Neutral Citation Number: **[2023] EWHC 2807 (Admin)**

IN THE HIGH COURT OF JUSTICE
KING'S BENCH DIVISION
ADMINISTRATIVE COURT SITTING IN LEEDS

The Court House
Oxford Row
Leeds LS1 3BG

Before Her Honour Judge Kelly sitting as a Judge of the High Court

- -

Between :

Case No: CO/1898/2023

JOSEPH LOZE ONWUDE

Claimant

- and –

GENERAL MEDICAL COUNCIL

Defendant

and

Case No: AC-2023-LDS-000226

GENERAL MEDICAL COUNCIL

Claimant

- and –

JOSEPH LOZE ONWUDE

Defendant

DR ONWUDE appeared in person
Mr Rory Dunlop KC was instructed directly by the **GENERAL MEDICAL COUNCIL**

Hearing date: 31 October 2023
Date handed down: 9 November 2023

APPROVED JUDGMENT

This judgment was handed down by the Judge remotely by circulation to Dr Onwude and the GMC's representatives by email and release to The National Archives. The date and time for hand-down is deemed to be 10:30am on 9 November 2023.

Her Honour Judge Kelly

1. This judgment follows the hearing on 31 October 2023 of three applications concerning dealings between Dr Joseph Loze Onwude ("Dr Onwude") and the General Medical Council ("the GMC"). An overview of the various disputes between the parties is set out in the background below. This hearing was concerned with three applications:
    a. Dr Onwude's claim against the GMC issued on 24 May 2023 in respect of the order made by the Interim Orders Tribunal ("the IOT") on 3 February 2023 that Dr Onwude's registration on the Medical Register would remain suspended until the end of 9 November 2023;
    b. the GMC's application dated 25 September 2023 for an extended civil restraint order ("extended CRO") in relation to the various matters raised in Dr Onwude's claim; and
    c. the GMC's application for the court to extend the interim order made by the IOT in respect of Dr Onwude's suspension for a further 12 months.

2. Dr Onwude represented himself. The GMC was represented by Mr Rory Dunlop KC. I had the benefit of reading the skeleton arguments of Dr Onwude and Mr Dunlop before the hearing. In addition, I had the benefit of reading the court bundle provided by the parties.

3. On the day of the hearing, I was provided with an additional bundle of documents and various emails which had been sent between the parties. The additional documentation was sent to the court and to the GMC by email dated 27 October 2023 at 17:00. As I explained that the hearing, I did not have the opportunity to read those documents before the hearing.

4. At the hearing, reference was made to other documentation which Dr Onwude had not produced but wanted to rely on. I invited Dr Onwude to send that additional documentation to both the court and to GMC and I gave permission for the GMC to respond, if necessary, to those additional documents. The additional documents were sent by Dr Onwude to the court and to the GMC by email dated 1 November 2023 at 2:47 PM. I received a response to those documents from the GMC, copied to Dr Onwude, by email on 1 November 2023 at 3:53 PM.

5. As I stated at the hearing, I wanted the opportunity to consider all of the documents provided by Dr Onwude before giving a decision in respect of the three matters before the court.

6. I confirm that I have now had the opportunity of reading all of that material referred to above, in addition to the material which I had read before the hearing on 31 October 2023. I do not propose to rehearse all of the arguments raised, nor all of the evidence referred to during the course of the hearing. It is not necessary or proportionate to do so. However, I record that I read and considered the evidence as a whole, and considered all those arguments before coming to my decision

7. In addition, as Dr Onwude was a litigant in person, I confirm that I had firmly in mind my duties under CPR 3.1A when dealing with this hearing. I informed Dr Onwude of my duty pursuant to the CPR to assist him in putting his case and to help him to make sure that I understood the case he was making. Dr Onwude was adamant that he did not require any assistance from me during the hearing because he had significant litigation experience.

