

**Nursing and Midwifery Council**  
**Fitness to Practise Committee**  
**Substantive Order Review Hearing**  
**27 April 2020**  
**Virtual Hearing**

<b>Name of registrant:</b>	Christina Diana Salmon
<b>NMC PIN:</b>	96I3326E
<b>Part(s) of the register:</b>	Sub Part 1 RNA: Adult nurse (26 September 1999)
<b>Area of Registered Address:</b>	England
<b>Type of Case:</b>	Misconduct
<b>Panel Members:</b>	Wendy Yeadon (Chair, Lay member) Sandra Lamb (Registrant member) Bill Matthews (Lay member)
<b>Legal Assessor:</b>	Gelaga King
<b>Panel Secretary:</b>	Roshani Wanigasinghe
<b>Christina Diana Salmon:</b>	Present and not represented
<b>Nursing and Midwifery Council:</b>	Represented by Zainab Mohamed, NMC Case Presenter
<b>Order being reviewed:</b>	Conditions of Practice Order (12 months)
<b>Fitness to Practise:</b>	Impaired
<b>Outcome:</b>	Striking-off order to come into effect at the end of 4 June 2020, in accordance with Article 30 (1)

### **Decision and reasons on application for hearing to be held in private**

At the outset of the hearing, Ms Mohamed, made a request that parts of the case be held in private on the basis that proper exploration of your case involves matters related to your health. The application was not made pursuant to Rule 19 of the Nursing and Midwifery Council (Fitness to Practise) Rules 2004, as amended, as Rule 19 (5) states that Rule 19 does not apply to virtual hearings. However, the panel's attention was drawn to Rule 19 as a starting point and then to the NMC guidance during the Covid-19 emergency period and specifically to paragraphs 27-33 dealing with the ability to have transcripts marked wholly or in part as confidential and reasons to be marked wholly or in part as private.

Having heard that there will be reference to your health, the panel determined that the whole of the transcript will be marked confidential.

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

The panel decided to impose a striking-off order. This order will come into effect at the end of 4 June 2020 in accordance with Article 30 (1) of the Nursing and Midwifery Order 2001 (as amended) (the Order).

This is the fifth review of an order, originally imposed on 29 January 2015 by a panel of the Conduct and Competence Committee, which made Mrs Salmon the subject of a conditions of practice order for 18 months. On 11 August 2016 a panel of the Conduct and Competence Committee reviewed the order and imposed a suspension order for a period of 12 months upon the expiry of the previous order. This order was reviewed on 25 August 2017 and was replaced with a conditions of practice order for a period of 12 months. On 27 July 2018, a reviewing panel varied and extended that conditions of practice order for a period of 9 months. On 10 May 2019, the last reviewing panel decided to impose a further conditions of practice order. The current order is due to expire at the end of 4 June 2020.

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

The charges found proved which resulted in the imposition of the substantive order were as follows:

*That you, whilst employed as an Agency Nurse by A24 Group between January and July 2012:*

1. *During the night shift of 12-13 January 2012 at the Queen Alexandra Hospital:*
  - a. *Moved Patient A from her bed to a commode when she was immobile.*
  - b. *Failed to document in Patient A's notes details of a vaso vagal episode.*
  - c. ...
  
2. *During the night shift of 5-6 May 2012 at Highfield Nursing Home:*
  - a. *Failed to administer controlled drugs (Ketamine and Morphine) to Patient C as prescribed.*
  - b. *Failed to ensure Patient C's blood glucose reading was taken at bedtime and/or ensure his blood glucose reading was legibly recorded on the blood glucose chart.*
  - c. *Failed to administer 20mg Omeprazole and 5mg Ramipril to Patient D at 7:00 on 6 May 2012 as prescribed.*
  - d. *Failed to administer 15mg Lansopazole to Patient E at 7:00 on 6 May 2012 as prescribed.*
  - e. *Failed to administer and/or record the administration of 20mg Enalapril to Patient F at 21:00 on 5 May 2012 as prescribed.*
  
3. ...
  
