 graduated [2] - 13:18, 13:19 graduation [1] - 50:15 granted [2] - 9:22, 9:24 great [4] - 37:3, 37:4, 37:12, 89:1 green [2] - 9:4, 9:5 GROGAN [1] - 2:10 grounds [1] - 109:29 guards [1] - 86:2 guidance [9] - 94:18, 94:25, 95:13, 96:24, 101:4, 101:16, 103:2, 108:3, 117:10 guided [1] - 78:7 guilty [4] -	27:13, 27:16, 28:23, 117:27 guy [2] - 64:29, 88:19 Gwen [3] - 1:26, 2:30, 2:32 GWEN [1] - 1:31 gynaecologist [1] - 132:16 gynaecology [1] - 132:15	H	haemorrhage [1] - 60:17 HAIDER [13] - 3:9, 11:4, 11:6, 11:12, 11:21, 12:1, 13:1, 17:9, 17:11, 28:4, 30:17, 30:21, 30:24 Haider [29] - 7:16, 7:24, 10:18, 11:25, 11:27, 13:4, 17:4, 17:8, 17:14, 18:6, 19:5, 19:19, 21:8, 23:4, 23:7, 23:13, 23:29, 24:6, 26:5, 26:11, 27:13, 27:20, 28:1, 28:6, 29:2, 29:5, 29:14, 30:13, 31:8 half [5] - 73:12, 93:10, 93:14, 93:15, 106:2 hallucination [1] - 77:11 halt [1] - 106:14 hammer [1] - 119:22 hand [11] - 11:20, 12:5, 33:2, 47:6, 47:12, 48:23, 49:24, 78:18, 79:6, 136:21, 136:28 hands [12] - 123:4, 124:26, 127:17, 128:14, 128:16, 131:29, 132:28, 133:9, 133:12, 133:15, 134:5, 139:9 hangs [1] - 131:21 happy [10] - 31:11, 32:6, 39:5,	69:19, 129:11, 132:7, 132:8, 134:7, 137:27, 138:20 harass [1] - 67:8 harassed [2] - 65:4, 67:5 harassment [3] - 64:8, 65:13, 115:23 hard [3] - 113:14, 132:9, 134:1 hard-working [1] - 132:9 Harkin [5] - 6:5, 11:28, 32:22, 49:17, 78:24 HARKIN [1] - 2:4 harm [4] - 60:18, 102:18, 123:26, 139:5 HAVING [4] - 13:1, 34:1, 49:29, 80:1 heading [3] - 101:17, 102:6 health [6] - 72:21, 86:23, 88:15, 88:28, 88:29, 131:9 healthcare [8] - 18:10, 18:23, 18:29, 19:10, 41:27, 42:14, 46:11, 129:9 hear [32] - 5:6, 5:7, 5:9, 7:2, 7:7, 8:3, 8:6, 8:13, 8:27, 9:5, 9:12, 10:21, 11:5, 28:14, 32:6, 32:7, 34:5, 36:5, 36:6, 36:7, 37:17, 48:19, 48:29, 49:2, 49:4, 49:6, 73:5, 91:24, 136:23, 138:1, 139:22 heard [19] - 10:1, 16:6, 90:9, 91:2, 91:8, 91:9, 94:9, 98:5, 99:7, 103:19, 109:17, 109:21, 110:1, 116:29, 125:15, 129:6, 135:2, 141:22, 141:23 HEARING [7] - 1:17, 5:1, 48:6,
---	--	---	----------	--	--	--	----------	---	---

48:11, 48:17, 78:14, 142:22 hearing ^[10] - 6:19, 7:27, 7:28, 62:8, 66:19, 100:5, 109:1, 109:5, 109:7, 128:19 hearings ^[1] - 118:29 hears ^[1] - 115:9 hearsay ^[1] - 92:4 heart ^[1] - 73:13 heavy ^[1] - 119:22 held ^[11] - 123:4, 124:26, 127:17, 128:14, 128:15, 131:25, 131:28, 132:28, 133:9, 133:11, 134:5 hello ^[10] - 11:4, 37:25, 48:20, 49:1, 49:2, 49:3, 49:4, 49:5, 49:6, 88:12 help ^[13] - 14:14, 15:26, 15:27, 41:1, 41:8, 42:29, 43:22, 44:1, 45:4, 83:10, 83:13, 83:16, 84:6 helpful ^[2] - 76:23, 101:14 helps ^[1] - 48:9 herself ^[2] - 110:13, 110:14 hi ^[2] - 11:4, 78:26 high ^[5] - 28:26, 60:16, 89:20, 89:28, 129:12 High ^[1] - 141:4 high-quality ^[1] - 129:12 higher ^[1] - 58:7 highest ^[4] - 21:1, 21:14, 21:20, 81:19 highlight ^[1] - 38:11 highly ^[6] - 14:2, 18:23, 41:27, 46:6, 85:8, 129:9 himself ^[8] - 38:12, 44:26, 55:7, 67:8, 74:29, 86:24, 89:6, 132:23	his. , ^[1] - 16:24 history ^[11] - 14:27, 51:27, 55:26, 55:28, 56:29, 64:24, 71:26, 75:10, 92:14, 92:15, 92:16 hmm ^[1] - 89:21 holds ^[1] - 133:15 holiday ^[3] - 32:11, 39:27, 47:22 holy ^[6] - 11:19, 11:21, 48:22, 48:23, 78:18 home ^[5] - 36:25, 51:16, 51:18, 61:7, 71:25 honest ^[6] - 80:22, 81:16, 84:9, 86:6, 93:14, 113:22 honestly ^[1] - 80:21 honesty ^[1] - 21:21 hope ^[4] - 15:4, 107:9, 132:22, 140:12 Horan ^[1] - 141:7 HORAN ^[17] - 2:18, 11:1, 11:5, 11:10, 11:17, 11:23, 32:7, 32:14, 48:19, 48:21, 48:26, 48:29, 49:2, 49:4, 49:6, 49:8, 78:16 hospital ^[21] - 11:7, 13:22, 16:4, 27:23, 34:22, 36:28, 50:17, 53:27, 56:20, 58:20, 59:18, 59:23, 59:25, 63:18, 66:18, 70:8, 73:21, 82:12, 85:28, 87:4 Hospital ^[15] - 24:21, 25:2, 25:9, 34:18, 80:14, 87:10, 106:7, 106:18, 110:10, 120:13, 120:20, 121:2, 121:15,	121:27 Hospital' ^[1] - 120:13 hospitals ^[3] - 35:9, 63:25, 73:3 hour ^[2] - 93:11, 110:21 hours ^[5] - 49:14, 52:2, 59:24, 63:18, 133:25 HOUSE ^[1] - 1:18 house ^[7] - 11:8, 11:12, 14:4, 29:18, 29:19, 31:14, 88:24 HR ^[2] - 58:7, 66:14 huge ^[2] - 123:6, 123:7 HUGH ^[1] - 2:8 Hugh ^[1] - 17:14 human ^[1] - 105:4 hung ^[1] - 131:28 hurry ^[2] - 59:22 husband ^[1] - 62:17	illustrated ^[1] - 92:8 image ^[1] - 20:22 images ^[1] - 43:8 IMC ^[1] - 86:2 immediately ^[2] - 33:2, 100:4 impact ^[2] - 111:14, 111:20 implicit ^[2] - 43:20, 71:24 implicitly ^[1] - 15:22 important ^[6] - 8:25, 10:20, 22:26, 56:18, 94:13, 111:12 impose ^[5] - 96:7, 96:13, 96:15, 100:16, 142:9 imposed ^[3] - 95:21, 96:2, 101:23 imposing ^[3] - 95:14, 95:28, 96:27 imposition ^[2] - 96:2, 101:24 impressed ^[1] - 37:6 improved ^[2] - 56:4, 56:5 improvement ^[3] - 53:7, 53:10, 53:11 IN ^[3] - 48:6, 48:11, 48:17 inadvertent ^[1] - 6:1 inadvertently ^[1] - 5:25 inappropriate ^[17] - 26:16, 44:13, 45:15, 102:12, 120:7, 120:27, 121:11, 121:22, 122:8, 122:14, 122:20, 123:7, 123:18, 135:25, 137:15, 138:13, 141:28 inaudible ^[6] - 35:24, 36:2, 37:14, 43:1, 72:20, 88:16 incident ^[2] - 90:13, 114:24	incidents ^[1] - 15:24 include ^[8] - 78:29, 94:6, 102:10, 123:16, 135:21, 135:23, 137:13, 139:18 included ^[2] - 68:8, 72:19 includes ^[3] - 95:16, 102:14, 123:20 including ^[8] - 5:16, 26:15, 93:28, 97:19, 97:27, 109:1, 110:18, 126:14 incomplete ^[1] - 98:20 inconsistent ^[1] - 98:20 incorrect ^[1] - 64:21 increased ^[2] - 55:11, 55:13 indeed ^[1] - 142:2 independently ^[1] - 98:1 INDEX ^[1] - 3:1 indicate ^[3] - 60:10, 102:26, 124:5 indicated ^[1] - 25:16 indicates ^[1] - 31:4 indicating ^[1] - 126:23 indirectly ^[1] - 107:26 individual ^[5] - 20:8, 22:10, 41:29, 83:22, 133:6 individually ^[1] - 90:12 infatuation ^[1] - 116:22 information ^[6] - 55:29, 76:6, 91:29, 97:15, 110:1, 126:16 injection ^[2] - 51:11, 51:24 injuries ^[1] - 126:28 innocence ^[2] - 9:25, 109:18 input ^[2] - 126:1,	126:2 inquire ^[1] - 35:2 inquiries ^[1] - 66:16 inquiry ^[2] - 71:17, 100:6 Inquiry ^[35] - 5:11, 5:13, 5:20, 5:27, 5:29, 6:4, 6:6, 9:29, 10:5, 11:28, 11:29, 26:7, 27:14, 30:16, 32:23, 33:1, 49:17, 67:23, 75:12, 76:1, 77:20, 78:25, 90:24, 93:26, 94:9, 94:20, 94:27, 98:15, 109:9, 109:12, 110:2, 111:24, 112:21, 119:26, 138:5 insight ^[17] - 97:10, 99:27, 100:1, 100:7, 111:5, 112:3, 115:11, 116:5, 117:1, 117:19, 127:19, 127:20, 128:25, 130:7, 130:8, 130:11 insofar ^[2] - 91:28, 92:18 Instagram ^[1] - 105:1 instance ^[3] - 84:8, 84:16, 88:4 instead ^[1] - 110:23 INSTRUCTED ^[2] - 2:10, 2:15 instructions ^[1] - 75:1 integrity ^[5] - 16:25, 21:2, 21:15, 36:22, 46:8 intense ^[1] - 115:22 intensive ^[1] - 128:11 intensivist ^[1] - 50:17 intention ^[2] - 7:6, 140:9 interact ^[2] - 45:19, 88:11 interacted ^[1] - 90:1
---	---	---	---	---	---