8. I tried to assist Dr Onwude with his case and to summarise his position in respect of each of the applications. In addition, I asked Dr Onwude to open his bundle of documents so that I could check which documents he was referring to when he was making his various submissions. I wanted to make sure that I understood Dr Onwude's case and to make sure that Dr Onwude was able to present the various aspects of his case. Dr Onwude refused to look at the bundle and resisted any attempt to persuade him to do anything other than let him address the court, in his own time and in his own way, about the matters which he felt were important. I allowed him to do this following my initial attempts to assist him which had resulted in Dr Onwude becoming very upset and struggling to breathe.

Background

9. Dr Onwude is a consultant gynaecologist. In 2008, Dr Onwude provided services to two patients who were friends of his at the time. When their friendship broke down,

Dr Onwude issued the patients with invoices for his services and in turn those two patients complained to the GMC.

10. The Medical Practitioners Tribunal ("the MPT") held a number of hearings in 2015 and 2016 in relation to various allegations against Dr Onwude, which allegations included allegations of dishonesty. During the course of the MPT proceedings, Dr Onwude obtained witness summonses against various witnesses for them to produce documents which the MPT had refused to admit into proceedings. Those witness summonses were set aside by the Administrative Court. The MPT found the charges proven and erased Dr Onwude from the Register. On 12 December 2016, Dr Onwude brought a Judicial Review claim against the MPT's decision to refuse an adjournment for the recall of witnesses. Permission was refused by the Administrative Court and the application was declared to be totally without merit.

11. Dr Onwude appealed the MPT's decision to erase him from the Register. Collins J, in a judgment dated 8 March 2017, allowed Dr Onwude's appeal and quashed the MPT's decision on the most serious allegations including dishonesty. The findings upheld concerned Dr Onwude's failure to keep records of treatment or medication provided to friends and that he had practised privately without professional indemnity insurance. The case was remitted to the MPT to consider whether the findings which Collins J had upheld amounted to professional misconduct and, if so, what (if any) sanction should be imposed.

12. On 15 November 2017, Dr Onwude brought a race discrimination claim in the employment tribunal against the CEO of the GMC, the investigation manager of the GMC and the GMC itself. The claims were all struck out and two were declared to be totally without merit.

13. On 22 January 2018, Dr Onwude applied for the CEO of the GMC and the investigation manager of the GMC to be committed for contempt of court. Permission was refused.

14. On 28 August 2018, Dr Onwude applied for Judicial Review of the MPT's decision to proceed with allegations against him. Permission was refused and the application was declared to be totally without merit.

15. On 2 November 2018, the MPT decided (in the proceedings remitted by Collins J) to issue Dr Onwude with a warning. Dr Onwude applied for Judicial Review of that decision. Permission was refused and the application was declared to be totally without merit.

16. Between 2019 and 2022, threats were repeatedly made by Dr Onwude that he would instigate litigation against the GMC and its officers. He asked the Attorney General to bring a criminal case of torture against the GMC's CEO. On several occasions he sought unsuccessfully to bring private prosecutions against officers of the GMC.

17. Dr Onwude revalidated his license to practice in 2020. He had been given notice of the need to submit an annual return as he did not have a responsible officer or an approved suitable person. He failed to be revalidated in 2021, despite correspondence being sent to him notifying him that he needed to revalidate. The Assistant Registrar decided, on 3 June 2021, to withdraw Dr Onwude's licence to practice. There was significant correspondence between Dr Onwude and the GMC after he was notified of the decision to withdraw his license to practice. Dr Onwude continued to insist that he had revalidated.

18. On 16 May 2022, Dr Onwude brought a claim for Judicial Review of the decision of the legal adviser at Westminster Magistrates' Court not to permit a private prosecution of the GMC's officers. Around this time, two members of the public reported to the GMC that Dr Onwude was practising without a licence. The GMC investigated and the reports produced as a result of those investigations were passed to Norfolk and Suffolk police who investigated the matters and have brought charges against him. Dr Onwude has pleaded not guilty to those charges and the trial has been set on 26 March 2024 at Ipswich Magistrates' Court. Dr Onwude has threatened to bring litigation against one of the people who reported him.