4. *During the nightshift of 19-20 July 2012 at the Queen Alexandra Hospital failed to administer and/or document the administration of insulin to Patient H in spite of taking blood glucose readings between 14.1 – 22.0 at:*
  - a. *05:00*
  - b. *06:00.*

*And in light of the above, your fitness to practise is impaired by reason of your misconduct.*

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

*“The panel was of the view that Mrs Salmon would benefit from further engagement with the NMC. It considered all of the correspondence received from Mrs Salmon. The panel noted that the email dated 10 May 2019 was sent at 00:48 in the morning in response to an email from the NMC Case Officer, sent the day before this hearing requesting the written reflective piece recommended by the previous panel. [PRIVATE] The panel considered that the email dated 10 May 2019 might have been sent in haste as a “knee jerk” reaction, and may therefore not be definitive of Mrs Salmon’s mindset. It considered that Mrs Salmon’s email dated 6 May 2019 amounted to a form of reflection, albeit one which did not focus on Mrs Salmon’s clinical failings but on her developing awareness of the need to be empathetic when working with vulnerable groups, and an update on her current circumstances. The panel noted that it may have been disappointing or demoralising for Mrs Salmon to receive another email on 9 May from the NMC Case Officer asking for further written documentation.*

*The panel reminded itself of all of the correspondence available to it today, and considered that Mrs Salmon has demonstrated a level of developing insight; she has not yet fully remediated her practice, but is progressing positively along that route.*

*Taking all of the above into account, the panel finds that Mrs Salmon’s fitness to practise remains impaired, on grounds of both public protection and public interest.”*

The fourth panel determined the following with regard to sanction:

*“The panel first considered whether to take no action or impose a caution order 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 or impose a caution order. Such sanctions would not appropriately protect the public.*

*The panel next considered the imposition of a conditions of practice order. The panel was of the view that a conditions of practice order is sufficient to protect patients and the wider public interest, and that conditions could be formulated which would protect patients during the period they are in force. It considered that the current conditions of practice, albeit with minor amendments to Condition 3 and Condition 4, are measurable, workable, and proportionate; they appropriately protect the public and address the wider public interest in this case. The panel considered that a period of 12 months would provide Mrs Salmon with the opportunity to obtain a place on, and complete, a Return to Practice Course, obtain a nursing role, and take steps to remediate her practice and develop further insight.*

*The panel considered whether to impose a suspension order, but determined that such a sanction would be disproportionate in the circumstances of the case.*

*Accordingly, the panel determined, pursuant to Article 30(1) (c) of the Nursing and Midwifery Order 2001, to vary and extend the current conditions of practice order for a period of 12 months; this will come into effect on the expiry of the current order. It decided to impose the following conditions which it considered are appropriate and proportionate in this case:*

- 1. At any time that you are employed or otherwise providing nursing services, you must place yourself and remain under the supervision of a workplace line manager, mentor or supervisor nominated by your employer, such supervision to consist of working at all times on the same shift as, but not necessarily under the direct observation of, a registered nurse, who is physically present in or on the same ward, unit, floor or home that you are working in or on.*
- 2. You must not carry out the administration of medication or the management of diabetic care unless supervised by a registered nurse: such supervision to*

*consist of direct observations and to continue until assessed as competent in both areas.*

3. *If working in a nursing or placement role, you must work with either your line manager, mentor or supervisor (or their nominated deputy) to formulate a Personal Development Plan specifically designed to address the deficiencies in the following areas of your practice:*
  - *Knowledge and management of diabetic care;*
  - *Clinical judgment;*
  - *Workload management;*
  - *Drug administration;*
  - *Documentation.*
4. *If working in a nursing or placement role, you must meet with either your line manager, mentor or supervisor at least every two weeks to discuss the standard of your performance and your progress towards achieving the aims set out in your Personal Development Plan.*
5. *You must forward to the NMC a copy of your Personal Development Plan within 28 days of the date on which you take up an appointment.*
6. *You must send a report from your line manager, mentor or supervisor (or their nominated deputy) setting out the standard of your performance and your progress towards achieving the aims set out in your Personal Development Plan to the NMC at least 14 days before any NMC review hearing or meeting.*
7. *You must allow the NMC to exchange, as necessary, information about the standard of your performance and your progress towards achieving the aims set out in your Personal Development Plan with your line manager, mentor or supervisor (or their nominated deputy) and any other person who is or will be involved in your retraining and supervision with any employer, prospective employer, and at any educational establishment.*