interactions [6] - 19:25, 20:10, 34:21, 42:3, 42:18, 98:12 interacts [1] - 44:16 interest [4] - 95:15, 96:4, 98:2, 100:15 interests [2] - 95:15, 96:9 internal [1] - 50:16 internet [1] - 48:27 interpersonal [2] - 99:4, 115:5 interpreting [1] - 137:25 interrupt [3] - 22:26, 65:6, 65:7 interrupted [1] - 23:11 intervention [3] - 130:9, 130:10, 131:29 interviews [2] - 55:28, 59:15 intravenously [2] - 60:16, 73:15 introduce [1] - 6:4 introducing [2] - 8:4, 12:4 invaded [1] - 103:14 investigation [3] - 100:6, 108:8, 127:11 invite [5] - 10:22, 31:26, 47:14, 90:29, 99:16 invited [1] - 104:2 invoke [1] - 8:23 involve [1] - 104:24 involved [8] - 61:14, 61:15, 68:6, 96:22, 103:9, 105:24, 107:1, 107:3 involves [2] - 100:24, 135:15 Ireland [15] - 7:20, 13:21, 14:28, 16:11, 30:20, 47:21, 61:15, 64:18,	65:26, 74:18, 75:14, 90:23, 101:27, 105:9, 136:26 IRELAND [1] - 1:3 Irish [2] - 53:27, 65:2 is.. [1] - 46:27 isolated [1] - 106:11 isolation [4] - 16:13, 16:17, 131:11 issue [30] - 7:8, 30:1, 38:5, 38:23, 55:21, 56:25, 58:24, 82:10, 85:23, 85:24, 85:25, 85:26, 86:28, 88:17, 90:4, 91:21, 91:23, 97:11, 98:24, 99:4, 116:15, 117:1, 130:5, 138:2, 138:11, 139:1, 139:20, 141:29, 142:2 issues [34] - 6:18, 14:15, 29:21, 29:28, 30:3, 38:14, 48:28, 51:2, 51:3, 52:2, 52:4, 56:11, 56:14, 56:22, 59:21, 59:26, 59:28, 72:1, 85:27, 89:5, 91:16, 116:15, 116:25, 118:10, 126:7, 126:9, 126:13, 126:16, 127:13, 128:20, 128:23, 130:6, 131:4, 142:1 IT [1] - 44:1 itself [3] - 96:18, 109:29, 138:15 IV [1] - 73:4	job [5] - 13:19, 13:20, 84:7, 84:17, 85:14 JOHN [1] - 2:20 join [1] - 32:13 joining [1] - 49:15 jot [1] - 73:19 judge [1] - 75:20 juggle [1] - 32:4 July [14] - 9:23, 24:11, 104:8, 104:15, 106:3, 106:8, 106:9, 109:17, 109:22, 120:1, 121:6, 122:4, 129:2, 131:18 jumbled [3] - 51:5, 53:9, 56:4 jump [6] - 89:3, 123:8, 123:11, 124:17, 124:27 jumped [1] - 122:28 June [4] - 106:9, 106:27, 108:16, 120:1 junior [2] - 84:16, 89:27 just.. [1] - 38:8 justification [2] - 119:1, 130:3	14:21, 16:8, 25:4, 25:16, 25:25, 46:9, 55:6, 82:4, 82:20, 90:19, 113:6, 125:5, 127:25, 133:4, 137:24 kindly [1] - 41:19 KINGRAM [2] - 1:18 knowing [6] - 14:3, 20:7, 35:10, 41:29, 46:5, 85:7 knowledge [9] - 28:27, 37:13, 39:10, 67:15, 89:7, 89:29, 97:20, 97:21 known [22] - 13:9, 13:11, 13:27, 19:2, 22:28, 23:20, 25:1, 27:19, 34:16, 34:28, 50:20, 80:10, 88:15, 98:11, 120:4, 120:27, 121:10, 121:22, 122:7, 122:14, 122:20, 125:19 knows [2] - 43:28, 97:17	88:6, 88:14, 109:22, 109:24, 111:17, 126:24, 133:27, 138:18 late [2] - 90:17, 100:28 latter [1] - 15:6 law [5] - 66:4, 66:6, 66:7, 116:18, 134:22 lawyer [8] - 19:17, 20:27, 21:25, 37:25, 44:26, 45:7, 61:25, 82:29 lawyer's [1] - 41:6 lawyers [10] - 41:8, 64:17, 67:3, 68:4, 83:13, 109:12, 125:25, 138:14, 138:19 lay [2] - 70:6, 70:11 lead [3] - 16:17, 60:21, 100:15 leading [2] - 97:19, 98:27 leap [2] - 123:6, 123:7 learn [2] - 64:6, 64:9 least [4] - 81:11, 88:27, 96:19, 105:4 leave [6] - 41:16, 57:27, 57:28, 105:9, 141:1 led [4] - 16:8, 124:11, 142:11, 142:15 Lee [2] - 110:10, 129:26 left [6] - 11:6, 14:28, 16:20, 57:10, 57:21, 67:25 legal [8] - 6:13, 6:15, 6:18, 6:21, 6:27, 135:13, 141:24, 141:25 LEGAL [7] - 2:6, 3:31, 4:5, 4:13, 91:4, 134:26, 141:18 leisure [1] - 41:16 lengthy [5] - 65:13, 108:29, 109:24, 115:22,	117:16 leniency [3] - 96:12, 96:14, 118:10 lenient [2] - 96:15, 118:14 less [8] - 14:28, 34:29, 93:10, 108:20, 116:13, 116:14, 117:13 letter [37] - 18:8, 18:20, 18:22, 19:5, 19:6, 19:8, 19:15, 19:19, 19:20, 20:4, 20:13, 20:14, 20:17, 20:24, 20:26, 20:29, 21:12, 21:18, 21:26, 21:28, 22:7, 22:22, 24:4, 41:22, 41:26, 42:9, 42:12, 42:24, 43:4, 43:13, 44:7, 44:25, 45:11, 45:12, 46:2, 46:15, 111:24 level [2] - 57:7, 100:16 levelled [2] - 55:12, 133:12 levels [3] - 21:1, 21:14, 21:21 liaise [1] - 140:16 liberty [1] - 17:6 lies [2] - 75:22, 77:5 life [6] - 35:2, 40:24, 103:14, 105:18, 112:10, 128:5 life-long [1] - 128:5 lifelong [7] - 55:22, 60:28, 66:11, 68:16, 70:25, 71:9, 128:3 lift [1] - 118:27 light [5] - 6:26, 108:23, 115:27, 116:9, 117:7 likely [4] - 65:4, 100:1, 102:25, 124:4 likes.. [1] - 31:10 Limerick [1] - 16:21
		K	L		
		Karachi [2] - 7:19, 7:23 keen [1] - 139:12 keep [2] - 9:9, 35:1 keeping [1] - 31:14 keeps [2] - 38:12, 68:25 Kelly [1] - 110:11 kept [7] - 54:3, 59:15, 70:17, 72:1, 72:5, 86:24, 89:5 Kerachi [7] - 8:9, 14:12, 32:5, 48:1, 49:14, 125:17, 128:11 KHAN [1] - 2:15 kidnapping [1] - 114:1 kind [17] - 14:7,	lack [5] - 56:20, 99:27, 100:1, 130:7, 130:21 lady [1] - 71:12 laid [1] - 111:18 landlord [1] - 107:21 laptop [2] - 20:25, 34:14 last [40] - 7:10, 9:23, 13:22, 15:10, 15:13, 19:2, 19:10, 20:29, 21:11, 21:17, 22:6, 29:15, 29:16, 29:17, 29:21, 34:24, 35:26, 42:14, 54:18, 54:19, 54:20, 54:21, 56:2, 58:19, 61:1, 61:3, 76:25, 77:22, 80:20, 81:1, 88:4,		
	J				
	JANE [1] - 2:18 January [5] - 24:11, 106:9, 107:15, 107:25, 122:16 jargon [1] - 26:10				

limited [4] - 91:7, 91:15, 91:27, 98:12 line [7] - 18:5, 29:4, 113:1, 114:20, 114:22, 115:12, 140:4 lines [1] - 13:14 link [4] - 9:8, 9:9, 9:10, 25:23 linked [1] - 72:12 links [1] - 7:15 list [3] - 130:6, 131:15, 135:20 listen [7] - 23:7, 23:13, 53:22, 64:12, 65:10, 67:28 listening [1] - 67:1 live [7] - 31:4, 80:8, 86:22, 88:25, 88:27, 105:7, 105:8 lives [1] - 78:3 living [6] - 16:13, 86:22, 88:21, 88:23, 88:28, 131:9 loaned [1] - 2:31 locked [1] - 105:6 locum [1] - 133:24 locums [1] - 81:6 log [1] - 48:8 logged [1] - 11:6 London [6] - 7:16, 8:9, 13:25, 14:5, 14:25, 29:19 longevity [1] - 131:27 look [13] - 22:16, 41:4, 44:24, 59:27, 64:11, 66:3, 88:24, 94:25, 100:27, 119:24, 119:25, 133:10, 139:17 looked [1] - 70:14 looking [4] - 32:1, 76:21, 125:9, 130:8 looks [1] - 135:19 loss [1] - 75:24	lost [3] - 21:5, 36:2, 112:28 love [1] - 104:29 low [2] - 57:7 lower [1] - 130:22 lowered [1] - 136:14 lying [2] - 27:8, 27:11	married [20] - 15:10, 15:11, 15:14, 15:15, 35:26, 35:27, 61:1, 61:2, 61:3, 61:4, 62:19, 62:23, 86:21, 88:21, 89:10, 89:12, 89:14, 90:16, 131:5, 132:14 married' [1] - 113:8 Mary [9] - 6:7, 6:9, 32:28, 32:29, 49:18, 49:19, 70:5, 78:29, 79:1 MARY [2] - 2:4, 2:5 Masters [1] - 15:26 material [1] - 139:19 maternity [1] - 57:27 matter [28] - 8:24, 10:7, 10:23, 12:6, 23:4, 23:28, 77:16, 92:19, 92:21, 92:28, 95:26, 109:1, 109:5, 109:6, 109:8, 109:17, 109:21, 111:26, 118:19, 128:19, 137:9, 137:21, 139:28, 140:9, 140:11, 141:23, 141:24 matters [9] - 77:16, 92:18, 92:20, 92:24, 92:27, 93:28, 94:2, 126:15, 126:18 Maura [4] - 13:5, 34:4, 50:3, 80:4 MAURA [1] - 2:13 Mayo [9] - 13:23, 16:14, 16:20, 80:14, 87:10, 106:6, 106:17, 110:10, 120:13 MBBS [1] - 50:15 McDowell [60] - 2:8, 3:5, 3:11, 3:17, 3:22, 3:28, 4:1, 4:7, 9:16,	9:18, 10:10, 10:27, 17:11, 17:14, 21:4, 21:8, 21:11, 23:10, 23:13, 23:25, 28:1, 31:10, 31:13, 31:19, 37:22, 37:25, 41:11, 43:24, 44:3, 46:29, 61:23, 61:25, 69:3, 69:6, 74:21, 82:26, 82:29, 87:17, 93:1, 93:7, 93:10, 93:16, 93:20, 93:22, 101:2, 101:17, 119:9, 119:15, 134:15, 134:20, 135:5, 135:7, 137:3, 137:21, 138:22, 138:26, 140:20, 140:25, 142:8 McGuinness [17] - 3:31, 4:5, 4:13, 6:12, 6:21, 10:22, 91:1, 91:4, 91:6, 92:28, 134:26, 134:28, 138:1, 139:23, 141:18, 141:20, 142:10 MCGUINNESS [1] - 2:6 McNally [113] - 2:13, 3:7, 3:10, 3:12, 3:16, 3:18, 3:21, 3:23, 3:27, 4:3, 4:9, 4:11, 7:3, 7:9, 7:12, 8:11, 8:29, 9:2, 9:4, 9:8, 10:11, 10:14, 10:16, 10:26, 12:5, 13:2, 13:4, 13:5, 17:4, 17:9, 23:9, 23:12, 23:24, 24:2, 28:4, 28:6, 29:2, 30:29, 31:3, 31:6, 31:12, 31:18, 31:23, 31:26, 31:29, 33:2, 34:2, 34:4, 34:5, 41:10, 41:12, 43:19, 43:26, 43:27, 47:4, 47:6, 47:11, 47:29, 48:8, 49:24, 50:1, 50:3, 61:20, 68:13, 68:15, 69:8,	69:20, 69:23, 77:28, 78:3, 78:6, 79:6, 80:2, 80:4, 82:21, 87:19, 87:21, 93:2, 93:12, 93:13, 100:28, 101:3, 101:5, 101:8, 111:9, 112:20, 119:10, 119:12, 119:18, 119:20, 127:11, 134:9, 134:19, 134:22, 136:5, 137:6, 137:8, 137:23, 138:11, 138:17, 138:29, 139:3, 139:5, 139:15, 140:1, 140:24, 141:3, 141:10, 141:16, 142:16, 142:19 McNally's [2] - 8:2, 93:22 me.. [1] - 19:14 mean [55] - 8:27, 13:21, 13:29, 14:2, 14:5, 14:6, 14:8, 14:17, 14:19, 15:12, 15:23, 15:24, 15:28, 16:16, 16:17, 19:4, 22:22, 22:26, 22:27, 23:2, 23:6, 23:16, 23:17, 23:20, 24:3, 24:20, 25:1, 25:5, 25:16, 25:17, 25:22, 25:24, 25:29, 26:3, 26:8, 26:10, 27:3, 27:10, 27:11, 27:24, 28:21, 29:23, 30:2, 30:3, 30:9, 43:5, 47:1, 55:1, 66:20, 84:15, 84:26, 96:1 meaning [1] - 110:26 means [8] - 82:13, 84:9, 84:13, 85:18, 101:8, 101:24, 113:21, 137:25 media [2] - 105:23, 142:12 MEDICAL [4] - 1:3, 1:8, 2:19,	2:21 Medical [27] - 5:12, 5:16, 13:15, 17:16, 26:12, 37:26, 53:27, 61:26, 64:18, 78:4, 80:6, 83:1, 94:18, 104:11, 105:29, 106:26, 108:20, 110:9, 112:6, 112:8, 113:19, 115:24, 120:12, 120:19, 121:1, 121:14, 121:26 medical [95] - 5:18, 6:6, 6:8, 6:9, 13:18, 14:6, 14:16, 20:8, 24:15, 28:26, 29:26, 32:28, 32:29, 33:1, 37:10, 37:13, 39:9, 42:1, 46:8, 49:20, 50:4, 50:19, 51:19, 52:5, 53:6, 55:24, 57:24, 62:6, 66:9, 68:21, 68:26, 69:18, 69:21, 73:2, 74:18, 76:10, 76:24, 79:2, 79:3, 88:21, 94:2, 95:22, 95:24, 95:25, 96:9, 97:17, 97:23, 100:1, 101:18, 101:22, 101:24, 101:26, 102:21, 102:23, 102:26, 103:11, 108:5, 117:17, 117:24, 117:28, 123:29, 124:2, 124:5, 124:10, 125:5, 125:21, 125:27, 126:6, 126:12, 126:26, 126:27, 127:15, 127:29, 128:1, 128:7, 128:26, 129:8, 129:12, 129:16, 130:9, 130:10, 130:28, 131:4, 131:22, 131:29, 133:4, 133:5, 133:7, 133:25, 133:26, 136:6, 136:9, 136:14 medically [2] -