19. On 10 August 2022, the MPT made an interim order suspending Dr Onwude's registration. On 3 February 2023, the MPT continued that order for a further six months until the end of 9 November 2023.

20. During his submissions, Dr Onwude confirmed that he accepted the factual background to this matter as set out by counsel for the GMC in his skeleton argument. He did not accept the tone set out by counsel in that background to suggest that Dr Onwude had issued vexatious and unmeritorious claims and sent correspondence both to the GMC directly and also to various employees and other bodies concerned with the matters which affected Dr Onwude.

The Law

21. Unfortunately, Dr Onwude and the GMC are fundamentally disagreed as to the legal basis for decisions taken by the Registrar and the IOT, and as to whether or not this court has power to consider the totality of the complaints made by Dr Onwude in his claim.

22. The relevant regulations of the General Medical Council (Licence to Practice and Revalidation) Regulations Order of Council 2012 (S.I. 2012/2685) ("the 2012 Regulations") are as follows:

"4(3) The licence of a registered practitioner may be withdrawn by the Registrar where it is established to the satisfaction of the Registrar that the practitioner has-…
(c) failed, without reasonable excuse, to undergo an assessment requested by the Registrar in accordance with regulation 6(8)."

"6(1) The Registrar must give each licensed practitioner, other than an excepted practitioner listed in paragraph (2), a notice specifying a submission date ("notice of a submission date") for the purposes of the revalidation of the practitioner-
(a) once in every five year period following the grant of a licence to the practitioner; or
(b) on any other occasion that the Registrar sees fit."

"6(4) A practitioner who has been given notice of a submission date must, by that date, provide any evidence or information to the Registrar relating to the revalidation of the practitioner required by guidance published by the General Council under section 29G (guidance)."

23. Although Dr Onwude accepts that the 2012 Regulations have been made, he asserts that the GMC cannot lawfully or legally rely on those Regulations in order to

withdraw his license to practice because those regulations were not endorsed by a Monarch. In other words, whilst he accepts that primary legislation (that is statutes) are law, and as such can be followed and applied, secondary legislation (such as the Regulations relied upon by the GMC and the IOT) cannot be applied as law. He asserted in his claim:

"Unambiguously, a rule is usually made by a government or a body as a delegated legislation, that is used to order the way in which a society behaves. A RULE is not A LAW.
Unambiguously too, Regulations are supplementary to Acts, like the Medical Act, 1983. They link to existing Acts and they are designed to aid a person to apply the principles of the primary act. Essentially, they are formal guidelines and breaching them is not necessarily enforceable in the courts.
A REGULATION is not A LAW"

24. Dr Onwude therefore asserted that the order continuing the suspension of his license to practice made by the IOT was illegal and unlawful because it relied upon the decision of the Assistant Registrar on 3 June 2021 to withdraw Dr Onwude's licence and that decision was illegal and unlawful.

25. Dr Onwude then relied upon the 2012 Regulations to assert that because he was revalidated in 2020, under the 2012 Regulations, he need do nothing further for five years. Dr Onwude accepts that he did not engage in any revalidation process in 2021, asserting that it was unnecessary to do that, having provided 107 pages of documentation in support of his application for revalidation in 2020, which application was successful as he was revalidated.

26. The GMC asserts that Dr Onwude had the right to challenge the decision made on 3 June 2021 to withdraw his licence to practice by bringing an appeal to the Registration Appeals Panel within 28 days (see section 29F(1)(b) of the Medical Act 1983). Further, Dr Onwude had the right to apply for the licence to be restored in any event pursuant to Regulation 5 of the 2012 Regulations.

27. Further, the GMC submits that Dr Onwude continues to have a right under section 41A(10) of the Medical Act 1983 to ask the Administrative Court to review the decision of the IOT to impose an interim order of suspension upon him. Although Dr Onwude has not mentioned that section in his claim, the GMC does not object to this claim being considered as if it were a section 41A(10) claim.

