

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

**Substantive Meeting  
Friday 17 September 2021**

Virtual Meeting

<b>Name of registrant:</b>	<b>Robin Christy</b>
<b>NMC PIN:</b>	14E0722E
<b>Part(s) of the register:</b>	Registered Nurse – Adult (RNA) Specialist Practitioner – District Nursing (SPDN) Community Practitioner Nurse Prescriber (V100) Nurse Independent / Supplementary Prescriber (V300)
<b>Area of registered address:</b>	Hertfordshire
<b>Type of case:</b>	Conviction
<b>Panel members:</b>	Florence Mitchell (Chair, Registrant member) Emily Davies (Registrant member) Nicola Dale (Lay member)
<b>Legal Assessor:</b>	Lachlan Wilson
<b>Panel Secretary:</b>	Megan Winter
<b>Facts proved:</b>	Charges 1
<b>Facts not proved:</b>	None
<b>Fitness to practise:</b>	Currently Impaired
<b>Sanction:</b>	<b>Striking-off order</b>
<b>Interim order:</b>	<b>Interim suspension order (18 months)</b>

## **Decision and reasons on service of Notice of Meeting**

The panel received information, and advice from the legal assessor, concerning service of the notice of meeting.

The notice of meeting was sent to Mr Christy's email address notified to, and held by, the Nursing and Midwifery Council (NMC) on 10 August 2021, stating that a meeting would be held on or after 17 September 2021.

The panel noted that the notice of meeting had been sent on 10 August 2021, as is treated under the Rules as served the following day, which was more than 28 days before this meeting. The panel was satisfied that there was good service of the notice of meeting in accordance with Rules 11A and 34 of the Fitness to Practise Rules 2004 (as amended) ("the Rules").

Further, the panel noted that the notice of meeting was also sent to Mr Christy's representative at the Royal College of Nursing (RCN) on 10 August 2021, and was also sent to an email address that the RCN had notified the NMC was used by them for corresponding with Mr Christy. In the same correspondence the RCN indicated that if Mr Christy failed to make contact with them, then they would withdraw representation.

The panel noted that Mr Christy had been sent all of the evidence relating to this matter, and was asked to provide comment no later than 15 September 2021 by using the Case Management Form ("CMF") attached to the notice of meeting, if he had anything additional that he wanted the panel to take into account in considering this matter. This CMF was not returned by Mr Christy, nor had Mr Christy responded to the Notice of Referral.

The NMC have exhausted steps to contact Mr Christy and have received no response. Therefore, the panel was of the view that referring this matter to a substantive hearing would not serve any useful purpose. It determined that it had all the information necessary before it to reach a decision on this matter in a meeting, having regard to the documentary evidence received, and noting that Mr Christy has been given a number of opportunities to engage but has failed to do so.

## **Details of charge**

That you, a Registered Nurse:

1. On 25<sup>th</sup> November 2019 at St Albans Crown Court were convicted of an offence of conspire to commit an either way offence outside England and Wales in relation to offences against the person.

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

## **Background**

On 27 June 2018, the NMC received a referral from Bedfordshire Police in relation to Mr Christy who was arrested on 26 June 2018 for assisting the procuring of an illegal abortion.

On 24 April 2018, an adult female was force fed a consignment of prescription medication by her partner (Suspect 1) with the intention of terminating her pregnancy against her will. The child was born at 26 weeks gestation on 25 April 2018 and was, at that stage, reported as being critically ill. Mr Christy was linked via telephone communication and was suspected of supplying the medication.

Mr Christy was an independent nurse prescriber working as a Band 7 District Nurse Team Lead at Central London Community Healthcare NHS Trust ("the Trust"). The Trust confirmed to the NMC at Screening stage that it had no concerns about Mr Christy.

On September 2018, Mr Christy was charged with conspiring to administer poison to the adult female between 20 March 2018 and 20 April 2018 with intent to procure her miscarriage contrary to s.58 of the Offences Against the Person Act 1861 ("the Offence").

Under police interview on 26 June 2018, Mr Christy stated that he had no knowledge of the situation and had not assisted in any way. He was re-arrested on 30 August 2018 on suspicion of conspiring to commit the Offence.