---	--	--	--	--	---

133:21, 133:22 medication [35] - 14:18, 14:20, 14:22, 15:3, 36:9, 51:8, 52:22, 52:29, 54:13, 55:11, 58:26, 60:3, 60:5, 60:6, 60:27, 63:14, 68:16, 68:17, 68:25, 69:12, 70:25, 71:5, 71:28, 73:14, 128:3, 128:5, 128:11, 128:28, 128:29, 131:19, 133:1 medications [9] - 15:8, 54:3, 55:19, 57:15, 58:21, 60:13, 67:9, 68:28, 127:1 medicine [6] - 34:20, 35:15, 37:8, 50:16, 50:17, 75:14 medicines [2] - 55:22, 71:9 meet [9] - 29:22, 34:23, 80:13, 81:9, 88:7, 88:13, 90:20, 121:20 meeting [4] - 11:13, 11:14, 23:18, 107:10 meetings [1] - 103:29 member [2] - 6:16, 110:9 members [16] - 32:26, 34:27, 50:24, 78:28, 82:19, 96:24, 110:7, 110:8, 110:9, 112:13, 119:8, 120:12, 120:19, 121:1, 121:14, 121:26 memory [1] - 75:24 mental [12] - 14:15, 14:18, 14:27, 52:18, 53:15, 60:2, 64:27, 66:10, 86:22, 88:29, 89:5, 131:9 mentally [3] - 58:27, 59:1	mention [3] - 9:18, 76:10, 124:24 mentioned [20] - 35:27, 35:28, 39:20, 40:22, 41:15, 52:25, 56:15, 56:16, 57:3, 57:26, 58:16, 58:19, 60:12, 62:14, 71:4, 73:9, 129:24, 131:8, 132:18, 132:19 merely [1] - 113:6 message [4] - 106:21, 114:12, 117:26, 118:7 messages [20] - 99:5, 104:8, 104:14, 104:15, 104:16, 104:21, 112:25, 112:29, 113:26, 120:24, 120:25, 121:8, 122:5, 122:11, 122:17, 129:2 MESSRS [2] - 2:11, 2:16 met [7] - 24:24, 29:15, 80:17, 85:4, 88:4, 88:18, 90:3 method [1] - 91:21 micro [2] - 22:29, 27:27 microphone [2] - 8:2, 32:9 microphones [2] - 8:27, 30:29 middle [1] - 88:22 Midlands [2] - 16:5, 25:1 might [23] - 5:26, 10:22, 17:6, 19:1, 36:4, 56:27, 71:7, 71:8, 101:19, 102:1, 107:18, 116:21, 132:7, 132:8, 136:21, 139:10, 139:18, 140:15, 140:25, 141:20, 142:3, 142:9, 142:14 mind [3] - 29:24, 101:5, 115:12	mine [1] - 69:11 minute [3] - 11:9, 11:14, 78:10 minutes [7] - 10:19, 11:8, 11:15, 78:7, 78:11, 119:11, 142:10 mirror [1] - 20:22 misbehaved [1] - 14:5 misconduct [37] - 5:14, 26:13, 39:16, 64:7, 67:6, 89:23, 99:9, 100:22, 100:25, 102:6, 102:9, 102:17, 103:7, 117:27, 122:28, 123:2, 123:8, 123:12, 123:15, 123:25, 124:24, 124:28, 130:2, 130:4, 130:13, 132:4, 133:3, 133:9, 135:9, 135:10, 135:12, 135:16, 135:18, 136:2, 136:11, 136:12, 137:12 misfortune [1] - 131:26 misinterpretati on [2] - 129:28, 137:10 mislead [2] - 64:2, 65:29 missed [5] - 73:4, 124:10, 124:13, 125:4, 138:29 missing [1] - 104:25 mistake [5] - 84:10, 84:11, 86:5, 86:9, 114:19 mistakes [1] - 100:2 misunderstand ing [4] - 129:22, 129:23, 130:26, 136:26 misunderstood [1] - 136:5 mitigate [2] - 111:5, 132:26 mitigating [8] -	96:25, 97:4, 97:5, 97:9, 102:28, 108:2, 124:7, 128:20 mitigation [3] - 126:13, 126:21, 128:24 mobile [1] - 10:19 mode [1] - 91:22 Mohd [2] - 7:19, 78:22 MOHD [2] - 3:26, 80:1 molehill [1] - 115:4 moment [11] - 8:17, 10:17, 39:28, 41:17, 64:12, 64:16, 65:7, 65:9, 89:8, 104:7, 140:23 moments [1] - 28:21 month [10] - 13:26, 34:18, 54:20, 54:21, 81:10, 83:5, 83:6, 88:9, 108:20 months [4] - 24:24, 65:23, 108:17 mood [1] - 14:21 morning [2] - 40:8, 140:20 most [13] - 10:20, 30:17, 42:28, 52:16, 54:15, 56:1, 56:18, 74:2, 98:13, 101:13, 101:23, 104:16, 104:17 motivational [1] - 36:27 moulding [1] - 134:2 mountain [1] - 115:4 mouth [1] - 27:11 moved [4] - 24:23, 80:16, 85:5, 131:10 MR [64] - 2:4, 2:6, 2:8, 2:15, 2:20, 3:5, 3:11, 3:17, 3:22, 3:28, 3:31, 4:1, 4:5, 4:7, 4:13, 9:16,	9:18, 10:27, 17:11, 17:14, 21:8, 21:11, 23:10, 23:13, 23:25, 28:1, 31:13, 31:19, 37:22, 37:25, 41:11, 43:24, 44:3, 46:29, 61:23, 61:25, 69:3, 69:6, 82:26, 82:29, 87:17, 91:4, 91:6, 93:1, 93:7, 93:10, 93:16, 93:20, 93:22, 101:2, 101:17, 134:15, 134:20, 134:26, 134:28, 135:5, 135:7, 137:21, 138:22, 140:20, 140:25, 141:18, 141:20, 142:8 MS [124] - 2:4, 2:10, 2:13, 2:18, 3:7, 3:10, 3:12, 3:16, 3:18, 3:21, 3:23, 3:27, 4:3, 4:9, 4:11, 5:9, 7:9, 7:12, 8:1, 8:12, 8:18, 8:26, 9:2, 9:3, 9:4, 9:8, 10:14, 10:16, 10:26, 11:1, 11:5, 11:10, 11:17, 11:23, 13:2, 13:4, 17:4, 23:9, 23:12, 23:24, 24:2, 28:4, 28:6, 29:2, 29:8, 31:3, 31:6, 31:12, 31:18, 31:23, 31:26, 31:29, 32:7, 32:14, 34:2, 34:4, 41:10, 41:12, 43:19, 43:27, 47:4, 47:6, 47:11, 47:16, 47:29, 48:8, 48:19, 48:21, 48:26, 48:29, 49:2, 49:4, 49:6, 49:8, 50:1, 50:3, 61:20, 68:13, 68:15, 69:8, 69:20, 69:23, 70:3, 70:5, 70:10, 70:19, 70:24, 71:5, 71:18, 72:25, 77:28, 78:3, 78:6, 78:16, 80:2, 80:4, 82:21,	87:21, 87:25, 93:2, 93:13, 100:28, 101:5, 101:8, 119:12, 119:18, 119:20, 127:11, 134:19, 134:22, 137:6, 137:8, 137:23, 138:17, 138:29, 139:3, 139:5, 139:15, 140:1, 140:24, 141:3, 141:10, 141:16, 142:19 Muhammad [1] - 46:3 multiple [10] - 50:24, 52:11, 72:2, 72:3, 74:15, 76:11, 76:12, 106:13, 109:1 must [4] - 2:31, 71:20, 129:15, 142:4 mute [2] - 32:8, 119:15 muted [1] - 31:5
					N
					name [22] - 5:26, 6:5, 11:28, 13:4, 17:14, 26:3, 27:4, 27:5, 32:10, 32:22, 34:4, 49:17, 50:3, 50:14, 70:5, 73:4, 78:24, 80:4, 85:4, 101:25, 119:6, 129:25 named [1] - 1:29 names [1] - 125:16 narrate [1] - 71:29 narrated [2] - 63:2, 65:4 nature [7] - 93:28, 99:13, 100:13, 102:3, 103:6, 106:12, 115:17 near [3] - 57:8, 81:13, 88:25 nearby [1] - 81:6 nearly [6] - 13:11, 22:15, 45:22, 46:13, 46:14, 84:1 necessarily [2] -

92:13, 94:10 necessary [3] - 5:29, 6:25, 133:20 necessitated [1] - 110:6 need [20] - 8:15, 8:23, 11:18, 32:4, 32:12, 32:15, 43:26, 48:22, 65:15, 66:5, 78:17, 88:11, 88:25, 93:9, 104:29, 119:13, 119:14, 134:7, 138:7, 139:21 needed [2] - 64:29, 65:1 needs [8] - 8:2, 9:7, 61:16, 82:9, 98:24, 112:15, 138:14, 139:28 negate [2] - 23:3, 23:20 neurology [1] - 15:26 never [11] - 14:5, 14:6, 30:2, 45:14, 76:29, 77:13, 90:7, 90:9, 90:13, 135:2 new [3] - 6:3, 34:27, 64:26 newspaper [7] - 25:15, 25:17, 25:18, 25:23, 26:27, 27:28 newspapers [1] - 13:29 next [14] - 11:14, 21:28, 31:6, 31:23, 41:14, 47:29, 48:14, 77:28, 99:2, 137:28, 139:11, 140:26, 141:2, 142:14 night [4] - 51:5, 56:23, 56:24, 59:21 NO [1] - 1:13 nobody [3] - 67:25, 76:17, 89:2 noise [1] - 28:16 non [8] - 52:16, 52:19, 65:2, 70:22, 70:27, 102:15, 123:20, 135:20	non-consensual [1] - 102:15 non-exhaustive [1] - 135:20 non-Irish [1] - 65:2 none [4] - 67:14, 67:15, 99:21, 110:25 nonetheless [1] - 96:1 normal [3] - 58:8, 70:10, 88:19 normally [1] - 86:8 not.. [1] - 63:1 note [1] - 70:21 notes [5] - 1:28, 53:4, 71:21, 72:16, 76:10 nothing [5] - 17:1, 99:2, 116:29, 117:13, 131:23 Notice [2] - 10:5, 119:26 noticed [1] - 88:29 notwithstanding [1] - 120:18 Notwithstanding [3] - 120:29, 121:13, 121:25 now.. [1] - 11:2 nowhere [1] - 88:22 number [5] - 76:26, 77:22, 90:2, 90:3, 110:13 numbers [4] - 107:2, 107:5, 122:29, 124:23 numerous [1] - 28:9 nurses [1] - 82:12 nut [4] - 119:23, 122:25, 125:11, 132:27	oath [1] - 98:7 object [1] - 24:2 objectification [1] - 105:25 objective [1] - 95:14 obliged [3] - 31:18, 141:10, 142:19 obliquely [1] - 107:26 observation [1] - 98:10 observe [1] - 69:3 observed [1] - 22:9 obsession [1] - 103:29 obtain [1] - 107:4 obvious [1] - 135:17 obviously [17] - 7:22, 7:24, 26:3, 29:22, 29:27, 32:4, 51:16, 88:16, 90:5, 91:9, 91:21, 98:6, 101:11, 125:8, 135:9, 136:11, 139:20 occasion [2] - 126:24, 138:18 occasions [6] - 110:14, 119:29, 120:22, 121:5, 121:18, 122:3 occupational [1] - 72:21 occur [1] - 124:29 occurred [4] - 25:9, 