28. In hearing such a claim, the Administrative Court has the same powers as the IOT. The relevant principles governing such a claim are set out by Arden LJ in *General Medical Council v Hiew* [2007] EWCA Civ 369:

"[28]..[T]he criteria must be the same as for the original interim order…, namely the protection of the public, the public interest or the practitioner's own interests. This means…that the court can take into account such matters as the gravity of the allegations, the nature of the evidence, the seriousness of the risk of harm to patients, the reasons why the case has not been concluded and the prejudice to the practitioner if an interim order is continued. The onus of satisfying the court that the criteria are met falls on the…applicant for the extension…the relevant standard is the civil standard, namely the balance of probabilities…

"[31] The statutory scheme thus makes it clear that it is not the function of the judge under section 41A(7) to make the findings of primary fact about the events that have led to the suspension or to consider the merits of the case for suspension. There is, moreover, no express threshold test to be satisfied before the court can exercise its power under section 41A(7), such as a condition that the court should be satisfied that there is evidence showing that there is a case to answer in respect of misconduct or any other matter. On the other hand, if the judge can clearly see that the case has little merit, he may take that factor into account in weighing his decision on the application. But this is to be done as part of the ordinary task of making a judicial decision, and a case where a statutory body makes an application on obviously wholly unsupportable grounds is likely to be rare.

"[32] The evidence on the application will include evidence as to the opinion of the GMC, and the IOP or Fitness to Practise Panel, as to the need for an interim order...

"[33] The court is not expressing any view on the merits of the case against the medical practitioner. In those circumstances, the function of the court is to ascertain whether the allegations made against the medical practitioner, rather than their truth or falsity, justify the prolongation of the suspension. In general, it need not look beyond the allegations. If the medical practitioner contends that the allegations are unfounded, the medical practitioner should challenge by judicial review the original order for suspension or the failure to review it and make some other decision in accordance with section 41A(2). On such an application, the decision of the IOP or Fitness to Practise Panel will then be examined on well-established judicial review grounds…"

29. Neither the IOT nor the court treating the claim as a section 41A(10) claim has or had any power to overrule or set aside the Assistant Registrar's decision to withdraw Dr Onwude's licence to practice. I accept the submission made by Mr Dunlop that it was not the function of the IOT nor this court to make any findings of fact in relation to the underlying allegations, still less to determine whether Dr Onwude had in fact revalidated as was required. The only function of the IOT was to assess risk, assuming

that the allegations were well-founded and to determine whether an interim order was necessary in accordance with the guidance given by the case of *Hiew*.

30. As to the law concerning the making of an extended CRO, CPR 3.11(2) provides that:

"(2) A practice direction may set out—

(a) the circumstances in which the court has the power to make a civil restraint order against a party to proceedings;

(b) the procedure where a party applies for a civil restraint order against another party; and

(c) the consequences of the court making a civil restraint order."

31. Practice Direction 3C provides as follows in relation to extended CROs:

"3.1
3CPD.3An extended civil restraint order may be made by—
(1)a judge of the Court of Appeal;
(2)a judge of the High Court; or
(3)a Designated Civil Judge or their appointed deputy in the County Court,
where a party has persistently issued claims or made applications which are totally without merit.
3.2
Unless the court otherwise orders, where the court makes an extended civil restraint order, the party against whom the order is made—
(1)will be restrained from issuing claims or making applications in—
(a)any court if the order has been made by a judge of the Court of Appeal;
(b)the High Court or the County Court if the order has been made by a judge of the High Court; or
(c)the County Court if the order has been made by a Designated Civil Judge or their appointed deputy,
concerning any matter involving or relating to or touching upon or leading to the proceedings in which the order is made without first obtaining the permission of a judge identified in the order;
(2)may apply for amendment or discharge of the order provided he has first obtained the permission of a judge identified in the order; and
(3)may apply for permission to appeal the order and if permission is granted, may appeal the order.
3.3
Where a party who is subject to an extended civil restraint order—
(1)issues a claim or makes an application in a court identified in the order concerning any matter involving or relating to or touching upon or leading to the proceedings in which the order is made without first obtaining the permission of a judge identified in the order, the claim or application will automatically be struck out or dismissed—
(a)without the judge having to make any further order; and
(b)without the need for the other party to respond to it;
(2)repeatedly makes applications for permission pursuant to that order which are totally without merit, the court may direct that if the party makes any further

application for permission which is totally without merit, the decision to dismiss the application will be final and there will be no right of appeal, unless the judge who refused permission grants permission to appeal.