Mr Christy prepared a statement, continuing to deny any involvement in the abortion attempt.

On 25 November 2019, following a criminal investigation, Mr Christy was convicted at St Albans Crown Court of conspire to commit an either way offence outside England and Wales in relation to offences against the person.

On December 2019, Mr Christy received a custodial sentence of three years' imprisonment.

### **Decision and reasons on facts**

The charge concerns Mr Christy's conviction and, having been provided with a copy of the certificate of conviction, the panel found the matter proved in accordance with Rule 31 (2) and (3). These state:

- '31.— (2) Where a registrant has been convicted of a criminal offence—*
- (a) a copy of the certificate of conviction, certified by a competent officer of a Court in the United Kingdom (or, in Scotland, an extract conviction) shall be conclusive proof of the conviction; and*
  - (b) the findings of fact upon which the conviction is based shall be admissible as proof of those facts.*
- (3) The only evidence which may be adduced by the registrant in rebuttal of a conviction certified or extracted in accordance with paragraph (2)(a) is evidence for the purpose of proving that she is not the person referred to in the certificate or extract.'*

The panel also had sight of the sentencing remarks from the Judge at St Albans Crown Court on 13 December 2019 which supported this finding. The panel was satisfied that the conviction related to Mr Robin Christy, as named on the NMC Register.

Therefore, the panel found charge 1 proved.

## **Fitness to practise**

Having concluded its findings on the facts, the panel then considered whether, on the basis of the facts found proved, Mr Christy's fitness to practise is currently impaired by reason of his conviction. There is no statutory definition of fitness to practise. However, the NMC has defined fitness to practise as a registrant's suitability to remain on the register unrestricted.

## **Representations on impairment**

The panel had sight of the NMC's statement of case, which reads as follows:

*10 In relation to impairment, the general approach to what might lead to a finding of impairment was provided by Dame Janet Smith in her Fifth Shipman Report. A summary is set out in the case of CHRE v NMC & Grant [2011] EWHC 927 at paragraph 76 in the following terms:*

*“Do our findings of fact in respect of the doctor's misconduct, deficient professional performance, adverse health, conviction, caution or determination show that his/her fitness to practise is impaired in the sense that s/he:*

- a. has in the past acted and/or is liable in the future to act so as to put a patient or patients at unwarranted risk of harm; and/or*
- b. has in the past brought and/or is liable in the future to bring the medical profession into disrepute; and/or*
- c. has in the past breached and/or is liable in the future to breach one of the fundamental tenets of the medical profession; and/or*
- d. has in the past acted dishonestly and/or is liable to act dishonestly in the future.”*

*11 In this case, limbs a, b and c are engaged.*

*12 Although the registrant's clinical practice had not been called into question, his past conduct put a member of public, and her unborn child, at significant risk of unwarranted*

*harm. Indeed, the registrant's conduct in advising a third party how to give a woman a noxious substance that would induce an abortion or miscarriage contributed to a member of public and her unborn child experiencing significant harm. The registrant contributed to bringing about this harm by using his professional knowledge to advise a third party on how to bring about a miscarriage/abortion and how to exacerbate the effects of the substance administered. There can be no doubt of the risk of harm, and indeed the harm caused, by this registrant.*

*13 The registrant's offending conduct has brought the nursing profession into disrepute. His offending behaviour raises serious concerns regarding his trustworthiness as a registered professional. The registrant engaged in a course of conduct which was capable of causing, and indeed brought about, harm to both a mother and her unborn child. Such conduct clearly flies in the face of the public's expectations that nurses will preserve safety, treat people with dignity and act with integrity at all times. The damage to the reputation of the nursing profession caused by the registrant's conduct cannot be understated. Further, not only has the registrant engaged in conduct which is completely unbecoming of a nurse, but he also received a criminal conviction as a result of his conduct, and was made subject to a significant criminal sentence of immediate custody for 3 years. The outcome of the criminal proceedings in this case causes further damage to the reputation of the nursing profession.*