118:14, 124:28, 127:20 October [2] - 109:24, 109:25 OF [4] - 1:3, 1:8, 2:18, 2:20 off-putting [1] - 127:7 offence [2] - 102:24, 124:3 offences [1] - 102:2 offensively [1] - 113:14 offer [7] - 18:22, 22:21, 41:26, 42:26, 84:19,	140:10, 142:5 offered [1] - 115:29 often [5] - 13:25, 88:7, 102:17, 123:25 older [1] - 113:27 omission [1] - 95:23 ON [2] - 1:19, 5:1 on-call [1] - 56:23 once [12] - 13:25, 34:22, 40:23, 45:6, 53:17, 53:20, 54:1, 68:27, 79:8, 88:9, 90:23, 125:24 one [73] - 8:20, 11:13, 11:20, 15:5, 15:25, 17:2, 21:6, 29:12, 32:11, 34:19, 45:27, 53:18, 56:18, 56:22, 57:1, 57:20, 58:4, 59:2, 59:18, 61:18, 62:24, 65:23, 67:18, 73:1, 73:3, 84:8, 84:18, 84:27, 88:22, 90:2, 100:19, 100:23, 104:27, 106:11, 119:23, 119:27, 119:29, 120:11, 120:18, 120:19, 120:21, 120:24, 120:25, 120:29, 121:5, 121:7, 121:8, 121:13, 121:18, 121:25, 121:26, 122:3, 122:5, 122:6, 122:10, 122:16, 123:6, 129:24, 130:18, 130:20, 131:12, 132:19, 133:17, 135:17, 135:19, 135:22, 138:12, 142:9 one-off [1] - 106:11 ongoing [2] - 63:16, 118:26 online [4] - 47:29, 48:3,	53:25, 140:18 open [3] - 84:27, 111:11, 129:27 opened [1] - 109:9 opening [1] - 111:24 opinion [8] - 13:15, 28:7, 28:11, 28:18, 36:20, 53:6, 75:9, 129:7 opportunity [11] - 30:15, 30:18, 47:19, 90:22, 101:11, 134:10, 134:12, 139:25, 140:6, 141:8, 141:15 opposite [4] - 14:7, 106:12, 108:11, 116:7 opted [1] - 136:29 optimal [1] - 86:23 order [6] - 10:9, 32:6, 117:5, 118:26, 122:26, 133:20 ordered [1] - 5:27 ordinarily [1] - 134:20 ordinary [2] - 94:5, 126:27 organic [5] - 52:16, 52:20, 70:22, 70:27, 77:12 orientate [1] - 32:26 otherwise [5] - 31:5, 64:21, 104:3, 123:4, 142:15 ought [9] - 94:16, 120:4, 120:26, 121:10, 121:21, 122:7, 122:13, 122:20, 136:6 ourselves [1] - 141:7 outcome [1] - 131:24 outset [2] - 103:12, 108:7 outside [4] - 34:23, 45:19,	110:2, 125:21 overall [1] - 37:3 overstressed [1] - 52:19 overworked [1] - 52:1 owing [1] - 109:25 own [12] - 43:9, 71:22, 83:26, 86:21, 88:20, 94:18, 103:21, 123:9, 131:6, 131:7, 131:9, 131:26
					P
					page [15] - 96:27, 100:9, 101:17, 102:5, 104:19, 113:1, 113:11, 114:7, 114:12, 114:22, 114:26, 115:1, 123:12, 126:10 PAGE [1] - 3:2 Pakistan [15] - 14:4, 14:26, 14:29, 15:1, 15:13, 24:16, 35:21, 51:17, 54:4, 56:14, 66:16, 71:15, 76:16, 76:17, 89:9 palliative [1] - 57:13 panel [1] - 21:6 paragraph [21] - 20:13, 20:14, 20:29, 21:12, 21:17, 22:6, 41:22, 42:8, 42:22, 42:23, 44:6, 45:11, 45:23, 46:14, 46:15, 113:19, 122:28, 123:23, 124:27, 126:9, 137:9 paragraphs [2] - 42:27, 84:21 parameters [1] - 110:2 paranoia [3] - 73:25, 73:28, 76:29 paranoid [4] - 73:24, 76:28,

128:10, 128:12 pardon [3] - 7:11, 50:9, 55:16 Park [3] - 7:21, 78:4, 80:5 Part [1] - 5:12 PART [1] - 1:8 part [24] - 5:18, 26:21, 26:22, 35:22, 44:27, 55:27, 82:12, 82:23, 98:14, 103:27, 104:17, 106:13, 108:26, 109:2, 116:5, 116:17, 117:2, 117:19, 123:8, 125:1, 132:22, 136:15, 141:21, 142:13 participate [1] - 8:25 participating [1] - 90:24 participation [1] - 77:20 particular [6] - 92:21, 96:9, 127:12, 132:11, 134:3, 137:26 particularly [9] - 31:10, 60:12, 102:20, 102:22, 117:18, 119:21, 123:28, 124:1, 137:8 parties [9] - 5:27, 6:23, 8:14, 91:13, 92:21, 134:10, 139:24, 140:18, 142:4 partner [2] - 89:8, 89:11 parts [1] - 84:20 party [3] - 2:32, 8:20, 63:19 passages [1] - 83:29 past [2] - 78:7, 89:10 paths [1] - 40:23 patient [29] - 36:29, 55:25, 57:13, 59:21, 59:25, 59:28, 61:10, 66:9, 67:8, 69:11, 70:21, 71:19, 71:24, 72:7, 80:27, 82:17, 84:10,	92:3, 92:10, 92:14, 92:25, 102:13, 102:18, 123:19, 123:26, 135:26, 137:16, 137:20 patient's [2] - 22:11, 82:9 patients [28] - 19:25, 20:10, 22:3, 37:7, 37:10, 37:11, 38:7, 42:3, 42:18, 46:10, 56:26, 57:5, 57:18, 60:10, 60:11, 60:14, 60:15, 60:18, 60:20, 60:22, 73:3, 73:15, 80:25, 82:5, 102:15, 123:21, 129:13 Paul [5] - 6:5, 11:28, 32:22, 49:17, 78:24 PAUL [1] - 2:4 pause [2] - 10:22, 21:5 PAUSE [3] - 48:6, 48:11, 48:17 peers [1] - 129:10 pendulum [1] - 130:21 people [5] - 70:11, 76:18, 88:26, 129:9, 140:5 people's [1] - 57:28 per [2] - 56:29, 63:18 perfect [4] - 31:3, 31:12, 77:14, 101:8 perfectly [2] - 8:27, 36:7 perform [1] - 58:15 performance [2] - 5:15, 99:19 performed [1] - 73:2 perhaps [12] - 10:2, 31:19, 99:5, 101:13, 116:13, 124:10, 124:12, 125:4, 137:9, 137:23, 142:16	period [17] - 24:23, 26:17, 27:18, 34:29, 35:8, 35:23, 35:25, 59:11, 95:10, 103:20, 106:3, 117:16, 119:29, 120:22, 121:6, 121:19, 122:4 periods [2] - 116:18, 116:28 permission [1] - 2:32 permit [1] - 6:22 permitted [2] - 117:16, 117:28 perpetrated [1] - 124:14 persist [1] - 10:8 persisted [2] - 106:13, 106:28 persistent [1] - 106:12 persists [1] - 103:21 person [35] - 14:9, 16:25, 19:23, 20:17, 20:18, 22:2, 22:28, 23:20, 25:3, 28:25, 36:21, 42:16, 51:12, 51:15, 52:12, 58:24, 61:4, 63:14, 70:6, 72:14, 72:23, 73:26, 75:2, 75:20, 76:21, 80:22, 86:10, 87:3, 90:20, 110:26, 113:20, 117:15, 125:27, 127:23, 133:7 personal [12] - 89:1, 103:10, 103:14, 105:26, 126:7, 126:9, 126:13, 126:18, 126:26, 126:28, 127:13, 136:12 Personal [1] - 126:19 personally [2] - 85:2, 98:11 persons [3] - 7:22, 54:4, 126:1 perspective [1] - 130:25 persuade [1] -	111:25 persuaded [1] - 15:25 phase [1] - 36:15 phone [19] - 20:25, 32:2, 35:1, 48:4, 51:13, 51:20, 51:21, 52:12, 53:22, 59:13, 66:17, 72:4, 107:2, 107:5, 112:28, 113:27, 120:25, 121:9, 122:6 phones [1] - 66:18 photocopied [1] - 2:31 photographs [1] - 105:24 phrase [7] - 68:20, 68:26, 69:14, 70:20, 124:24, 125:24 phraseology [1] - 128:4 physiatric [1] - 71:3 physical [3] - 58:23, 102:15, 123:21 physically [1] - 72:3 physician [2] - 50:25, 55:9 physicians [1] - 70:15 pic [1] - 105:17 pick [1] - 11:14 picked [1] - 66:18 pics [1] - 105:11 piece [2] - 7:6, 25:15 pin [1] - 122:26 pinpoint [1] - 16:9 PLACE [1] - 1:18 place [18] - 16:13, 26:25, 27:2, 27:14, 52:1, 56:13, 65:26, 75:17, 90:18, 97:28, 98:13, 101:14, 105:27, 106:6, 113:12, 117:6, 118:29, 136:26 plan [1] - 132:22	player [1] - 37:5 pleaded [3] - 27:13, 27:16, 64:6 pleading [1] - 28:23 pleased [1] - 84:29 pleasurable [1] - 37:5 pleasure [1] - 33:6 plural [1] - 138:19 plus [2] - 17:2, 26:27 point [14] - 8:12, 16:23, 44:11, 69:10, 90:29, 92:23, 92:24, 98:15, 98:18, 113:23, 119:21, 136:18, 138:12, 138:25 points [4] - 116:7, 122:23, 134:17, 134:29 police [2] - 71:13, 71:16 polio [1] - 35:22 politely [1] - 66:28 poor [1] - 5:14 pornography [3] - 102:11, 123:17, 137:14 portion [1] - 92:1 position [16] - 9:29, 15:27, 23:22, 23:25, 24:1, 64:20, 81:21, 93:5, 93:22, 97:28, 102:22, 117:13, 117:22, 118:29, 124:1, 130:18 positions [1] - 93:4 possessing [3] - 102:11, 123:17, 137:14 possibility [3] - 46:23, 46:27, 76:7 possible [7] - 11:10, 74:24, 78:9, 112:11, 132:12, 140:3, 140:10	possibly [2] - 76:4, 129:22 post [1] - 16:22 POWER [24] - 2:5, 5:8, 7:25, 7:27, 8:19, 8:22, 29:12, 29:14, 29:20, 29:29, 30:11, 47:17, 72:29, 73:17, 73:22, 73:29, 87:29, 88:2, 88:7, 88:14, 89:7, 89:12, 89:16, 140:21 Power [10] - 5:6, 6:9, 7:26, 8:13, 32:29, 49:19, 49:20, 72:27, 79:1, 79:2 practice [7] - 7:20, 15:20, 22:4, 46:8, 116:25, 129:4, 134:23 PRACTISE [2] - 1:7, 1:17 Practise [7] - 5:11, 6:4, 6:16, 32:27, 75:12, 79:4, 93:26 practise [2] - 75:14, 108:1 practitioner [29] - 5:18, 6:7, 6:8, 6:9, 49:21, 50:18, 79:3, 94:3, 95:22, 95:25, 95:29, 96:9, 97:17, 97:23, 100:1, 100:2, 101:27, 102:21, 102:24, 103:11, 108:5, 117:17, 117:24, 117:29, 123:29, 124:3, 126:12, 126:26, 129:8 practitioner's [9] - 95:5, 95:6, 95:7, 95:8, 101:19, 101:22, 101:25, 102:26, 124:5 PRACTITIONE RS [1] - 1:8 practitioners [3] - 49:20, 79:2, 95:24 Practitioners [2] - 5:12, 5:16 pre [1] - 98:14
--	--	---	---	--	--