3.4
A party who is subject to an extended civil restraint order may not make an application for permission under paragraphs 3.2(1) or 3.2(2) without first serving notice of the application on the other party in accordance with paragraph 3.5.

3.5
A notice under paragraph 3.4 must—
(1)set out the nature and grounds of the application; and
(2)provide the other party with at least 7 days within which to respond.

3.6
An application for permission under paragraphs 3.2(1) or 3.2(2)—
(1)must be made in writing;
(2)must include the other party's written response, if any, to the notice served under paragraph 3.4; and
(3)will be determined without a hearing.

3.7
An order under paragraph 3.3(2) may only be made by—
(1)a Court of Appeal judge;
(2)a High Court judge; or
(3)a Designated Civil Judge or their appointed deputy.

3.8
Where a party makes an application for permission under paragraphs 3.2(1) or 3.2(2) and permission is refused, any application for permission to appeal—
(1)must be made in writing; and
(2)will be determined without a hearing.

3.9
An extended civil restraint order—
(1)will be made for a specified period not exceeding 3 years;
(2)must identify the courts in which the party against whom the order is made is restrained from issuing claims or making applications; and
(3)must identify the judge or judges to whom an application for permission under paragraphs 3.2(1), 3.2(2) or 3.8 should be made.

3.10
The court may extend the duration of an extended civil restraint order, if it considers it appropriate to do so, but it must not be extended for a period greater than 3 years on any given occasion.

3.11
If they consider that it would be appropriate to make an extended civil restraint order—
(1)a Master or a District Judge in a district registry of the High Court must transfer the proceedings to a High Court judge; and
(2)a Circuit Judge or a District Judge in the County Court must transfer the proceedings to the Designated Civil Judge."

32. Proof of three unmeritorious claims applications is the bare minimum needed to constitute persistence (see *Re Ludlam (a Bankrupt)* [2009] EWHC 2067 (Ch)). Further, the court is entitled to take into account any previous claims or applications

which it concludes were totally without merit and is not limited to claims or applications which were so certified at the time (see *R (Kumar) v Secretary of State for Constitutional Affairs* [2007] 1 WLR 536, CA).

Dr Onwude's Claim

33. In his oral submissions, Dr Onwude suggested that his claim had now become significantly simpler because of the acceptance in the GMC's skeleton that it accepted that Dr Onwude had revalidated in 2020.

34. Dr Onwude accepted that he was not an exempted practitioner for the purpose of the 2012 Regulations. However, Dr Onwude had (incorrectly) understood that the position of the GMC was that he had never revalidated when in fact its position was always that Dr Onwude had not revalidated in 2021. I suspect the misunderstanding arose because as far as Dr Onwude was concerned, having revalidated in 2020 after he was invited to do so by the Registrar, he would retain a valid licence to practice for five years. That being Dr Onwude's position, the assertion by the GMC that he had not revalidated was assumed by Dr Onwude to mean that he had not revalidated in 2020 having submitted his documentation and assessment paperwork. He continued to submit that his interpretation of the 2012 Regulations was correct and he was not required to revalidate until 2025.

35. Dr Onwude challenges the extension of the interim suspension order made on 3 February 2023 in his claim against the IOT. Dr Onwude accepted that the hearing itself was fair but asserted there were failures in the processes and the decision was illegal because it was based on previous unlawfulness and illegality by the GMC.