*14 The registrant's offending conduct has also breached fundamental tenets of the profession. Nurses are expected to act with integrity and trustworthiness at all times. They are expected to treat people with dignity. They are expected to keep people safe. The registrant's conduct in conspiring to bring about an abortion/miscarriage completely contradicts those fundamental tenets of nursing.*

## **Remediation**

*15 The NMC's guidance makes it clear that certain types of conduct are more difficult to remediate; Is the concern remediable? (FTP-13a):*

*"Examples of conduct which may not be possible to remedy, and where steps such as training courses or supervision at work are unlikely to address the concerns include:*

- criminal convictions that led to custodial sentences."*

16 *Given the very serious nature of the conduct, and the resulting outcome in the criminal proceedings, this case very much falls into the category of conduct which is more difficult to remediate.*

17 *The registrant denied the charges against him during the criminal investigation but now accepts the conviction as a regulatory concern. The registrant has not provided any evidence of remediation or reflection. He has not demonstrated any insight into his behaviour including the risk of harm caused by his actions nor the impact of his conduct on the profession and the trust placed in nurses by members of the public.*

18 *Further, the registrant has not demonstrated any remorse for his actions towards the mother and her baby.*

19 *Finally, the registrant has not provided any evidence to suggest he no longer poses a risk of harm, including in the form of training, testimonials or reflection.*

#### **Public protection impairment**

20 *In light of the lack of evidence of any form of remediation, it must be said that the registrant continues to pose a risk of significant unwarranted harm to patients such that a finding of impairment on public protection grounds is required.*

#### **Public interest impairment**

21 *The conduct in this case is serious, caused a mother and her unborn child harm and resulted in a criminal conviction and a significant custodial sentence. The registrant abused his knowledge and experience as a nurse to carry out this criminal conduct. This case could not be more damaging to the reputation of the nursing profession.*

22 *Members of the public appraised of the serious nature of the registrant's conviction and the underlying facts would expect the NMC to take some form of restrictive action against him. Therefore, not only is a finding of impairment required to protect the public, but it is also required in the public interest, to maintain confidence in the nursing profession and the NMC as its regulator.*

23 *For the reasons above, it is submitted that the registrant's fitness to practise is currently impaired, by reason of his conviction, on both public protection and public interest grounds.*

## Decision and reasons on impairment

The panel next went on to decide if, as a result of the conviction, Mr Christy's fitness to practise as a registered nurse is currently impaired.

The panel accepted the advice of the legal assessor.

Registered nurses occupy a position of privilege and trust in society and are expected at all times to be professional. Patients and their families must be able to trust registered nurses with their lives and the lives of their loved ones. They must make sure that their conduct at all times justifies both their patients' and the public's trust in the profession.

In this regard the panel considered the judgment of Mrs Justice Cox in the case of Grant in reaching its decision. In paragraph 74, she said:

*'In determining whether a practitioner's fitness to practise is impaired by reason of misconduct, the relevant panel should generally consider not only whether the practitioner continues to present a risk to members of the public in his or her current role, but also whether the need to uphold proper professional standards and public confidence in the profession would be undermined if a finding of impairment were not made in the particular circumstances.'*

In paragraph 76, Mrs Justice Cox referred to Dame Janet Smith's "test" which reads as follows:

*'Do our findings of fact in respect of the [doctor's] ..., conviction, ... show that his/her fitness to practise is impaired in the sense that s/he:*

- a) has in the past acted and/or is liable in the future to act so as to put a patient or patients at unwarranted risk of harm; and/or*

- b) *has in the past brought and/or is liable in the future to bring the medical profession into disrepute; and/or*
- c) *has in the past breached and/or is liable in the future to breach one of the fundamental tenets of the medical profession; and/or*
- d) ...

The panel finds that limbs a, b and c are engaged in this case.

The panel had no doubt that Mr Christy's conviction for conspiring to commit the Offence was of the utmost seriousness. It determined that Mr Christy had shown himself capable of causing significant harm to others as a result of his actions and, notwithstanding that the incident occurred in his private life, was in no doubt that there was an ongoing risk of harm to patients in the future should he be permitted to practise as a registered nurse.

