

Serious concerns based on public confidence or professional standards

Reference: FTP-3c Last Updated: 27/02/2024

Sometimes we may need to take regulatory action against a nurse, midwife or nursing associate to promote and maintain professional standards and the public's trust and confidence in the professions we regulate.

We will do so when the concerns raise fundamental questions about the ability of the nurse, midwife or nursing associate to uphold the standards and values set out in the Code.

We're more likely to need to do this if clinical failings suggest an underlying issue with the nurse, midwife or nursing associate's attitude to people in their care, such as cruelty, neglect or failing to prioritise their safety.

However, such concerns can also arise in professional practice where there is no direct link to the care of patients or people who use services (for example, a professional has dishonestly claimed payment for hours they had not worked)¹, or even outside of professional practice. Concerns that someone has displayed discriminatory views and behaviours, engaged in sexual misconduct, behaved violently (including in a domestic setting), abused a child or vulnerable adult, or committed a serious crime, for example, could have a particularly negative impact on public confidence.

We are likely to take restrictive regulatory action against nurses, midwives or nursing associates whose conduct has had this kind of impact on the public's trust in their profession, particularly where they haven't made any attempt to reflect on it, show insight, and haven't taken any steps to put it right. This may even mean they can't stay on the register.

¹ Breaching standard 20.2, or a need to act with honesty and integrity at all times.