



Kevin Slack



Call 1997




Clerks

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Appointments

- Recorder (2022)
- Fee Paid Judge of the First Tier Tribunal Health Education and Social Care Chamber (Mental Health) (2022)

Memberships

- Criminal Bar Association
- Northern Circuit
- Gray's Inn

Education

- MA, Law, Emmanuel College
- University of Cambridge (Double First 1996)
- Bar Vocational Course, Inns of Court School of Law (Very Competent 1997)
- Prince of Wales Scholarship, Gray's Inn (1996)

Healthcare (Presenting for General Medical Council)

Kevin has experience of presenting cases on behalf of the General Medical Council since 2010. Initially, this work was confined to the Interim Orders Panel but in time extended to Investigation Committee and Fitness to Practice Review hearings. In 2013, Kevin began presenting Fitness to Practice hearings. He has also conducted cases on behalf of the Care Quality Commission before the Health, Education and Social Care Tribunal

Kevin's work before the Medical Practitioner's Tribunal Service is complemented by his experience in other regulatory arenas. He has prosecuted on behalf of the Environment Agency for over 15 years and is a member of specialist Regulatory Advocates Panel (List B). This has also led, more recently, to prosecuting cases on behalf of the Health and Safety Executive.

Kevin is also a Category 4 CPS Prosecutor and has a particular interest in prosecuting cases involving fraud. (He is on the CPS Specialist Fraud Panel at Category 4).

Kevin prides himself on his attention to detail, thorough preparation and his understanding of complex issues and how to overcome them.

Healthcare Cases

GMC v R (2019). A 3 week Fitness to Practice hearing in relation to allegations of Deficient Professional Performance and lack of the necessary knowledge of English. Unsuccessful challenge made to the use of OET results as proof of insufficient knowledge of English.

GMC v M (2018). A Fitness to Practice hearing involving a doctor convicted of providing misleading information to potential investors in a company of which he was a director. The case involved consideration of whether a proven intent to deceive necessarily involved an imputation of dishonesty.

GMC v M (2017) which concerned allegations of impairment based on the falsification of data used in a clinical trial.

GMC v O (2017) which concerned allegations of impairment based on the prescribing of medication without having a licence to practice.

GMC v A (2016) which concerned a challenge to the reliability of hair sample tests as proof of alcohol consumption in the context of asserted abstinence.

CQC v H Ltd (2016) which was an appeal before the First Tier Tribunal against an Urgent Notice of Decision issued under section 31 of the Health and Social Care Act 2008.

GMC v P (2015). An 8 day Fitness to Practice hearing involving alleged misconduct on the part of a GP in failing to examine a child patient who subsequently tragically died as a result of parental abuse. The case involved detailed consideration of safeguarding issues and the extent of the duty of inquiry when considering medical records. It is believed to be one of the first cases involving disciplinary proceedings being brought against a doctor who had never met the patient whose care was at the heart of the case.

CQC v K (2015). An appeal against the decision to cancel the registration of a care home manager on the basis that she had provided false or misleading information to the CQC.

GMC v Dr H (2014). Represented the GMC at a Fitness to Practice hearing concerning the deficient professional performance of a GP who had been in practice for many years. The doctor was erased from the register at the conclusion of the hearing.

GMC v Dr T (2014). Represented the GMC in a 7 day Fitness to Practice hearing in relation to a consultant histopathologist. The case involved allegations of deficient professional performance (based on a detailed audit of his work) and misconduct (misrepresenting his colleague's opinion on two pathology reports and giving misleading information on his CV). The doctor was erased from the register at the conclusion of the hearing.

GMC v Dr R (2014). An involved Fitness to Practice Review hearing which extended over 3 days and involved a disputed allegation that the doctor had deliberately ingested ecstasy whilst subject to an ongoing order of conditions imposed, in part, because of past illicit drug use.

GMC v Dr B (2013). An Investigation Committee hearing in relation to a consultant ophthalmologist who had provided allegedly deficient advice and follow-up care to two patients undergoing eye surgery.

GMC v Dr P (2012). An Investigation Committee hearing into alleged sub-standard treatment provided by a consultant gynaecologist who perforated the patient's uterus whilst performing a hysteroscopy. The case involved oral evidence given by two eminent experts as to whether the treatment fell below the standard to be expected of a consultant gynaecologist.

GMC v Dr L (2012). A complicated Fitness to Practice Review hearing involving issues of misconduct, health and conviction. The doctor called eminent expert evidence to show that the diagnosis previously accepted in his case of bipolar disorder was no longer valid. The Panel had to grapple with the effect that the absence of this diagnosis had on the case, bearing in mind that the previous Fitness to Practice Panel had relied on the presence of this diagnosis as mitigation of the doctor's previous misconduct.

GMC v Dr D (2012). A Fitness to Practice hearing involving a General Practitioner who was alleged to be impaired by reason of adverse mental health and who disputed the findings of the GMC health assessors. The doctor represented himself during the proceedings.