36. The unlawfulness and illegality asserted by Dr Onwude was the initial decision of the Assistant Registrar (not the IOT) taken on 3 June 2021 to revoke Dr Onwude's license to practice. Dr Onwude asserted that he did not recognise the decision of the Assistant Registrar on 13 June 2021. Put simply, Dr Onwude's case is that, as the GMC accepts, Dr Onwude having revalidated in 2020, he would not thereafter be required to do anything to maintain his license to practice for five years.

37. Dr Onwude presented numerous documents in relation to the decision of Assistant Registrar of 3 June 2021 to withdraw his license to practice. However, it is not necessary to consider any of those in any detail for the purposes of this claim. If Dr Onwude disagreed with the decision made by the Assistant Registrar and insofar as this claim purports to be an application to challenge that decision, it is out of time, he has used the wrong procedure and brought the claim against the wrong defendant.

38. Dr Onwude had the right to challenge the decision to withdraw his licence to practice by bringing an appeal to the Registration Appeals Panel within 28 days (see section 29F(1)(b) of the Medical Act 1983). Further, Dr Onwude had the right to apply for the licence to be restored in any event pursuant to regulation 5 of the 2012 Regulations. Dr Onwude neither appealed in time nor applied for his registration to be restored. I accept the submission made by the GMC therefore that it is an abuse of process for Dr Onwude to bring a claim against the IOT when in reality he is challenging the original decision of the Assistant Registrar to withdraw Dr Onwude's license to practice.

39. The only matter which this court has power to consider on the claim brought by Dr Onwude is the validity of the decision of the IOT to extend the suspension of Dr Onwude's licence to practice.

40. I accept the submission made by the GMC that Dr Onwude's claim against the IOT is misconceived and totally without merit. I do not accept the assertion made by Dr Onwude that secondary legislation (in the form of the 2012 Regulations or otherwise) cannot be relied upon or enforced as a matter of law. The IOT was plainly entitled to rely upon the 2012 Regulations as those regulations were permitted to be made by virtue of powers conferred by various sections of the Medical Act 1983 as set out on the face of the 2012 Regulations and as validly approved by order of the Privy Council.

41. Dr Onwude made no substantive submissions attacking the reasoning or procedure of the IOT when making its decision to extend the suspension of his license to practice. In any event, considering the matter afresh and applying the principles governing consideration of the decision of the IOT, I am entirely satisfied that a further

suspension of the licence to practice of Dr Onwude was justified on the balance of probabilities. There were allegations made that Dr Onwude was practising without a licence, providing treatment to one patient in the kitchen of her home and then providing prescriptions for antiviral drugs for the patient's husband and daughter without any consultation, examination or assessment. In addition, there were concerns about whether Dr Onwude had breached patient confidentiality in text messages.

42. Like the IOT, I too conclude that these allegations are serious and there is evidence to show that there is a case to answer by Dr Onwude. The allegations made justify the extension of the suspension of Dr Onwude's licence to practice. The allegations are serious and, if proven, would in my judgment constitute a serious risk of harm to patients. There is a good reason why the case has not concluded. Dr Onwude is due to stand trial in the criminal courts in March 2024 in relation to the allegations.

43. I do not accept that there is in reality any prejudice to Dr Onwude if the interim order is continued. The interim order is based upon the decision of the Assistant Registrar to withdraw Dr Onwude's licence to practice and that decision has not been lawfully challenged. Dr Onwude should not, in those circumstances, be practising in any event.

44. For all of those reasons, Dr Onwude's claim is dismissed and declared as being totally without merit.

The GMC's claim to extend the interim suspension order

45. For the same reasons as are set out in respect of Dr Onwude's claim against the GMC, I accept and grant the GMC's application to extend the IOT's interim order for a further 12 months.

The GMC's application for an extended civil restraint order

46. The GMC relied upon the witness statement of Lewis John Stubbs dated 25 September 2023 in support of its application for an extended CRO. In that witness statement, Mr Stubbs set out the broad background to this matter. In addition, he set out the history of applications or claims which have been declared totally without merit.