pre-dated [1] - 98:14 precise [1] - 24:9 precisely [3] - 108:11, 135:29, 137:24 premeditation [1] - 107:2 preparing [2] - 35:9, 36:24 prescribe [1] - 70:10 prescribed [3] - 70:13, 127:2, 133:19 prescription [3] - 54:13, 55:19, 127:1 prescriptions [3] - 54:13, 55:14, 127:10 presence [2] - 97:6, 142:4 PRESENT [1] - 2:18 present [7] - 13:24, 54:23, 74:25, 91:7, 102:25, 124:4, 126:12 presentation [10] - 50:29, 51:23, 52:15, 53:10, 54:18, 56:1, 67:18, 77:9, 116:1, 128:26 presentations [1] - 139:27 presented [4] - 71:21, 75:29, 93:29, 110:5 presenting [2] - 53:8, 125:13 preserve [1] - 109:18 press [2] - 26:4, 27:5 pressing [1] - 7:13 pressure [6] - 12:4, 14:19, 22:24, 101:10, 134:18, 137:4 presumably [1] - 111:3 presume [2] - 7:5, 9:10 presuming [1] - 124:18	presumption [2] - 9:24, 109:18 pretty [4] - 36:15, 36:25, 45:29, 46:25 previous [3] - 6:29, 130:11, 132:2 previously [2] - 132:14, 132:21 primary [1] - 95:14 principal [1] - 109:6 principles [1] - 129:3 privacy [1] - 103:13 private [3] - 6:26, 109:17, 109:22 probe [1] - 30:2 problem [8] - 14:7, 33:6, 37:20, 45:27, 53:12, 56:28, 63:15, 72:11 problems [11] - 53:17, 55:23, 56:12, 60:7, 63:6, 66:13, 72:12, 75:24, 77:12, 77:13, 86:25 procedure [1] - 134:23 procedures [2] - 73:2, 134:19 proceed [3] - 17:5, 69:19, 132:11 proceeding [1] - 5:20 proceedings [1] - 62:5 process [7] - 62:1, 95:18, 100:6, 108:2, 108:8, 108:26, 140:8 produced [1] - 91:11 product [1] - 92:3 profession [16] - 19:24, 20:9, 36:27, 39:9, 42:1, 42:17, 95:17, 95:26, 96:8, 102:20, 117:22, 117:25, 118:4,	118:7, 123:28, 132:11 professional [49] - 5:14, 14:24, 15:29, 16:27, 17:1, 18:10, 18:24, 18:29, 19:10, 25:6, 26:11, 28:26, 29:1, 29:25, 37:4, 39:16, 41:28, 42:14, 44:11, 44:14, 46:6, 46:11, 54:28, 64:7, 67:6, 80:24, 80:28, 81:25, 82:19, 83:19, 85:8, 85:20, 95:19, 95:23, 98:12, 99:18, 103:10, 111:21, 117:4, 118:3, 126:9, 126:13, 126:17, 127:13, 129:9, 130:18, 134:3, 136:11 PROFESSIONA L [2] - 2:18, 2:20 professionalis m [10] - 16:26, 21:2, 21:15, 21:21, 38:7, 81:20, 83:21, 89:20, 89:28, 99:18 professionally [2] - 85:1, 133:21 proffered [1] - 124:19 proficient [1] - 133:21 profile [2] - 105:2, 105:23 profound [1] - 111:27 programme [2] - 127:23, 127:26 programmes [1] - 35:23 progress [2] - 30:7, 131:22 progressing [1] - 140:11 prohibition [1] - 95:9 promise [1] - 71:18 promoting [3] - 95:16, 95:18, 118:2	prompt [2] - 82:16, 86:11 promptly [1] - 84:11 pronounce [1] - 15:4 pronouncing [1] - 60:25 proof [3] - 92:26, 105:6, 110:5 proper [14] - 50:28, 61:16, 70:29, 73:9, 73:26, 74:18, 75:2, 75:5, 75:8, 75:20, 75:22, 77:5, 81:26, 94:7 properly [6] - 15:4, 40:3, 61:17, 71:27, 118:16, 122:27 proportionality [3] - 96:12, 118:11 proportionate [3] - 96:13, 96:22, 118:13 proposing [1] - 7:14 proposition [2] - 107:23, 114:14 protect [1] - 117:14 protecting [1] - 95:16 protection [1] - 117:12 prove [2] - 92:15, 117:5 proven [2] - 7:5, 94:1 provide [8] - 18:8, 19:8, 20:21, 40:13, 42:12, 84:29, 100:3, 105:24 provided [4] - 97:25, 109:13, 111:23, 135:19 providing [2] - 125:27, 126:24 provision [2] - 5:15, 5:17 provoked [1] - 104:3 psychiatric [6] - 52:16, 60:7, 70:11, 70:29, 72:7, 128:2 psychiatrically [1] - 133:8	psychiatrist [12] - 14:24, 14:25, 54:16, 70:13, 72:20, 72:23, 73:27, 74:7, 75:3, 75:21, 75:22, 77:6 psychiatrists [6] - 14:15, 61:13, 61:15, 70:16, 72:18, 74:12 psychiatry [1] - 70:14 psychosis [11] - 52:20, 52:27, 58:26, 70:22, 70:27, 71:7, 73:24, 74:9, 77:12, 130:29, 132:29 psychotic [5] - 59:4, 68:20, 69:1, 71:1, 71:8 pub [1] - 107:8 public [18] - 5:20, 10:1, 66:19, 95:15, 95:16, 95:17, 96:3, 100:15, 105:12, 117:12, 117:14, 117:21, 117:24, 117:26, 118:29, 138:5, 138:6, 138:9 public's [3] - 95:15, 102:19, 123:27 publication [1] - 139:20 pull [1] - 101:1 punctual [1] - 80:27 punish [1] - 95:29 punitive [1] - 96:1 purely [2] - 39:7, 39:21 purports [1] - 20:4 purpose [6] - 95:12, 95:28, 107:5, 107:19, 107:24, 117:21 purposes [5] - 73:16, 117:9, 122:12, 122:18, 125:9 pursue [1] - 29:26	pursued [1] - 114:20 pursuing [4] - 102:12, 123:18, 135:25, 137:15 put [17] - 7:4, 28:8, 28:9, 40:1, 41:12, 41:19, 43:17, 43:20, 43:28, 61:16, 75:15, 107:23, 110:5, 112:28, 114:26, 117:3, 122:26 putting [3] - 27:4, 27:10, 127:7
Q					
qualifications [2] - 50:12, 50:15 qualified [4] - 74:6, 77:2, 132:12, 132:16 quality [2] - 28:26, 129:12 quantity [1] - 55:11 quarter [2] - 29:17 queries [1] - 57:20 QUESTIONING [6] - 3:13, 3:24, 3:29, 29:10, 70:1, 87:27 questions [29] - 17:5, 28:8, 29:3, 29:6, 29:8, 30:14, 37:19, 47:2, 47:15, 47:18, 61:21, 68:3, 68:4, 69:24, 69:27, 72:28, 72:29, 74:3, 74:5, 82:22, 87:18, 87:20, 87:21, 87:24, 111:4, 112:3, 113:11, 119:7, 128:9 quick [1] - 93:23 quickly [2] - 56:3, 140:10 quite [5] - 29:24, 29:25, 73:19, 98:13, 106:12 quote [2] - 108:3, 112:29					

R					
race ^[1] - 65:2 raised ^[1] - 91:21 rang ^[1] - 88:24 range ^[4] - 102:9, 123:15, 135:21, 137:12 rather ^[2] - 17:7, 80:20 rationale ^[1] - 139:17 rationally ^[1] - 74:29 RCPI ^[1] - 110:8 RCPS ^[2] - 50:16 RCSI ^[1] - 110:8 re ^[1] - 69:4 RE ^[7] - 1:12, 3:12, 3:18, 3:23, 28:4, 47:4, 68:13 re-examination ^[1] - 69:4 RE-EXAMINED ^[6] - 3:12, 3:18, 3:23, 28:4, 47:4, 68:13 reach ^[1] - 96:20 reached ^[1] - 104:7 reaction ^[1] - 114:28 reactivate ^[1] - 105:1 read ^[26] - 14:1, 17:6, 18:14, 19:1, 19:18, 20:3, 25:14, 25:19, 25:24, 26:28, 26:29, 27:29, 31:7, 31:11, 31:12, 41:21, 42:8, 44:6, 44:28, 45:10, 45:25, 46:1, 46:16, 104:20, 138:6, 138:8 reading ^[1] - 25:26 real ^[1] - 14:9 realised ^[1] - 88:20 really ^[7] - 16:6, 20:15, 61:10, 83:20, 99:10, 99:23, 116:3 reason ^[12] - 44:4, 63:6, 75:5,	75:7, 84:8, 84:18, 85:12, 109:4, 109:6, 122:24, 129:21, 129:22 reasonably ^[2] - 96:15, 115:3 reasons ^[1] - 118:18 reassurance ^[1] - 140:10 reassure ^[1] - 76:2 reassured ^[1] - 138:15 recalled ^[3] - 71:28, 112:1, 112:4 recap ^[1] - 8:4 receipt ^[2] - 127:29, 128:1 receive ^[1] - 83:10 received ^[3] - 10:17, 128:1, 141:24 receiving ^[1] - 14:12 recent ^[2] - 56:1, 105:11 recently ^[1] - 97:22 recollect ^[2] - 15:2, 25:6 recollection ^[1] - 75:25 recommend ^[2] - 81:20, 94:28 recommendati on ^[8] - 72:22, 72:24, 94:6, 94:13, 101:12, 118:20, 134:11 recommendati ons ^[2] - 138:3, 139:19 recommended ^[2] - 56:19, 58:1 recommending ^[1] - 142:3 recommends ^[1] - 111:6 reconvene ^[4] - 137:29, 138:7, 139:11, 139:21 reconvening ^[1] - 140:2 record ^[5] - 17:7, 31:7, 31:15, 138:6, 138:9 recorded ^[3] -	92:10, 92:20, 92:24 recording ^[1] - 92:15 recurrence ^[2] - 131:18, 132:2 recuse ^[1] - 109:29 red ^[3] - 9:6, 9:7, 31:4 reduced ^[1] - 35:29 reduction ^[2] - 102:28, 124:7 refer ^[2] - 37:9, 139:14 referee ^[1] - 131:3 referees ^[7] - 98:6, 99:10, 116:27, 125:26, 129:6, 131:7, 132:20 reference ^[63] - 13:6, 13:14, 17:7, 17:18, 18:9, 18:15, 18:23, 18:27, 18:28, 19:9, 23:3, 23:15, 23:21, 23:23, 23:26, 23:27, 24:5, 28:7, 28:18, 31:6, 31:7, 31:23, 34:7, 34:9, 35:3, 35:18, 38:6, 38:16, 38:22, 38:26, 38:27, 39:5, 39:21, 39:24, 40:1, 40:9, 40:14, 40:19, 40:28, 41:27, 42:13, 43:1, 43:21, 44:24, 47:8, 81:15, 82:22, 83:2, 84:5, 84:15, 84:20, 84:29, 85:14, 85:19, 89:19, 94:17, 97:24, 97:29, 98:26, 101:15, 125:28, 137:19 referenced ^[2] - 5:26, 131:6 references ^[19] - 31:20, 43:7, 45:28, 46:25, 83:19, 84:2, 84:21, 84:23, 97:12, 98:4,	98:19, 99:11, 99:23, 125:18, 125:22, 126:5, 126:24, 127:14, 129:15 referencing ^[1] - 127:9 referrals ^[1] - 116:24 referred ^[7] - 35:18, 70:16, 74:14, 112:26, 127:14, 129:26, 131:3 refers ^[1] - 51:19 reflect ^[1] - 118:16 refuses ^[1] - 100:2 regard ^[6] - 73:3, 96:21, 96:26, 108:25, 116:21, 118:28 regarded ^[1] - 108:18 regarding ^[10] - 16:3, 28:7, 36:20, 62:14, 113:26, 125:14, 128:20, 128:24, 131:15, 133:15 regards ^[4] - 10:8, 57:21, 118:7, 135:15 register ^[2] - 30:6, 101:25 registered ^[8] - 5:18, 26:12, 94:2, 