

Nursing and Midwifery Council

Voluntary Removal Decision

Registrar – 12 October 2020

Registrant: Susan Heather Deakin

PIN: 76A1008E

Part(s) of the register: Registered Nurse – Adult Nursing

Area of Registered Address: England

Type of case: Misconduct

REGISTRAR'S DECISION

A decision has been made by the Registrar to approve the application for voluntary removal based on the assessment of the relevant criteria. The reasons for the decision to grant voluntary removal from the Register are below.

Details of charge

That you, a registered nurse:

1. On or around 14 August 2018

1.1 Left the medications trolley unattended in Patient A's room.

1.2 Did not report that a quantity of Patient A's medication had gone missing.

1.3 Did not report that Patient A may have had unauthorised access to medication.

1.4 Did not give Patient A his prescribed dose of Tizanidine Hydrochloride.

2. On 19 August 2018 took tablets from a blister pack which were due to be given to Patient A on the 14 August 2018 and discarded them.

3. Your actions at charge 2 were dishonest in that you sought to create the impression that the medication due on the 14 August 2018 had been given to Patient A when you knew that it had not.

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

REGISTRAR'S REASONS

The following documents were considered when assessing this voluntary removal application:

- 1 Voluntary removal application form, dated 14 August 2020
- 2 Royal College of Nursing (RCN) letter accompanying voluntary removal application form, dated 10 August 2020
- 3 Draft charge
- 4 Case management form
- 5 Response from Helen Eaves, the maker of the allegation, dated 24 August 2020
- 6 NOR2 form
- 7 First reflection from Ms Deakin, undated
- 8 Ms Deakin's May 2019 reflection
- 9 Churchfield Care Home employment reference, undated
- 10 Investigating Committee interim order private reasons, dated 27 November 2018

Background

On 14 August 2018 Susan Deakin entered Resident A's room to administer medication. Ms Deakin left the room to get a glass of water and left the medication trolley unattended. When she returned a large quantity of Tizanidine medication (108 tablets) was missing which Ms Deakin failed to report. Ms Deakin also signed the Medication Administration Record (MAR) to indicate that she had administered the prescribed dose of Tizanidine to Resident A when she had not.

On 15 August 2018 staff reported the Tizanidine medication missing at the next medication round.

On 19 August 2018 Ms Deakin entered Resident A's room at 07.22 and took four tablets from a blister pack which were due to be given to Resident A on the 14 August 2018 and discarded them.

Public interest considerations

RN Deakin accepts the facts of the allegation and that her fitness to practise is impaired with reference to those facts.

This is a serious allegation in a number of respects. It involves dishonesty – at the time of the incident, and afterwards, when RN Deakin took steps to cover up what had happened.

The incident could have caused harm to Resident A, who was a vulnerable person with impaired cognition.

However, it would appear to be an isolated incident after a long career (41 years) in nursing. In addition, RN Deakin has shown insight and remorse, and she has not practised as a nurse since 2018, even though she could have done so, under interim conditions of practice.

Instead, she has been working as a healthcare assistant. RN Deakin has signed to confirm that she has no intention of seeking to return to nursing, and if she did so, all of

the particulars of this allegation would be available to those considering whether to readmit her. She would in effect need to demonstrate that she was capable of safe and effective practice.

The maker of the allegation has confirmed that they do not object to the use of voluntary removal in this case.

Dishonesty is harder to remediate than other shortcomings and would in many cases suggest the public interest is engaged and therefore a hearing may be required. However this is an isolated incidence, facts and impairment are undisputed and RN Deakin shows full insight in to her shortcomings. This being the case, the public interest in a hearing does not outweigh the immediate public protection afforded by the use of voluntary removal.

Registrar's decision

Taking all of the circumstances into account, I grant this application for voluntary removal from the NMC register.