The panel was of the view that Mr Christy had breached fundamental tenets of the nursing profession by conspiring to commit the Offence. The panel considered that he had undoubtedly brought the nursing profession into disrepute. The panel noted that Mr Christy initially denied the allegation, and maintained this position during his criminal trial. He had sought to change his story on multiple occasions, and had attempted to minimise the role he played in the offence.

Mr Christy's conviction led to a custodial sentence of three years imprisonment.

The panel considered the following standards of *The Code: Professional standards of practice and behaviour for nurses and midwives* (2015) ("the Code") to be engaged in this case:

**"1.1 Treat people as individuals and uphold their dignity**

*To achieve this, you must:*

1.1 *treat people with kindness, respect and compassion*

**20 Uphold the reputation of your profession at all times**

20.1 *keep to and uphold the standards and values set out in the Code*

*20.2 act with honesty and integrity at all times...*

*20.4 keep to the laws of the country in which you are practising*

*20.8 act as a role model of professional behaviour..."*

The panel noted that Mr Christy did not provide it with any explanation for his behaviour. He did not return the CMF document sent to him by the NMC. The panel had no evidence before it of any insight, remorse, or remediation demonstrated by Mr Christy, although it recognised that remediation would be extremely difficult given the nature of his conviction.

Therefore, the panel determined that a finding of impairment on public protection grounds is required.

The panel bore in mind that the overarching objectives of the NMC are not only to protect, promote and maintain the health, safety and well-being of the public and patients, but also to uphold/protect the wider public interest, which includes promoting and maintaining public confidence in the nursing and midwifery professions and upholding the proper professional standards for members of those professions. It determined that a fully informed member of the public would be appalled by Mr Christy's conviction, and extremely concerned should a finding of current impairment not be made in the circumstances of this case.

Having regard to all of the above, the panel was also satisfied that Mr Christy's fitness to practise as a registered nurse is currently impaired on public interest grounds.

## **Sanction**

The panel has considered this case very carefully and has decided to make a striking-off order. It directs the NMC registrar to strike Mr Christy's name off the NMC register. The effect of this order is that the NMC register will show that Mr Christy has been struck off the NMC register.

In reaching this decision, the panel has had regard to all the evidence that has been adduced in this case and had careful regard to the Sanctions Guidance ("SG") published by the NMC.

## Representations on sanction

The panel had sight of the NMC's statement of case, which reads as follows:

*24 Whilst sanction is a matter for the panel's independent professional judgment, it is submitted that the appropriate sanction in this case is **a striking-off order**.*

*25 In determining sanction, the panel should have regard to the NMC's guidance on sanctions, bearing in mind that it provides guidance and not firm rules. The panel will be aware that the purpose of sanctions is not to be punitive but to protect the public and public interest. The panel should take into account the principle of proportionality and it is submitted that the proposed sanction is a proportionate one that balances the risk to public protection and the public interest with the Registrant's interests.*

*26 The aggravating factors in this case are:*

- a. The registrant received a significant custodial sentence.*
- b. The registrant abused his knowledge as a nurse to participate in a criminal activity.*
- c. The registrant abused his knowledge as a nurse to bring about harm to a mother and her unborn child.*
- d. The registrant has demonstrated no evidence of insight or remorse.*

*27 The mitigating factors in this case are as follows:*

- a. The registrant has had no previous regulatory referrals*
- b. There have been no concerns raised about his clinical practice.*

*28 In taking the available sanctions in ascending order, the panel must first consider whether to take no action or make a caution order. It is submitted that neither of these would be appropriate in view of the seriousness of the conviction, the need to protect the public and the need to declare and uphold proper standards of conduct, as they would not restrict the registrant's practice in anyway.*

*29 With regard to a conditions of practice order, it is submitted that such an order would not be sufficient to address the serious nature of the conviction. Nor would it be*

*sufficient to satisfy the significant public interest in this case. The concerns in this case do not relate to clinical failings but instead relates to an extremely serious conviction. There are no relevant or workable conditions that could be formulated to alleviate the risks in this case. The registrant's behaviour is not the sort that can be addressed through retraining and it is for these reasons that a conditions of practice order would not be not be appropriate or proportionate in this case.*

