

**Nursing and Midwifery Council  
Fitness to Practise Committee**

**Substantive Order Review Hearing**

**14 April 2020**

Virtual meeting

**Name of registrant:** Miss Tina Titilayo Ajao

**NMC PIN:** 98H0590E

**Part(s) of the register:** Registered Nurse – Sub part 1  
August 2001  
Registered Midwife

**Area of registered address:** England

**Type of case:** Lack of competence

**Panel Members:** Paul Powici (Chair, lay member)  
Amy Noakes (Registrant member)  
Peter Wrench (Lay member)

**Legal Assessor:** Robert Frazer

**Panel Secretary:** Rob James

**Order being reviewed:** Suspension Order (4 months)

**Fitness to Practise:** impaired

**Outcome:** Striking off Order to come into effect at the end  
of 26 May 2020 in accordance with Article 30  
(1)

### **Decision on Service of Notice of Meeting:**

The panel considered whether notice of this meeting has been served in accordance with the rules. Rules 11A and 34 of the *Nursing and Midwifery Council (Fitness to Practise) Rules 2004, as amended* state:

*'11A.(1) Where a meeting is to be held in accordance with rule 10(3), the Conduct and Competence Committee or the Health Committee shall send notice of the meeting to the registrant no later than 28 days before the date the meeting is to be held.*

*34.(3) Any other notice or document to be served on a person under these Rules may be sent by—  
(a) ordinary post'*

The letter of notice of this substantive meeting was sent to Miss Ajao's address on the register on 28 February 2020. The panel is satisfied that the notice was sent more than 28 days in advance of this meeting. The panel therefore finds that notice has been served in accordance with the Rules.

The panel also noted that there has been no response from Miss Ajao in relation to the notice of this meeting.

### **Decision and reasons on review of the current order:**

The panel decided to make a striking off order. This order will come into effect at the end of 26 May 2020 in accordance with Article 30 (1) of the Nursing and Midwifery Order 2001 (as amended) (the Order).

This is the ninth review of a substantive order originally imposed by the Conduct and Competence Committee on 25 September 2013. The panel on that day imposed a suspension order for a period of 12 months. The suspension order was reviewed and extended on 17 October 2014, 16 December 2014, 24 September 2015 and 18 March 2016. On 13 May 2016 a reviewing panel decided to impose a conditions of practice

order for 18 months. The conditions of practice order was reviewed and extended by a panel on 14 December 2017 and 11 June 2019. The most recent review of the order took place on 23 December 2019 when the conditions of practice order was replaced with a suspension order for a period of four months. The current order is due to expire at the end of 26 May 2020.

The panel is reviewing the order pursuant to Article 30(1) of the Order.

On 25 September 2013 the charges found proved by the substantive panel which resulted in the imposition of the substantive order were as follows:

*‘That you, whilst employed as a midwife at The Whittington Hospital NHS Trust between April 2011 and July 2011, did not demonstrate the standard of knowledge, skills and abilities required to practise without supervision in that you:*

1. *On 20 April 2011 failed to document the maternal pulse on every cardiotocography ("CTG") reading paper*
2. *On 21 April 2011:*
  - a) *Were unable to offer definitions between accelerations and decelerations of the foetal heart rate*
  - b) *Failed to complete the necessary documentation without prompting*
3. *On 25 April 2011:*
  - a) *Were unable to complete contemporaneous documentation*
  - b) *Were unable to recognise types of deceleration of the foetal heart rate and their significance*

4. *On 5 May 2011 failed to document a plan of care*
  
5. *On 9 May 2011 in respect of a patient in the care of you and Ms 1 (supervising midwife):*
  - a) *Failed to provide accurate documentation and include all relevant information in your notes*
  
  - b) *Failed to put adequate plans in place once an abnormal CTG was noted*
  
6. *On 12 May 2011:*
  - a) *Failed to provide an appropriate level of detail in your documentation including:*
    - i. *why a patient was not examined two hours after artificial rupture of membranes*
  