103:11, 117:17, 117:23, 117:28, 133:17 Registrant ^[10] - 5:22, 8:7, 12:6, 33:3, 74:22, 79:7, 89:19, 111:3, 135:1, 139:14 REGISTRANT ^[3] - 1:12, 2:13, 2:22 registrar ^[5] - 56:21, 59:19, 59:20, 63:20 registration ^[12] - 94:29, 95:5, 95:6, 95:8, 95:9, 95:10, 101:19, 101:22, 102:26, 118:8, 118:21, 124:5 REGISTRATIO	N ^[1] - 1:13 regular ^[2] - 54:3, 61:16 regularly ^[4] - 52:8, 61:11, 81:2, 81:9 regulations ^[1] - 5:17 regulatory ^[2] - 95:18, 108:7 reject ^[1] - 136:7 relate ^[4] - 64:8, 94:2, 102:22, 124:1 related ^[5] - 36:17, 92:2, 92:6, 116:15, 126:14 relates ^[1] - 91:28 relation ^[11] - 6:17, 66:1, 67:16, 91:21, 91:25, 92:1, 98:7, 99:26, 103:15, 118:10, 135:8 relations ^[2] - 115:5, 115:6 relationship ^[6] - 13:17, 44:11, 102:13, 123:19, 135:26, 137:16 relatively ^[1] - 60:1 relevant ^[7] - 92:18, 92:20, 94:21, 97:27, 125:14, 136:9, 136:13 reliability ^[1] - 16:26 relieve ^[1] - 71:6 religious ^[1] - 60:1 reluctant ^[1] - 136:19 rely ^[2] - 83:18, 111:4 remediate ^[1] - 100:4 remediation ^[5] - 97:10, 116:9, 117:1, 127:22, 127:23 remember ^[12] - 14:16, 14:20, 14:22, 14:23, 18:12, 19:17, 36:14, 36:17, 39:29, 53:1, 58:1, 60:12	remind ^[1] - 31:27 reminded ^[1] - 142:10 REMOTE ^[2] - 2:4, 2:5 remotely ^[1] - 135:12 remove ^[1] - 60:7 removed ^[1] - 101:25 repeat ^[4] - 32:17, 36:4, 49:8, 74:4 repeated ^[3] - 55:23, 60:8, 67:20 repeating ^[4] - 67:13, 68:1, 72:5 reply ^[2] - 105:9, 135:2 REPLYING ^[4] - 4:7, 4:9, 135:5, 137:6 report ^[29] - 50:5, 51:19, 52:5, 56:16, 62:6, 66:9, 68:21, 69:18, 71:4, 84:1, 92:3, 93:26, 93:27, 124:11, 125:5, 125:22, 125:27, 126:6, 126:7, 126:27, 127:15, 128:27, 129:17, 133:4, 133:5, 133:7, 134:11, 139:18 reported ^[7] - 59:10, 59:12, 66:14, 66:15, 73:1, 92:7 reports ^[12] - 68:7, 72:18, 91:11, 91:16, 91:17, 91:18, 91:27, 92:2, 92:5, 133:3 represent ^[1] - 13:5 representing ^[1] - 80:5 reproduced ^[1] - 2:31 reputation ^[1] - 96:8 request ^[4] - 32:12, 51:15, 122:1, 126:29

request(s) [7] - 120:18, 120:29, 121:4, 121:13, 121:17, 121:25, 121:29 requested [2] - 41:18, 120:11 requests [1] - 52:3 require [2] - 66:11, 128:4 required [5] - 96:3, 107:3, 110:4, 116:18, 127:2 requires [3] - 96:13, 96:14, 128:6 requiring [2] - 100:11, 100:18 rescue [2] - 43:26, 43:27 research [2] - 60:14, 73:15 resides [1] - 7:21 resolved [2] - 90:4, 126:17 respect [40] - 7:2, 7:7, 21:2, 21:15, 21:21, 35:3, 50:5, 50:26, 51:13, 55:14, 69:9, 69:15, 69:17, 80:29, 93:5, 106:16, 113:24, 119:23, 122:23, 122:25, 123:3, 123:9, 124:11, 124:21, 125:19, 125:20, 125:23, 125:28, 126:26, 127:19, 129:1, 131:12, 131:21, 131:27, 133:4, 133:8, 133:18, 137:9, 139:6, 142:11 respected [1] - 103:13 respectful [14] - 45:18, 80:22, 81:16, 84:13, 90:8, 90:14, 100:23, 108:10, 108:23, 109:5, 115:15, 118:11, 129:14, 135:16 respectfully [1] - 112:10	respective [2] - 7:15, 44:15 respond [1] - 134:16 respondent [1] - 2:32 Respondent [1] - 34:8 response [5] - 82:13, 82:16, 86:11, 134:17, 134:21 responsibility [1] - 81:21 responsible [3] - 54:12, 80:25, 81:27 rest [1] - 93:4 restoration [1] - 95:10 result [3] - 71:7, 102:28, 124:7 results [2] - 102:17, 123:25 resume [1] - 141:14 RESUMED [2] - 5:1, 78:14 retails [1] - 91:28 retained [1] - 109:12 retaliatory [1] - 108:19 retire [1] - 6:25 return [2] - 96:29, 137:27 review [1] - 37:10 reviewing [1] - 97:15 Roisin [1] - 107:8 role/work [1] - 97:27 romance [1] - 105:4 romantic [2] - 63:9, 63:17 room [4] - 11:1, 58:21, 62:3, 85:21 Roscommon [2] - 78:4, 80:6 Roscommon/Sligo [1] - 48:3 roscommon/Sligo [1] - 78:3 rotation [1] - 34:19	roughly [1] - 83:5 round [2] - 57:5, 57:10 row [1] - 109:24 rude [1] - 57:1 ruining [1] - 105:18 rule [1] - 66:4 rules [1] - 5:17 rumours [1] - 58:11 Russell [6] - 107:15, 107:20, 107:25, 110:11, 114:19, 122:18	S safe [2] - 44:15, 45:18 sanction [35] - 7:2, 7:8, 93:6, 94:7, 94:12, 94:17, 94:22, 94:27, 95:1, 95:12, 95:14, 95:28, 96:3, 96:6, 96:13, 96:15, 96:19, 96:21, 96:24, 96:27, 101:23, 101:24, 102:1, 102:29, 111:1, 111:5, 117:8, 117:9, 117:10, 117:21, 118:12, 118:14, 124:8, 139:20, 142:2 sanctioning [1] - 138:2 sanctions [10] - 94:18, 94:25, 95:12, 95:21, 95:29, 96:2, 100:16, 108:3, 125:15, 135:19 sarcasm [1] - 113:5 SARFARAZ [7] - 3:15, 32:10, 33:6, 34:1, 37:22, 47:4, 47:23 Sarfaraz [21] - 7:17, 18:17, 31:24, 32:7, 32:20, 32:22, 34:4, 36:3, 37:18, 37:25, 41:21, 43:25, 44:7,	45:25, 46:1, 46:29, 47:6, 47:12, 47:19 Sarfaraz's [6] - 20:4, 20:14, 20:22, 21:18, 22:7, 22:22 save.. [1] - 31:9 saw [2] - 51:13, 54:11 SC [2] - 2:6, 2:13 scale [1] - 130:22 scared [1] - 54:26 schedule [1] - 59:23 scheduled [2] - 7:16, 61:6 scheduling [1] - 8:11 school [3] - 13:18, 24:15, 88:21 screen [1] - 78:29 screened [2] - 77:10 screening [2] - 54:5, 77:12 screens [1] - 6:7 second [21] - 18:14, 19:18, 19:19, 20:3, 20:29, 21:5, 21:11, 21:17, 22:6, 46:15, 59:2, 59:12, 61:18, 65:11, 70:19, 70:20, 84:27, 103:24, 117:21, 136:4 second-last [4] - 20:29, 21:11, 21:17, 22:6 secondly [1] - 109:8 SECTION [2] - 2:18, 2:20 Section [6] - 93:25, 95:1, 95:13, 99:26, 102:5, 118:21 section [1] - 100:20 secure [1] - 15:27 sedative [1] - 60:26 see [36] - 6:7,	8:16, 8:18, 8:20, 9:12, 11:16, 11:17, 19:15, 25:12, 40:16, 40:27, 43:10, 51:12, 52:5, 52:7, 53:7, 54:19, 59:29, 61:6, 75:5, 75:24, 78:29, 81:13, 84:27, 85:11, 88:12, 89:16, 90:12, 97:13, 99:27, 100:9, 100:22, 102:2, 102:5, 131:20, 136:1 seeing [4] - 14:24, 51:19, 54:15, 72:14 seek [4] - 84:17, 111:4, 111:5, 126:15 seeking [1] - 14:14 seem [5] - 10:1, 11:2, 98:11, 100:29, 116:26 sees [1] - 61:8 send [5] - 20:27, 25:22, 117:25, 118:4, 118:6 sending [1] - 71:15 senior [1] - 6:12 sense [4] - 51:6, 88:3, 94:12, 106:10 sent [20] - 7:15, 9:8, 9:10, 19:16, 25:22, 25:27, 41:13, 43:21, 76:10, 86:29, 87:2, 104:8, 104:14, 114:13, 114:14, 120:24, 121:7, 122:5, 122:10, 122:16 sentence [14] - 18:15, 18:19, 18:26, 18:27, 19:2, 19:12, 19:13, 19:19, 19:20, 20:3, 21:11, 21:17, 21:28, 22:6 sentences [1] - 22:14 separate [2] - 116:18, 116:28 September [1] -	108:21 sequence [2] - 109:25, 113:11 serious [25] - 26:15, 36:27, 55:21, 56:25, 58:24, 63:24, 64:2, 64:29, 66:1, 66:11, 72:4, 75:14, 89:22, 100:11, 100:14, 100:18, 101:23, 102:17, 102:21, 103:15, 104:28, 116:14, 123:25, 123:29 seriously [3] - 63:29, 102:19, 123:27 seriousness [3] - 95:26, 103:6, 116:6 service [3] - 30:19, 47:21, 90:23 Services [3] - 1:27, 2:31, 2:32 SERVICES [1] - 1:32 set [6] - 95:2, 95:12, 97:9, 111:26, 112:2, 117:10 sets [3] - 96:25, 101:29, 109:12 setting [2] - 44:16, 93:28 settings [1] - 45:19 seven [1] - 64:7 several [1] - 76:4 severe [2] - 96:19, 100:16 severely [1] - 71:3 severity [3] - 96:20, 102:29, 124:8 sex [1] - 14:7 Sexual [3] - 102:14, 102:17, 137:12 sexual [44] - 25:16, 25:25, 58:15, 63:9, 100:22, 100:24, 102:3, 102:6, 102:9, 102:10, 102:12, 103:25,
--	---	--	---	---	---	---