*30 A suspension order would not be sufficient to mitigate the public protection risks identified. The registrant's conduct presents a significant risk to the health, safety or wellbeing of the public. There is no evidence that the registrant has reflected on his actions, understands that his behaviour was unacceptable and has taken steps to remediate his conduct so that he no longer presents a risk to the public.*

*31 A suspension order would also not address the public interest. The NMC's guidance makes it clear that concerns relating to serious criminal offending (FTP-3c) and deliberately causing harm (FTP-3a) are particularly serious. The registrant's conduct is particularly serious as it involves the misuse of his clinical knowledge which resulted in serious harm and a criminal conviction and custodial sentence. The nature of the conduct to which the allegations relate raises fundamental concerns about his professionalism and trustworthiness, and is fundamentally incompatible with registration as a nurse. In these circumstances, it is submitted that a suspension order would not be appropriate or proportionate sanction.*

### **Decision and reasons on sanction**

Having found Mr Christy's fitness to practise as a registered nurse currently impaired, the panel went on to consider what sanction, if any, it should impose in this case. The panel has borne in mind that any sanction imposed must be appropriate and proportionate and, although not intended to be punitive in its effect, may have such consequences. The panel had careful regard to the SG, specifically, the part relating to cases involving criminal convictions or cautions. It also accepted the advice of the legal assessor. The decision on sanction is a matter for the panel independently exercising its own judgement.

The panel considered the following aggravating factors to be present in this case:

- Mr Christy has a criminal conviction of the utmost seriousness which has resulted in a prison sentence.
- Mr Christy was involved in the attempt of supplying controlled drugs which were intended to induce an abortion or miscarriage.
- Mr Christy tried to minimise his conduct by denying throughout any involvement in the abortion attempt.

Further, the panel accepts the NMC's submissions on aggravating features, namely:

- The registrant abused his knowledge as a nurse to participate in a criminal activity.
- The registrant abused his knowledge as a nurse to bring about harm to a mother and her unborn child.
- The registrant has demonstrated no evidence of insight or remorse.

The panel did not consider there to be any significant mitigating factors in this case. Noting that there had been no other regulatory or clinical concerns, it was nevertheless of the view that the overall weight of the evidence and the seriousness of the case meant that any mitigation was trivial or immaterial.

The panel particularly bore in mind the following elements from the Judge's sentencing remarks when Mr Christy was sentenced following his conviction:

*"You have been found out by the events of this case to lack not just thinking skills or an ability to appreciate the seriousness of what was happening, but a certain lack of moral compass or fibre that is quite shocking to find in a healthcare professional. I reject the submission, as I am sure the jury also did, that you joined this conspiracy only briefly on 19 April before then withdrawing on 20 April. The tenor and content of your telephone calls on both days were entirely plain to hear. You unhesitatingly joined in [the mother's partner's] plan, offering both prompted and sometimes unprompted medical information and advice, and also tactical views, knowing that he was looking to bring about the illegal abortion of a viable foetus. You were not, as you continue to try to claim, backing out or trying to put off on 20 April. You were actively ensuring he worked through all the consequences to help him make sure*

*that, if he went ahead, he had both maximum chances of success and maximum chances of not being caught.”*

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

Next, in considering whether a caution order would be appropriate in the circumstances, the panel took account of the SG, which states that a caution order may be appropriate where *‘the case is at the lower end of the spectrum of impaired fitness to practise and the panel wishes to mark that the behaviour was unacceptable and must not happen again.’* The panel was of the view that Mr Christy’s behaviour was not at the lower end of the spectrum of fitness to practise and that a caution order would be inappropriate in view of the 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 considered whether placing a conditions of practice order on Mr Christy’s nursing registration would be a sufficient and appropriate response. The panel is mindful that any conditions imposed must be proportionate, measurable and workable.

The panel is of the view that there are no practical or workable conditions that could be formulated, given the nature of the conviction in this case. The panel noted that there were no identifiable deficiencies in respect of Mr Christy’s clinical nursing practice which needed to be addressed: rather the mischief was significantly attitudinal and harmful against which conditions would not be appropriate.