8. *You must notify the NMC within 14 days of any nursing appointment (whether paid or unpaid) you accept within the UK or elsewhere, and provide the NMC with contact details of your employer.*
9. *You must inform the NMC of any professional investigation started against you and/or any professional disciplinary proceedings taken against you within 14 days of you receiving notice of them.*
10. *You must within 14 days of accepting any post or employment requiring registration with the NMC, or any course of study connected with nursing, provide the NMC with the name/contact details of the individual or organisation offering the post, employment or course of study.*
11. *You must immediately inform the following parties that that you are subject to a conditions of practice order under the NMC's fitness to practise procedures, and disclose the conditions listed at (1) to (10) above, to them:*
  1. *Any organisation or person employing, contracting with, or using you to undertake nursing work;*
  2. *Any agency you are registered with or apply to be registered with (at the time of application);*
  3. *Any prospective employer (at the time of application);*
  4. *Any educational establishment at which you are undertaking a course of study connected with nursing or midwifery, or any such establishment to which you apply to take such a course (at the time of application).*

*In accordance with Article 30 (1) of the Nursing and Midwifery Order 2001 this conditions of practice will come into effect upon the expiry of the existing order, namely at the end of 4 June 2019. Before the expiry of this order, another panel will review this order at a hearing, to which Mrs Salmon will be invited to attend. At this hearing, the panel can revoke the order, continue the order, vary any*

*condition, or replace the order with a different order. At that review hearing, the panel would be greatly assisted by:*

- *Mrs Salmon's attendance.*
- *A reflective piece (either written or oral), specifically addressing impact of Mrs Salmon's misconduct on patients and the public confidence in the nursing profession, and what she would do differently in the future.*
- *Evidence of how Mrs Salmon has complied with the conditions of practice order.*
- *[PRIVATE]."*

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

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

The panel had regard to all of the documentation before it, which included the decision of the substantive panel and the last reviewing panel. It took account of the submissions made by Ms Mohamed on behalf of the NMC and those made by you.

Ms Mohamed took the panel through the background to the case and invited the panel to find that your fitness to practise as a registered nurse remains impaired on the grounds of public protection and public interest.

Ms Mohamed submitted that the allegations relate back to 2012, and you have not yet remediated the concerns identified in your nursing practice. Therefore, Ms Mohamed submitted that a real risk of repetition remains in this case, and there continues to be a risk of harm to patients in your care should you be permitted to return to nursing practice without some form of restriction.

Ms Mohamed submitted that it is a matter for the panel as to what sanction to impose. She submitted that the NMC is not making any positive submissions on the type of sanction and remains neutral. However, she submitted that in light of the evidence heard by the panel at this hearing, it may be appropriate to impose a further conditions of practice order to allow you to return to nursing practice, providing you have shown sufficient insight and a willingness to retrain to address the outstanding concerns in relation to your nursing practice. However, she reminded the panel that all sanctions were available to it in reviewing the order today.

You listed a [PRIVATE] you have experienced since 2012. [PRIVATE]. You told the panel that you had an interview scheduled with Queen Alexandra Hospital, in respect of a possible Return to Practice course. You told the previous review panel that this interview was scheduled for October 2019 however, you told this panel that that interview did not materialise.

You invited the panel to take account of your current circumstances. You told the panel that you are currently working as a Support Worker at the Council. You said that you have been able to use your nursing background and knowledge within your current role.

You stated that you have maintained your professionalism as a nurse even whilst working as a Support Worker. You told the panel that you have partially completed an online course on Diabetes. You further stated that you had completed a course on Time Management and Advanced Life Care. You stated that you have been unable to do the relevant courses to address your failings, as you have not been in a nursing environment. You further told the panel that you are a positive person and that you wanted to return to your nursing practice and not retire at this stage.

The panel 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 your fitness to practise remains impaired.

The panel had regard to the evidence before it. It noted that you have only engaged with the NMC process in a limited manner, and have produced nothing by way of documentary evidence as to your training, reflection and [PRIVATE].

You said you did some online training but you have not completed any relevant training to address your failings, or periods of supervised practise and competency assessments. Further, the panel noted that you have been subjected to restrictions for a lengthy period of time. Apart from one year's suspension, you have been under a conditions of practice order for just over four years, and during that time have been either unable or unwilling to secure work to address the areas of concerns found proved. [PRIVATE]. Furthermore, the panel also bore in mind that you were unable to evidence remediation or sufficient insight.