    - ii. *why the foetal heart beat was only monitored intermittently*
  
7. *On 14 May 2011:*
  - a) *Failed to accurately interpret a CTG*
  
  - b) *Failed to provide precise and contemporaneous documentation*
  
  - c) *Failed to administer Intravenous medication correctly*
  
8. *On 21 May 2011:*

- a) *Failed to provide accurate documentation*
  - b) *Failed to describe the significance of Foetal Blood Sampling ("FBS") results*
  - c) *Failed to accurately interpret a CTG*
  - d) *Failed to refer a suspicious CTG to obstetrician without prompting*
  - e) *Failed to prepare the room for delivery without prompting*
9. *On 30 May 2011 failed to document the findings from the CTG methodology: "DR C BRAVADO" in an appropriate time frame*
10. *On 13 June 2011 failed to complete the requisite paperwork post delivery in the appropriate time*
11. *On 18 June 2011:*
- a) *Failed to recognise a deceleration of the foetal heart rate whilst completing documentation*
  - b) *Failed to use correct terminology during CTG interpretation*
  - c) *Failed to provide an accurate handover to the obstetrician team in that you:*
    - i. *did not include all necessary information regarding the patient's current state*
    - ii. *reported the CTG inaccurately*

- d) *Failed to support an anxious client to make informed decisions in labour*

12. *On 20 June 2011:*

- a) *Failed to make an abnormal CTG referral to the correct practitioner*
- b) *Failed to complete the requisite paperwork post delivery in the appropriate time*

13. *On 21 June 2011:*

- a) *Failed to react to the patient having an ante-partum haemorrhage ("APH") combined with a prolonged deceleration of the foetal heart beat*
- b) *Failed to correctly interpret a vaginal examination*
- c) *Failed to concentrate sufficiently on clinical situation whilst completing documentation.*

14. *On 27 June 2011:*

- a) *Failed to complete documentation in appropriate time*
- b) *Failed to cope with multiple factors occurring simultaneously*

15. *On 30 June 2011:*

- a) *Failed to include all relevant details (date, name and hospital) on each page of documentation;*

- b) *Failed to include specific detail in the documentation, namely:*
  - i. *who cut the cord,*
  - ii. *the presence of a skin tag on the baby,*
  - iii. *palpation of uterus following delivery of placenta and membrane*
- c) *Failed to keep up to date with documentation*
- d) *Failed to use correct language when describing a CTG*
- e) *Failed to notice the lack of accelerations of the foetal heartbeat*

16. *On 7 July 2011:*

- a) *Showed limited knowledge of foetal positions in labour which led to an inappropriate referral of a patient*
- b) *Caused unnecessary anxiety to the patient by pulling the call bell for assistance*

17. *On 9 July 2011:*

- a) *Failed to write notes contemporaneously*
- b) *Failed to document relevant information, namely:*
  - i. *patient was in lithotomy*
  - ii. *umbilical cord was clamped and cut*

- c) *Failed to clear away the placenta from the top of the bin in the sluice room causing a health and safety hazard*
- d) *Did not know what a pudendal needle was*

18. On 11 July 2011:

- a) *Failed to keep the patient up to date with plan of care*
- b) *Failed to call the doctors to review foetal heart rate trace without being prompted*
- c) *Failed to provide a history to the doctors prior to the foetal heart rate trace being reviewed without being prompted*

19. On 14 July 2011:

- a) *Failed to accurately interpret vaginal examination*
- b) *Failed to verbalise concerns about foetal heart rate and the CTG to the doctor*

20. On 27 July 2011:

- a) *Failed to reassure the patient that the anaesthetist was on their way*
- b) *Failed to mention to the anaesthetist that the patient had an underlying unknown cardiac problem*
- c) *Failed to obtain the blood test results*

- d) *Failed to realise that the client was fully dilated*
- e) *Failed to understand the significance of a heavily blood stained sanitary pad*
- f) *Incorrectly interpreted the vaginal examination*
- g) *Incorrectly advised the consultant that the blood pressure was fine despite not knowing the patient's blood pressure*
- h) *Did not ensure the resuscitaire was working*
- i) *Failed to take the CTG*
- j) *Failed to document until the patient had delivered the baby*
- k) *Mistook a deceleration of foetal heart rate for a bradycardia*

21. *Between 18 April 2011 and 30 January 2012 failed to successfully complete a programme of supervised practice*

*AND as a result of the facts set out above, your fitness to practise is impaired by reason of your lack of competence.*