In any event, the panel determined that the public interest elements of this case would not be met by the imposition of a conditions of practice order, given Mr Christy’s conviction. The panel determined that a conditions of practice order would not sufficiently protect the public, nor address the public interest considerations in this case. The panel had serious concerns regarding Mr Christy’s attitude and conduct.

The panel then went on to consider whether a suspension order would be an appropriate sanction.

The panel reminded itself that it had found Mr Christy's conviction to be very serious. It had considered it to be a significant departure from the standards expected of a registered nurse.

The panel considered Mr Christy's behaviour to be demonstrative of a deep-seated attitudinal problem. He acted in a way that was completely contrary to all that nursing stands for.

The panel found that Mr Christy had offered no insight, remorse or remediation in respect of his conduct, despite having a substantial amount of time to reflect on these incidents. The panel considered there to be a real risk of repetition and a significant risk of unwarranted harm to patients in Mr Christy's care, should he be permitted to practise as a registered nurse at some point in the future.

The panel therefore determined that a suspension order would not be a sufficient, appropriate or proportionate sanction.

The panel was of the view that the findings in this particular case demonstrate that Mr Christy's actions were serious, and to allow him to remain on the NMC register as a registered nurse would undermine public confidence in the nursing profession and in the NMC as a regulatory body. With this in mind, the panel concluded that the only course of action available to it was to impose a striking-off order. It considered that any other sanction in this case would be wholly inappropriate given this panel's findings.

Taking account of the above, the panel determined that Mr Christy's actions were not merely serious departures from the standards expected of a registered nurse and serious breaches of the fundamental professional tenets, of maintaining proper professional values, and of complying with the law. They were fundamentally incompatible with him remaining on the NMC register. In the panel's judgment, to allow someone who had behaved in this way to maintain registration with the NMC would undermine public confidence in the nursing profession and in the NMC as a regulatory body.

In reaching its decision, the panel bore in mind that its decision would have an adverse effect on Mr Christy both professionally and personally. The panel was satisfied that the need to protect the public interest outweighs the impact on Mr Christy in this regard.

Considering all of these factors, the panel determined that the appropriate and proportionate sanction is a striking-off order. Having regard to the matters it identified, including the effect of Mr Christy's actions in damaging public confidence in the nursing profession, the panel has concluded that nothing short of this would be sufficient in this case.

### **Interim order**

As the striking-off order cannot take effect until the end of the 28-day appeal period, the panel has considered whether an interim order is required in the specific circumstances of this case. It may only make an interim order if it is satisfied that it is necessary for the protection of the public, is otherwise in the public interest or is in Mr Christy's own interest until the striking-off order takes effect.

## **Representations on interim order**

The panel had regard to the NMC's statement of case, which stated:

*32 Given the serious nature of the conviction and that there is a risk that patients would be placed at an unwarranted risk of harm if the registrant were to be allowed to practise without restrictions, an interim order is required in this case. An interim order is necessary for the protection of the public and is otherwise in the public interest.*

*33 An interim suspension order should be imposed in this case for the same reasons as the substantive order. The interim suspension order for a period of 18 months should be imposed to allow for any potential appeal period.*

*34 In the event no appeal is made, the interim order will fall away once the 28-day appeal period has elapsed, and the substantive order will take effect.*

## **Decision and reasons on interim order**

The panel was satisfied that an interim order is necessary for the protection of the public and it is otherwise in the public interest. In deciding this, the panel had regard to the seriousness of Mr Christy's conviction and the reasons set out in its decision for the substantive order.

The panel concluded that an interim conditions of practice order would not be appropriate or proportionate in this case due to its earlier findings. There are no clinical deficiencies in need of retraining, and this type of interim order would not sufficiently address the public protection and public interest concerns identified.

The panel therefore decided to impose an interim suspension order for a period of 18 months. To do otherwise would be incompatible with its earlier findings.

If no appeal is made, then the interim suspension order will be replaced by the substantive striking-off order 28 days after Mr Christy is sent the decision of this hearing in writing.

That concludes this determination.