122:28, 123:2, 123:5, 123:8, 123:12, 123:15, 123:16, 123:18, 123:20, 123:25, 124:14, 124:24, 124:25, 124:28, 125:6, 130:2, 130:4, 130:13, 132:4, 133:3, 135:9, 135:10, 135:12, 135:15, 135:18, 135:25, 136:2, 137:13, 137:15 shall [1] - 93:27 Shane [6] - 107:15, 107:20, 107:21, 110:11, 114:19, 122:17 share [1] - 89:2 shared [1] - 100:29 SHO [3] - 56:19, 58:1 shock [1] - 25:25 shocking [1] - 16:6 shoe [1] - 89:4 SHORT [3] - 48:6, 48:11, 48:17 short [4] - 93:13, 108:17, 116:16, 117:5 show [1] - 100:7 showed [1] - 82:17 side [2] - 55:2 SIDEBOTTOM [1] - 2:20 sides [1] - 97:4 sign [1] - 32:3 signal [1] - 118:4 signalling [1] - 31:1 signature [1] - 23:15 signed [4] - 17:19, 20:26, 41:5, 91:19 significance [1] - 142:14 significant [5] - 102:27, 103:10, 107:1, 116:16, 124:6 significantly [1]	- 117:24 similar [2] - 46:17, 95:22 similarities [2] - 98:18, 98:22 similarity [1] - 21:24 simple [3] - 82:1, 92:24, 139:8 simply [5] - 66:21, 87:14, 91:15, 105:1, 125:29 sincerely [1] - 14:10 sits [1] - 131:19 situation [3] - 16:8, 70:26, 132:3 six [2] - 24:24, 34:18 skills [3] - 37:6, 46:9, 82:4 skip [1] - 52:21 sledgehammer [4] - 122:24, 125:11, 132:26, 137:26 sleep [6] - 15:5, 15:6, 36:9, 51:7, 57:6, 58:22 sleeplessness [1] - 71:23 slide [1] - 125:25 slightly [2] - 9:19, 37:7 Sligo [7] - 7:21, 8:9, 78:2, 78:3, 80:8, 81:13, 141:4 slot [1] - 141:2 slowly [1] - 140:11 small [2] - 22:29, 46:18 so.. [5] - 13:27, 17:2, 31:15, 65:24, 72:24 social [2] - 105:23, 142:12 socialise [2] - 58:9, 58:10 sole [1] - 109:4 solicitor [2] - 43:21, 138:17 SOLICITOR [2] - 2:10, 2:15 solicitors [3] - 18:2, 23:14,	126:3 SOLICITORS [2] - 2:11, 2:16 someone [10] - 14:3, 15:21, 38:12, 61:11, 81:27, 102:13, 123:19, 135:26, 137:16, 137:19 sometime [1] - 89:3 sometimes [7] - 14:19, 16:16, 16:18, 84:5, 88:9, 88:10, 96:17 somewhat [3] - 54:2, 59:29, 98:20 somewhere [5] - 14:25, 16:4, 16:5, 19:15, 81:13 soon [2] - 140:3, 140:13 sorry [44] - 7:12, 8:12, 21:4, 22:26, 24:2, 28:14, 28:16, 30:28, 36:5, 38:19, 45:25, 47:1, 47:6, 48:27, 50:9, 57:18, 61:18, 64:3, 64:5, 65:7, 69:8, 74:22, 75:11, 81:24, 86:10, 86:14, 87:16, 101:2, 112:7, 114:22, 119:4, 119:26, 124:10, 124:26, 127:5, 127:6, 129:24, 138:11, 138:29, 140:24, 141:10 sort [4] - 27:26, 62:2, 75:18, 105:19 sought [7] - 7:5, 112:10, 121:20, 125:29, 130:9, 131:29, 139:6 sound [6] - 39:9, 42:25, 45:29, 46:17, 51:6 source [2] - 25:16, 97:21 Spain [1] - 105:12 span [2] - 104:6, 106:1 speaking [2] -	56:3, 80:21 specialists [1] - 74:14 specific [4] - 82:12, 86:1, 87:3, 90:13 specifically [3] - 30:9, 106:6, 131:8 specifies [1] - 97:26 speech [2] - 51:6, 56:4 spend [2] - 23:5, 63:26 spending [1] - 28:13 spent [2] - 28:21, 28:28 sphere [1] - 133:25 spilling [1] - 16:24 spread [1] - 25:5 spreading [1] - 58:10 squabbling [1] - 113:5 staff [12] - 8:16, 10:28, 106:17, 110:8, 110:9, 110:10, 120:12, 120:19, 121:1, 121:14, 121:26, 140:15 stage [15] - 7:1, 36:18, 37:8, 51:17, 59:6, 60:3, 62:1, 62:2, 73:23, 76:26, 76:27, 92:21, 118:25, 133:17, 141:21 stand [13] - 16:27, 28:29, 35:5, 35:6, 35:16, 35:17, 36:21, 47:7, 69:20, 81:16, 81:21, 82:7, 126:5 standard [1] - 134:3 standards [9] - 22:3, 22:11, 81:19, 89:20, 89:28, 95:19, 95:23, 118:3, 118:7 STANDARDS [2] - 2:18, 2:20 standing [2] -	22:27, 30:8 stands [1] - 116:16 stark [1] - 98:18 start [12] - 7:6, 15:16, 19:5, 50:27, 56:12, 57:14, 70:27, 96:19, 101:14, 138:29, 139:6, 140:26 started [11] - 20:16, 50:28, 54:2, 58:5, 58:10, 58:22, 58:25, 59:9, 63:13, 71:27, 88:21 starting [3] - 11:14, 58:3, 119:21 state [2] - 57:8, 74:28 statement [4] - 27:18, 35:5, 64:26, 113:18 status [1] - 38:9 stay [2] - 29:3, 90:18 stays [2] - 29:18, 128:5 steady [3] - 55:13, 55:15, 55:17 stenographic [1] - 1:28 Stenography [3] - 1:26, 2:31, 2:32 STENOGRAPH Y [1] - 1:31 step [1] - 96:18 steps [2] - 107:6, 137:24 sticking [1] - 20:18 still [24] - 11:7, 16:27, 28:22, 28:25, 28:29, 29:24, 35:1, 35:16, 35:17, 36:21, 40:7, 53:26, 54:25, 54:26, 56:4, 61:16, 76:9, 81:1, 81:16, 81:21, 89:27, 116:16, 133:25 stilts [1] - 114:29 stood [1] - 114:15	stop [7] - 59:2, 66:28, 67:27, 67:28, 68:3, 68:9, 68:11 stopped [1] - 56:3 stories [4] - 72:8, 113:23, 113:24 straight [1] - 41:7 straightforward d [2] - 113:20, 125:28 strain [2] - 53:23, 60:2 stranded [1] - 76:14 street [2] - 67:25, 142:12 stress [24] - 36:17, 52:18, 53:13, 53:16, 55:23, 56:8, 58:17, 59:29, 60:6, 60:7, 60:8, 60:19, 64:27, 65:22, 66:10, 67:10, 69:12, 69:13, 72:13, 104:28, 111:20, 126:14, 128:20 stress-related [1] - 36:17 stressed [4] - 36:15, 52:17, 54:25, 58:27 stresses [2] - 71:10, 71:11 stressors [1] - 128:17 stroke [2] - 60:15, 73:14 strong [2] - 46:9, 82:4 struggle [1] - 136:1 stuck [1] - 30:8 studying [1] - 36:12 stuff [2] - 25:17, 35:23 subcutaneousl y [2] - 73:10, 73:12 subject [3] - 67:10, 94:3, 119:7 subjected [3] - 60:14, 64:27,
--	--	---	--	---	--

65:21 submission ^[15] - 10:12, 10:16, 69:9, 100:23, 105:22, 108:10, 108:23, 109:6, 115:9, 115:15, 118:11, 118:18, 135:1, 135:16, 136:7 SUBMISSION ^[14] - 3:5, 3:7, 4:1, 4:3, 4:7, 4:9, 4:11, 9:16, 10:14, 93:20, 119:18, 135:5, 137:6, 139:3 submissions ^[16] - 6:22, 6:27, 7:2, 91:24, 92:22, 93:5, 94:15, 97:1, 101:12, 101:14, 103:4, 119:8, 134:13, 139:23, 139:28, 141:23 submit ^[12] - 112:10, 119:20, 119:22, 123:6, 124:29, 125:20, 127:5, 127:13, 130:3, 130:7, 130:10, 130:20 subsequent ^[2] - 59:14 subsequently ^[2] - 7:7, 71:27 substantial ^[1] - 115:17 substantially ^[1] - 126:21 substitute ^[1] - 136:28 suddenly ^[1] - 131:6 suffer ^[1] - 66:10 suffered ^[3] - 66:9, 126:8, 133:8 suffering ^[11] - 55:22, 63:15, 68:19, 70:21, 70:28, 70:29, 71:23, 130:28, 131:1, 132:28, 132:29 suggest ^[8] - 94:24, 104:2, 116:4, 133:5, 133:7, 138:23, 140:17, 141:2	suggested ^[10] - 107:18, 114:12, 114:18, 114:22, 116:23, 124:12, 124:13, 131:10, 136:5, 142:17 suggesting ^[3] - 119:5, 122:29, 124:28 suggestion ^[6] - 114:4, 130:14, 138:12, 138:17, 138:18, 138:20 suggestions ^[2] - 103:29, 104:1 suggests ^[1] - 125:5 suited ^[1] - 140:27 summarise ^[1] - 13:14 superiors ^[1] - 67:11 supplied ^[1] - 2:31 supply ^[2] - 23:14, 23:17 support ^[3] - 64:29, 67:11, 104:29 supportive ^[2] - 16:26, 129:14 suppose ^[6] - 8:26, 9:19, 32:16, 72:29, 118:26, 136:15 supposed ^[3] - 56:24, 59:20, 71:6 surprise ^[3] - 14:11, 64:5, 64:9 surprised ^[1] - 73:20 surprising ^[2] - 13:29, 135:12 surrounding ^[1] - 129:19 surroundings ^[1] - 32:16 suspension ^[1] - 95:7 swear ^[3] - 11:19, 48:23, 78:18 swipe ^[1] - 8:22 Sword ^[2] - 131:25, 131:28 sworn ^[4] - 11:19, 32:15, 48:22, 78:17	SYED ^[2] - 3:9, 13:1 sympathy ^[2] - 60:11, 115:16 symptoms ^[5] - 52:16, 53:7, 71:3, 73:23, 73:24 systems ^[1] - 44:2 Síochána ^[6] - 104:10, 105:28, 110:8, 112:6, 112:8, 122:2	testimonials ^[4] - 7:3, 8:6, 97:12, 98:5 testimony ^[3] - 136:20, 136:27, 136:28 text ^[12] - 10:17, 85:29, 99:5, 106:21, 112:25, 114:12, 120:24, 121:8, 122:5, 122:10, 122:17, 129:2 texted ^[2] - 87:5, 87:15 texts ^[3] - 86:29, 87:2, 87:7 thanked ^[1] - 140:5 that.. ^[1] - 30:1 THE ^[23] - 1:8, 1:17, 2:4, 2:8, 2:13, 2:19, 2:21, 3:13, 3:24, 3:29, 5:1, 29:10, 30:26, 47:27, 48:6, 48:11, 48:17, 70:1, 77:26, 78:14, 87:27, 90:27, 142:22 themselves ^[6] - 57:6, 67:3, 110:27, 126:1, 133:11, 140:17 thereafter ^[3] - 52:7, 52:8, 133:17 therefore ^[10] - 39:22, 46:21, 53:16, 67:16, 99:10, 99:22, 100:15, 124:29, 136:27, 141:27 thereof ^[1] - 123:9 thinking ^[1] - 140:1 thinner ^[2] - 60:16, 73:11 third ^[3] - 14:17, 46:2, 136:18 thoughts ^[1] - 77:11 threat ^[1] - 114:9 three ^[23] - 7:3, 24:24, 32:26, 34:27, 40:25, 51:20, 51:23, 61:14, 68:6, 72:17, 79:3,	98:19, 99:7, 117:9, 125:18, 125:20, 125:22, 126:24, 129:6, 129:15, 134:16 three-members ^[1] - 32:26 throughout ^[11] - 19:22, 20:7, 22:9, 41:28, 42:15, 45:14, 46:5, 54:13, 54:14, 59:10, 85:7 timely ^[1] - 100:7 TO ^[4] - 1:7, 1:17, 142:22 to.. ^[1] - 9:7 today ^[30] - 6:5, 6:11, 11:28, 18:16, 26:1, 26:20, 30:16, 32:15, 32:24, 32:27, 33:5, 38:2, 38:3, 47:20, 48:21, 49:15, 49:23, 61:29, 62:3, 76:23, 78:27, 79:9, 85:17, 93:4, 98:5, 116:27, 132:18, 134:14, 140:4, 141:13 today's ^[1] - 90:24 together ^[10] - 13:21, 13:23, 16:11, 31:19, 40:1, 79:3, 81:4, 82:9, 125:18, 140:18 tolerated ^[1] - 118:5 took ^[10] - 27:14, 36:27, 43:5, 45:1, 57:11, 65:25, 98:13, 105:27, 106:6, 113:12 top ^[1] - 56:29 totally ^[3] - 63:12, 88:18, 90:7 touch ^[3] - 35:1, 35:29, 116:12 touched ^[1] - 129:20 towards ^[17] - 46:10, 57:1, 58:5, 58:23, 63:5,	63:10, 80:24, 81:26, 103:16, 103:27, 106:8, 107:13, 107:14, 107:20, 113:24 town ^[2] - 88:27, 131:10 training ^[3] - 16:22, 29:27, 30:5 trammelled ^[1] - 139:27 transcript ^[3] - 1:28, 5:28, 112:22 transcripts ^[1] - 2:30 transfer ^[1] - 95:6 travel ^[2] - 76:15, 76:16 travelling ^[1] - 14:28 treated ^[1] - 65:3 treating ^[4] - 50:24, 52:15, 125:15, 125:18 treatment ^[8] - 14:12, 50:26, 66:12, 74:19, 76:24, 84:10, 128:1, 128:2 tried ^[2] - 85:29, 139:13 trigger ^[2] - 16:10, 16:23 triggered ^[1] - 16:23 trouble ^[2] - 117:3, 138:15 true ^[24] - 25:28, 25:29, 26:2, 62:19, 62:20, 63:1, 63:2, 64:13, 64:14, 64:20, 65:4, 65:10, 65:12, 65:16, 65:19, 65:20, 65:21, 66:21, 66:22, 66:27, 66:29, 67:2, 76:5 trust ^[1] - 15:21 trusted ^[8] - 18:9, 18:23, 18:29, 19:9, 41:27, 42:13, 46:11, 129:9 truth ^[6] - 23:19, 27:12, 92:7, 92:15, 92:26,