The previous reviewing panel determined the following with regard to impairment:

*“Regarding Miss Ajao’s insight, the panel noted that the last panel found that she had some insight into her clinical failings. At this hearing the panel decided that Miss Ajao’s insight remains limited and had no evidence before it to suggest otherwise.*

*In its consideration of whether Miss Ajao had remedied her practice the panel took into account her correspondence. Miss Ajao has informed the NMC that she*

*would like to apply for voluntary removal. The panel considered the lengthy period over which Miss Ajao has not practised as a nurse or midwife and the complete absence of any recent evidence of remediation or training and concluded that in these circumstances that a finding of continued impairment is necessary on the grounds of public protection.*

*The panel had borne in mind that its primary function was to protect patients and the wider public interest which includes maintaining confidence in the nursing profession and upholding proper standards of conduct and performance. The panel determined that, in this case, a finding of continuing impairment on public interest grounds is also required.*

*For these reasons, the panel finds that Miss Ajao's fitness to practise remains impaired."*

The previous reviewing panel determined the following with regard to sanction:

*"The panel considered continuing the current conditions of practice order. The panel noted that Miss Ajao has now been subject to substantive orders for a period of six years.*

*The panel noted the outcome letter sent to Miss Ajao from the last review hearing stated*

*'A panel will review the order before it expires. You will need to give the panel whatever evidence it specified in the conditions of the order. It is up to you to obtain that evidence in time for the review.'*

*The letter goes on to detail the sanctions available to the reviewing panel including a striking-off order.*

*The panel noted that Miss Ajao has not demonstrated any compliance with the current conditions of practice order. The panel was of the view that there were*

*conditions which Miss Ajao could have complied with such as the provision of a reflective statement. However, there is no evidence before the panel from Miss Ajao.*

*Whilst the panel was of the view that Miss Ajao's failings were, in theory, remediable this would require compliance from Miss Ajao. The panel concluded that there were now workable, practicable or realistic conditions which could be formulated which would address the public protection and public interest identified in this case in light of Miss Ajao's express desire to leave the register.*

*The panel considered the imposition of a suspension order. It concluded that a 4 month suspension on Miss Ajao's practice would allow the NMC the opportunity to explore other possible options with Miss Ajao directly, noting her clearly stated intention not to return to practice and that she would like voluntary removal from the NMC register. The panel was of the view that a short period of suspension would be the appropriate and proportionate response to enable this option to be explored.*

*The panel therefore concluded that a four month suspension order would be the appropriate and proportionate response and would afford Miss Ajao adequate time to re-engage with these NMC proceedings and provide an update on her current circumstances. The panel had also taken into account Miss Ajao's plan to travel abroad and look after her father.*

*This panel would remind Miss Ajao of the content of the email sent to her from the NMC dated 20 December 2019 at 13:52 within which her intention was drawn to the steps she would need to take to apply for voluntary removal*

*"I am afraid that Voluntary Removal isn't open to you as you have a substantive order on your registration.*

*However, it is possible for a panel to allow your order to lapse while your Fitness to Practise is still found*

*impaired. As your registration fee expired in 014, this would have the effect of lapsing your registration, and we would not conduct any more reviews of your order.*

*A panel is more likely to allow this to happen if you can provide documentary evidence of your intention not to return to nursing. This can include, but is not limited to:*

- Letters from medical professionals evidencing a long term health condition that would prevent you from returning to work*
- Documents to show you have retired (such as pension payslips)*
- A signed declaration stating that you will not apply for readmission to the register for at least 5 years*
- A detailed statement clearly setting out your current situation and your future intentions focusing specifically on work as a registered nurse or work in any other area which does not require registration with the NMC.”*

*The panel seriously considered a striking-off order. However, in the interests of fairness to Miss Ajao, it concluded that a striking-off order at this stage would be disproportionate because the NMC had engaged with Miss Ajao in discussion about allowing your registration to lapse and those discussions have not yet reached a conclusion. **It was mindful that any future reviewing panel would still have the option of a strike off order available to it.”***

### **Decision on current fitness to practise**

The panel has considered carefully whether Miss Ajao's fitness to practise remains impaired. Whilst there is no statutory definition of fitness to practise, the NMC has defined fitness to practise as a registrant's suitability to remain on the register without restriction. In considering this case, the panel has carried out a comprehensive review of the order in light of the current circumstances. It has noted the decision of the last panel. However, it has exercised its own judgment as to current impairment.