47. Those claims included a claim in December 2016 for judicial review challenging the decision of the first MPT hearing to refuse an adjournment of the hearing to enable witnesses to be recalled.

48. Thereafter, in November 2017, Dr Onwude issued a claim in the employment tribunal against the CEO of the GMC and the GMC's investigation manager asserting race discrimination. The claim included allegations of dishonesty and misrepresentation of an expert report in the High Court to prolong an interim order of suspension. All the claims of race discrimination were struck out in May 2018 and two of the claims were found to be totally without merit.

49. In August 2018, a claim was issued for Judicial Review following the MPT's decision to proceed with allegations different to those remitted by Collins J. The claim was dismissed and declared to be totally without merit. In addition, in December 2018, a further claim for Judicial Review was issued in respect of the MPT's decision to issue a warning to Dr Onwude. Again, permission was refused and the application declared to be totally without merit.

50. Further examples were given of applications or claims between April 2016 and June 2023 which were either refused or dismissed but these were not declared as being totally without merit.

51. In addition to those applications actually made, Dr Onwude has threatened or indicated to the GMC that he intends to bring a large number of further legal actions. Completed but unsealed documentation in relation to those threatened claims have been sent to the GMC. The types of claims notified included Judicial Review, applications for private prosecutions of GMC staff, claims for damages for alleged torture and breach of Dr Onwude's human rights, applications for summonses or arrest warrants, the reporting of GMC staff to Action Fraud and a request made to the Crown Prosecution Service to bring prosecutions against various members of the GMC's staff.

52. Dr Onwude himself provided me with a large amount of documentation which included some of the emails which he had sent to various people concerning his dispute with the GMC. Some of the recent correspondence sent by Dr Onwude to the GMC included the following:

(1) "**MY APPLICATIONS [CRIM 7.2] FOR THE ARREST OF CHARLIE MASSEY AND DAVID ABADAKI FOR FRAUD IS BEING PURSUED THROUGH THE LORD CHIEF JUSTICE. TOO**." (Email dated 18 September 2023 at 16:17).

(2)"UNTIL THE COURT SAYS OTHERWISE, THE INTERIM ORDER IS **UNLAWFUL AND ILLEGAL** AND WILL NOT BE RESPECTED AS I TOLD CHARLIE MASSEY…

I ENCLOSE THE DRAFT OF THE LETTER TO THE **LORD CHIEF JUSTICE** FOR THE GMC TO BE DISMANTLED AS AN **UNLAWFUL AND ILLEGAL** ENTITY…

PLEASE REMIND MR YULE THAT HE HAS NOT YET RESPONDED TO MY REQUEST FOR IOT PANEL MEMBERS DETAILS FOR THE HEARING OF 21/7/2023. THEY WERE AWARE OF THE POTENTIAL OF THEIR INDIVIDUAL UNLAWFULNESS AND ILLEGALITY BEFORE THE HEARING. I CAN SEEK THEM OUT FOR THE DELEGATED NEGLIGENCE THEY SHOWED IN THE FRAUD TO KEEP MY LICENCE FROM ME." (email dated 18 September 2023 at 16:22).

(3) In a further amended version of the same email sent at 16:24 on 18 September 2023, which Dr Onwude stated "**THANKS FOR THE LEAFLETS ON EMOTIONAL SUPPORT. I REALLY DON'T NEED THEM WHEN I AM KICKING GMC ASS**!"

(4) In an email dated 7 June 2023 at 15:55, Dr Onwude sent an email to Mr Yule about the July 2023 IOT review. He stated "PLEASE DON'T BREAK THE LAW BECAUSE I LIKE YOU BUT I CAN SMELL BREAKS OF THE LAW AND RUTHLESS TO PURSUE IT. **DAWN CROOK IS IN LINE FOR CRIMINAL COURT FOR DISHONESTY [SECTION 6(1)(a) of the GMC (License to Practice & Revalidation) Regulations Order of Council 2012, AS THE gmc reason for withdrawing my licence.**

SO DON'T BOTHER CONTACTING ME AGAIN. I WILL NOT ATTEND SUCH ILLITERATE AND TOOTHLESS CHARADES AGAIN - I SHALL SEE YOUR TRIBUNAL MEMBERS IN COURT IN LEEDS."