--	--	---	---	---	--

115:21 try [9] - 8:10, 48:2, 58:9, 74:4, 86:15, 93:17, 105:5, 105:7 trying [4] - 43:29, 48:8, 122:12, 122:18 Tullamore [7] - 16:5, 25:2, 25:9, 80:16, 81:4, 88:26, 90:3 turn [2] - 11:10, 31:2 turned [2] - 8:3, 8:28 twice [2] - 41:17, 41:18 twist [1] - 43:29 two [16] - 17:2, 30:29, 42:26, 46:25, 64:28, 65:23, 72:29, 77:15, 78:7, 84:21, 90:3, 97:4, 108:17, 110:7, 110:9, 141:2 type [2] - 100:24, 127:22 types [1] - 95:1 typical [1] - 88:19 typo [1] - 19:1	134:19, 137:4 undergo [2] - 132:7, 132:8 undermined [1] - 105:26 undermines [2] - 102:19, 123:27 undertake [2] - 116:17, 133:19 undertakings [2] - 94:1, 130:16 undoubtedly [3] - 103:24, 116:13, 116:14 unduly [1] - 134:14 unethical [4] - 52:2, 57:2, 57:12, 73:2 unfair [1] - 139:12 unfolded [2] - 16:7, 94:27 uninvited [1] - 120:10 University [4] - 106:7, 106:17, 110:10, 120:13 unless [4] - 31:10, 102:27, 124:6, 127:25 unlike [1] - 94:7 unmute [1] - 32:9 unnecessary [2] - 102:14, 123:20 unprofessional [2] - 44:13, 45:16 unrequited [1] - 103:27 unsafe [1] - 103:20 unsatisfactory [1] - 98:20 unscheduled [1] - 52:1 untrue [1] - 25:28 unusual [5] - 18:26, 51:3, 60:13, 62:16, 63:5 unwanted [11] - 63:10, 63:13, 106:7, 106:27, 120:10, 120:27, 121:11, 121:22, 122:8, 122:14, 122:21 up [26] - 11:14,	13:22, 24:18, 44:24, 51:5, 51:7, 66:18, 72:8, 87:19, 101:1, 105:7, 107:23, 123:4, 124:26, 127:17, 127:24, 128:14, 128:16, 128:19, 131:28, 132:28, 133:9, 133:11, 133:15, 133:21, 134:5 uphold [1] - 117:21 upholding [1] - 95:18 upload [1] - 105:11 ups [1] - 58:7 upwards [1] - 96:20 urgent [3] - 82:10, 82:14, 139:29 utilise [1] - 107:4 uttered [1] - 99:20 utterly [1] - 105:25	9:11 verified [1] - 98:1 verify [2] - 14:26, 62:6 versa [1] - 97:7 via [1] - 142:12 vice [1] - 97:7 video [2] - 9:1, 9:2 view [3] - 71:21, 138:27, 142:5 vigorously [2] - 110:17, 110:28 visible [1] - 123:3 visit [1] - 71:25 viva [1] - 91:9 voce [1] - 91:9 vouch [2] - 39:8, 129:11 vulnerable [7] - 58:25, 102:23, 124:2, 124:12, 125:6, 133:6	22:2, 22:11 Wexford [4] - 24:20, 24:25, 34:18 Whatsapp [7] - 106:22, 120:24, 121:8, 122:5, 122:11, 122:17, 127:26 WhatsApps [2] - 127:24, 129:2 whatsoever [3] - 115:16, 125:26, 130:3 whilst [2] - 131:21, 141:22 whispering [1] - 127:6 whole [3] - 23:2, 23:19, 63:2 wholeheartedl y [1] - 22:10 wider [1] - 96:7 wife [4] - 89:8, 89:14, 90:17, 132:15 will.. [1] - 11:15 willing [1] - 133:19 wish [6] - 47:21, 47:24, 68:4, 68:5, 90:23, 110:28 wished [1] - 7:4 withdrawn [1] - 108:20 WITHDREW [4] - 30:26, 47:27, 77:26, 90:27 Witness [227] - 5:21, 5:23, 9:22, 9:24, 10:2, 13:5, 13:10, 13:15, 17:28, 18:2, 18:9, 18:23, 18:28, 19:9, 19:22, 20:7, 21:1, 21:14, 21:20, 23:14, 24:12, 24:27, 25:19, 25:20, 25:22, 26:1, 26:5, 27:1, 27:22, 28:7, 28:11, 29:15, 32:12, 34:7, 34:17, 38:5, 38:11, 39:15, 39:29, 40:6, 41:4, 41:27, 41:29, 42:13, 42:15, 43:4, 43:21, 44:13, 44:26,	45:9, 45:16, 46:5, 50:4, 50:21, 62:4, 62:8, 62:9, 62:18, 62:20, 62:25, 62:27, 63:10, 63:19, 64:1, 64:6, 65:8, 65:19, 65:26, 66:21, 66:24, 67:14, 68:3, 70:12, 73:1, 73:13, 73:23, 80:5, 80:12, 83:3, 83:13, 83:16, 84:2, 84:8, 85:1, 86:3, 87:12, 88:3, 88:25, 94:29, 98:8, 98:11, 99:4, 99:5, 99:8, 99:13, 99:18, 99:21, 103:14, 103:15, 103:25, 103:27, 103:28, 104:2, 104:4, 104:9, 104:10, 104:14, 104:17, 104:23, 105:17, 105:18, 105:22, 105:24, 105:25, 106:8, 106:14, 106:17, 106:18, 106:21, 106:24, 106:25, 107:6, 107:7, 107:13, 107:19, 107:20, 107:24, 107:26, 108:1, 108:16, 108:18, 108:19, 108:26, 109:2, 109:3, 109:18, 110:1, 110:5, 110:14, 110:18, 110:22, 111:9, 111:12, 111:13, 111:15, 111:19, 112:5, 112:13, 112:19, 112:20, 112:26, 113:1, 114:4, 114:10, 114:13, 114:18, 114:23, 115:10, 115:13, 115:15, 115:18, 115:21, 115:23, 116:5, 116:6, 116:9, 116:15, 116:17, 116:21, 116:22, 116:27, 117:2, 117:23, 118:8, 118:16, 118:21, 119:1, 119:5, 120:3, 120:14, 120:21,	
U						
ultimately [3] - 103:28, 111:6, 118:19 unacceptable [3] - 71:17, 102:18, 123:26 uncharacteristi c [2] - 14:2, 15:17 uncomfortable [1] - 90:19 unconnected [1] - 126:20 UNDER [1] - 1:8 under [24] - 5:12, 5:17, 12:3, 14:19, 55:20, 58:17, 60:6, 67:9, 69:12, 69:13, 93:25, 95:1, 98:7, 101:10, 101:17, 102:6, 118:21, 128:6, 128:29, 130:28, 132:28,						
		V				

120:25, 121:3, 121:4, 121:9, 121:16, 121:17, 121:21, 121:28, 121:29, 122:1, 122:3, 122:6, 122:13, 122:19, 123:3, 124:11, 124:26, 125:6, 125:23, 125:29, 126:3, 126:8, 126:23, 126:29, 127:17, 130:25, 131:5, 131:13, 133:6, 134:2, 135:29, 136:7, 136:11, 136:21, 136:23, 136:29, 139:7, 139:14, 140:4, 140:5, 140:7, 140:11 WITNESS [7] - 1:12, 2:22, 3:2, 30:26, 47:27, 77:26, 90:27 witness [19] - 5:25, 7:12, 7:14, 10:21, 10:29, 11:1, 11:3, 23:11, 31:25, 32:5, 47:15, 47:29, 48:14, 64:19, 69:27, 72:28, 74:22, 77:28, 87:24 witness's [1] - 23:27 witnessed [5] - 19:23, 22:1, 42:16, 44:12, 45:14 witnesses [11] - 8:5, 8:14, 9:1, 9:20, 76:13, 84:2, 99:7, 109:26, 110:16, 110:28, 117:4 wonder [4] - 31:13, 37:29, 100:28, 134:16 word [7] - 15:16, 15:17, 38:19, 65:17, 124:22, 124:25, 129:7 worded [1] - 124:18 wording [5] - 124:17, 124:18, 124:20, 133:10, 137:10	words [26] - 19:28, 20:1, 24:4, 27:10, 41:3, 42:6, 44:19, 44:28, 53:9, 65:1, 71:22, 82:1, 83:26, 83:29, 84:1, 84:6, 84:14, 85:13, 99:21, 123:2, 123:5, 129:8, 131:11, 131:12, 135:10 work-related [1] - 126:14 worker [1] - 72:21 works [3] - 128:11, 132:15, 133:24 worried [6] - 29:25, 30:4, 30:5, 60:19, 60:22, 61:9 worry [1] - 111:20 worse [1] - 105:27 worsen [1] - 60:8 WRC [2] - 112:6, 112:8 write [17] - 17:22, 19:3, 19:12, 19:28, 20:1, 40:28, 41:1, 41:8, 43:7, 44:19, 44:28, 83:2, 83:8, 83:14, 83:16, 84:5, 85:13 writing [13] - 14:1, 17:24, 18:8, 18:12, 18:22, 19:8, 41:26, 42:12, 42:29, 43:4, 43:9, 43:12, 95:3 written [11] - 2:32, 18:15, 22:27, 24:3, 25:18, 31:20, 39:24, 44:25, 47:8, 83:25, 84:2 wrongdoing [17] - 96:14, 96:22, 98:14, 99:14, 106:1, 106:10, 109:19, 110:26, 111:15, 111:19, 112:2, 116:6, 118:5, 118:13,	118:16, 136:23 wrote [16] - 17:25, 18:19, 19:5, 19:13, 19:16, 20:27, 23:16, 41:2, 42:6, 45:23, 46:14, 69:14, 83:12, 83:24, 84:24, 84:26 X Xanax [3] - 51:11, 51:14, 51:25 Y year [19] - 9:23, 13:19, 14:17, 15:10, 15:13, 24:7, 29:16, 35:26, 36:13, 40:25, 52:7, 54:21, 54:24, 61:1, 61:3, 81:1, 89:11, 104:9, 105:27 years [34] - 13:12, 14:3, 17:2, 18:10, 18:24, 18:29, 19:2, 19:3, 19:10, 19:14, 19:16, 22:28, 26:17, 34:24, 34:26, 41:28, 42:14, 46:5, 64:28, 65:24, 67:5, 76:26, 77:22, 80:12, 80:13, 80:16, 80:20, 85:2, 85:7, 103:20, 106:4, 133:27, 134:1 you.. [1] - 62:2 young [2] - 65:13, 103:11 yourself [7] - 17:22, 30:15, 32:24, 40:28, 42:6, 83:8, 84:25 Yusuf [41] - 7:18, 14:12, 48:1, 48:8, 49:11, 50:3, 50:14, 61:18, 61:20, 61:25, 63:23, 63:27, 64:12, 64:16,	65:6, 65:11, 65:25, 66:5, 66:6, 66:19, 66:28, 67:12, 67:27, 67:28, 68:9, 68:15, 69:21, 69:23, 69:26, 73:5, 73:29, 74:2, 125:17, 126:6, 128:4, 128:10, 128:18, 128:27, 129:17, 129:20, 130:29 YUSUF [2] - 3:20, 49:29 Yusuf's [1] - 126:6 Z zealous [1] - 136:8 zero [2] - 126:1, 126:2 Zolpidem [4] - 15:5, 60:24, 60:29 Zoom [1] - 9:9 € €5,000 [1] - 95:4
--	--	--	---