The panel has had regard to all of the documentation before it. It also heard and accepted the advice of the legal assessor.

In reaching its decision, the panel was mindful of the need to protect the public, maintain public confidence in the profession and to declare and uphold proper standards of conduct and performance.

The panel considered whether Miss Ajao's fitness to practise remains impaired. The panel had regard to the previous review panel's findings and took account of the fact that Miss Ajao had not attended the two previous NMC review hearings having engaged in the process before then. It had regard to the fact that Miss Ajao had shown a previous interest in voluntary removal from the NMC register and had received advice in relation to what she would need to provide to allow the order to lapse. However, Miss Ajao had not provided any information as to her current whereabouts, any kind of developed insight or any attempt to remediate her failings.

The last panel determined that Miss Ajao remained liable to repeat matters of the kind found proved. This panel has received no information that would allow it to make a finding any different to that. In light of this the panel determined that a finding of continuing impairment is necessary on the grounds of public protection.

The panel had borne in mind that its primary function was to protect patients and the wider public interest which includes maintaining confidence in the nursing profession and upholding proper standards of conduct and performance. The panel determined that, in this case, a finding of continuing impairment on public interest grounds is required. The panel was of the view that a member of the public would be concerned if an NMC panel were to find Miss Ajao's fitness to practise to no longer be impaired following her disengagement from the process.

For these reasons, the panel finds that Miss Ajao's fitness to practise remains impaired.

### **Determination on sanction**

Having found Miss Ajao's fitness to practise currently impaired, the panel then considered what, if any, sanction it should impose in this case. The panel noted that its powers are set out in Article 29 of the Order. The panel has also taken into account the NMC's Sanctions Guidance (SG) and has borne in mind that the purpose of a sanction is not to be punitive, though any sanction imposed may have a punitive effect.

The panel first considered whether to take no action but concluded that this would be inappropriate in view of the risk of repetition identified and seriousness of the case. The panel decided that it would be neither proportionate nor in the public interest to take no further action.

The panel then considered whether to impose a caution but concluded that this would be inappropriate in view of the risk of repetition identified and seriousness of the case. The panel decided that it would be neither proportionate nor in the public interest to impose a caution order.

The panel next went on to consider replacing the suspension order with a conditions of practice order. The panel was of the view that no progress or effort is being made by Miss Ajao with regard to re-engaging with the NMC and therefore demonstrating a potential willingness to comply with conditions. It determined that in the light of this, conditions of practice remain unworkable.

The panel went on to consider whether to extend the period of the suspension order. The panel noted that Miss Ajao was given a clear indication by the previous panel as to the information she could provide to assist this panel and that it was made apparent that she may not be given many more chances to do so. However, she had also failed to follow any of the previous panel's recommendations. She has failed to demonstrate that she has gained any further insight into the seriousness of her actions and their potential consequences and to demonstrate a willingness to remediate. In all the circumstances, the panel concluded that a further period of suspension would serve no useful purpose.

The panel wishes to stress that it is incumbent upon a registrant whose fitness to practise has been found to be impaired to engage appropriately with their regulator to remediate their failings, including a lack of competence. The panel has borne in mind

the serious nature of Miss Ajao's failings which were wide ranging and related to basic nursing and midwifery practice.

In all the circumstances, the panel has therefore determined that the only appropriate and proportionate sanction in this case is to replace the current suspension order with a striking-off order. The panel was satisfied that, in the absence of up to date information and a willingness to engage and remediate, a striking-off order is the only order that adequately addresses issues of public protection and the wider public interest in maintaining public confidence in the profession and the regulatory process.

The striking-off order will take effect from the expiry of the current suspension order at the end of 26 May 2020 in accordance with Article 30(1) of the Order. The panel therefore directs the Registrar to strike Miss Ajao's name from the NMC register. She may not apply for restoration until a period of five years after the date the striking-off order takes effect.

This decision will be confirmed to Miss Ajao in writing.

That concludes this determination.