The panel considered the areas of nursing set out within the original charges relate to basic and fundamental aspects of safe and effective nursing practice, and you have not addressed those concerns. In considering your oral submissions today, the panel noted that you have not taken sufficient proactive steps in attempting to remediate your nursing practice over a significant period of time. The panel considered you to have only limited insight into your misconduct. It did not consider you to have given any real thought to the impact your actions could have had on patients in your nursing care, or how your actions could have impacted upon the public's perception of a registered nurse.

The panel considered you to have had a significant period of time to reflect on your failings and to have remediated your misconduct, yet you have not done so to a sufficient extent. Despite doing some training relating to your work as a Support Worker, this has still not addressed your failings. You have also not provided any recent relevant training certificates or any references or testimonials from your work as a Support Worker with the Council.

In light of the above, the panel was of the view that there is still a real risk of repetition of similar events occurring at some point in the future. The panel therefore decided 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.

For these reasons, the panel finds that your fitness to practise remains impaired.

### **Determination on sanction**

Having found your 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 30 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 order but concluded that this would also be inappropriate in view of the risk of repetition identified and seriousness of the case. In addition, having found your fitness to practise impaired on public protection grounds a caution order would provide no restriction on your practice. The panel therefore determined that it would be neither proportionate nor in the public interest to impose a caution order.

The panel next considered imposing a further conditions of practice order. The panel

noted that there are clear identifiable areas of retraining relating to your clinical nursing practice, which had not been addressed. You had been subject to four conditions of practice orders. Initially imposed by the original panel in 2015 for 18 months and then subsequently by another three panels spanning over a further two and a half year period where you had the opportunity to address the concerns identified and you had failed to do so. The panel noted that you stated that you had been unable to find work, despite the fact that the conditions imposed were workable and were part of the usual bank of conditions imposed. As a result, you had not made any significant progress in attempting to remediate the concerns, despite reaffirming your willingness to retrain.

Whilst the panel considered these concerns to be capable of remediation in principal, the panel determined that it would not be possible to formulate any other workable conditions to allow you to return to nursing practice whilst still protecting the public. The panel had concerns regarding your lack of insight, remediation, and the length of time it has taken to reach this stage, with the first order being imposed on your registration some five years ago. The panel was of the view that whilst your failings may have been remediable at the time of the previous hearings, given your lack of recognition of the full extent of your failings, and the time that has now elapsed since you last practised, these are no longer remediable.

In light of the above, the panel was satisfied that a conditions of practice order would not adequately address the public protection concerns and the wider public interest elements of this case.

The panel noted that you have not remediated the concerns identified nor have you developed appropriate insight since the last review hearing. You have chosen not to follow the recommendations of the last review panel in terms of providing a reflective piece, medical evidence, or evidence of how you have attempted to comply with the conditions of practice orders. The panel did not consider your oral submissions today to be sufficiently reflective in terms of the impact of your misconduct on others.

You have already been subject of a 12 month suspension order and this did not achieve anything in respect of regulatory concerns.

Whilst a further suspension order would satisfy the public protection concerns, the panel was not satisfied that it would be in the public interest, nor in your own interest, to continue these matters indefinitely and that this should be brought to a conclusion.

In the circumstances, the panel determined that a further period of suspension would not serve any useful purpose. You have been afforded many opportunities by previous panels to develop full insight into your clinical failings and you have failed to do so. This inability to recognise your failings and self-direct your own learning to address them demonstrates a lack of understanding and appreciation of the need for reflective practice that is key to safe, professional nursing. This is not compatible with the behaviours expected of a registered nurse. The panel determined that it was necessary to take action to prevent you from practising as a registered nurse in the future and concluded that the only sanction that would adequately protect the public and serve the wider public interest was a striking-off order. The panel therefore directs the registrar to strike your name off the register.

In accordance with Article 30 (1) of the Nursing and Midwifery Order 2001 this striking-off order will come into effect upon the expiry of the existing conditions or practice order, namely at the end of 4 June 2020.

This decision will be confirmed to you in writing.

That concludes this determination.