53. Dr Onwude provided me with a letter dated 16 July 2023 which he wrote to the IOT review tribunal members. In that letter, he stated that the tribunal members would be "**INDIVIDUALLY CULPABLE** FOR THE DECISIONS YOU MAKE". He stated that if they made a decision relying on the 2012 Regulations "THEN YOUR DECISION/S WILL BE **UNLAWFUL AND ILLEGAL** AND ACTIONABLE, INDIVIDUALLY IN THE KING'S BENCH DIVISION FOR PERSONAL INJURY., WHERE THE GMT/MPTS MIGHT STILL DEFEND YOU INDIVIDUALLY IN COURT OR NOT BECAUSE YOU INDIVIDUALLY CHOOSE TO BREAK THE LAW". He went on to assert in the letter that "CRIMINAL INJURY AND REFERRAL TO THE CROWN COURT IS AVAILABLE IN STATUTE AND CAN FOLLOW UNLAWFUL AND ILLEGAL DECISIONS IF **YOU KNEW** THAT THE DECISIONS WERE BASED ON UNLAWFULNESS AND ILLEGALITY".

54. In addition, I was provided with correspondence which Dr Onwude has sent to the Lord Chief Justice on 16 September 2023 complaining about his treatment in the King's Bench Division, which complaint included allegations of "**wholesale incompetence**" about the court in Leeds and about the President of the King's Bench Division, Dame Victoria Sharp when dealing with correspondence and the various matters consistently raised about his dispute with the GMC.

55. The GMC submits that as Dr Onwude has persisted in issuing or threatening significant numbers of claims against the GMC or its staff, Dr Onwude is likely to continue to pursue claims and applications relating to the same subject matter which will be totally without merit. Of those claims issued, have been dismissed as being totally without merit and permission was refused in a further four cases.

56. As the GMC is a registered charity, the continued claims and applications made by Dr Onwude continue to have an impact on the resources of the GMC. Despite being requested on a number of occasions only to correspond with the GMC's legal team

when dealing with matters of litigation, Dr Onwude has persisted in corresponding directly with individual members of staff whom he threatens to involve in litigation.

57. Dr Onwude would not accept that he had made threats against either the GMC or individual members of staff. He maintained that the cases he brought and correspondence asserting that proceedings would be brought were justified in the circumstances. He asked me not to make an extended CRO.

58. Before the hearing began, as part of his skeleton argument, Dr Onwude set out various reasons why he would appeal my decision to the Court of Appeal if I did not accept his submissions. During the course of the hearing itself, Dr Onwude maintained that I had no option but to accept his submissions and that he would appeal my decision if I did not find in his favour. He could not accept that there was any sustainable argument at all being made in these proceedings by the GMC.

59. In respect of previous cases where a Judge had found against him, Dr Onwude asserted that those Judges were dishonest and, in effect, were colluding with the GMC by simply accepting the submissions made by the GMC. He told me that if I did not agree with him, my decision would be a nullity and he would appeal.

60. Given the history of this matter and the views expressed by Dr Onwude during the course of the hearing, I accept that Dr Onwude has persistently issued claims or made applications which are totally without merit. It is quite clear that Dr Onwude cannot accept the possibility that he may be wrong and that he will continue to make unmeritorious applications and claims unless he is prevented from doing so. I am entirely satisfied on the balance of probabilities that it is necessary, appropriate and proportionate to make an extended CRO in respect of Dr Onwude and his dealings with the GMC. I am also satisfied that it is necessary, appropriate and proportionate to make such an order for three years, given the unremitting and continued correspondence and claims brought by Dr Onwude since 2016.