

Nursing and Midwifery Council

Voluntary Removal Decision

11 April 2022

Registrant: Karina Bennion

PIN: 09B0129E

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

1. On 18 February 2020 failed to administer Cyclopentolate to Patient A following an oral prescription being given by Consultant A.
2. On 3 March 2020 failed to alert the prescribing Doctor that Patient B was allergic to an ingredient (Bendrochodium) in the post-surgery medication.
3. On 3 March 2020 allowed Patient B to be discharged with medication which you knew they were allergic to.
4. On 4 August 2020 failed to follow the correct process when Patient C notified you of an allergy in that you did not put a latex allergy sticker on the patient notes.
5. On 13 August 2020 failed to log and store medicine delivered to the hospital.

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:

- Voluntary removal application form dated 16 February 2022
- Email trail between NMC and Mrs Bennion's representative various dates
- Case management form dated 13 January 2022
- Mrs Bennion's reflective statement
- Testimonials provided for Mrs Bennion

Background

Mrs Karina Bennion joined the NMC Register in March 2009.

Mrs Bennion is currently subject to a fitness to practise matter. The Case Examiners considered this case on 8 November 2021 and decided that there was a case to answer and referred the matter to the Fitness to Practise Committee.

On 16 February 2022, Mrs Bennion sent in an application to remove her name from the nursing register through our voluntary removal process.

Background to the allegations

The NMC received a referral about Mrs Bennion on 21 October 2020 from Human Resources Business Partner Spa Medica ('the Group'). At the time of the concerns Mrs Bennion was working as a registered nurse for the Group at their Wolverhampton Hospital ('the Hospital'). The Hospital is a private ophthalmic hospital which carries out cataract and laser eye surgery for the NHS.

The following facts are alleged:

On 18 February 2020, Patient A attended the Hospital with raised pressure in their eye. The consultant was in theatre and gave Mrs Bennion a verbal prescription for the patient and informed her that they would write the prescription up as soon as they had finished surgery. Mrs Bennion refused to administer this medication until it had been officially prescribed. The consultant explained that this was an emergency situation for Patient A and reiterated for her to administer the medication under a verbal prescription. Mrs Bennion still refused, she waited until the consultant had finished surgery and had written the prescription before she would administer the medication. Whilst no harm came to Patient A, delaying the medication put Patient A at risk of visual impairment and blindness.

On 3 March 2020, Mrs Bennion was discharging patients post-surgery. When arranging the discharge medication for Patient B, Mrs Bennion noticed that Patient B was allergic to one of the ingredients in the eye drops that had been prescribed. Mrs Bennion dispensed this medication for Patient B to take home with them, even though she knew that they were allergic to one of the ingredients. Patient B's husband returned the

medication the following day as Patient B realised that they were allergic to it. No harm was caused to Patient B, but the risk of harm was significant.

In April 2020, Mrs Bennion was furloughed. She returned to the Hospital at the end of June 2020. On 4 August 2020, Mrs Bennion saw Patient C in a pre-operative assessment appointment. Patient C informed Mrs Bennion that they had a latex allergy and she documented this on the computer system. Mrs Bennion did not complete the correct process which was to put a latex allergy sticker on their notes and document it on their paper file. This meant that Patient C was booked in for an inappropriate surgery slot and the theatre would not have known about their allergy. A colleague noticed Patient C's allergy and rectified the error.

On 13 August 2020, Mrs Bennion failed to correctly log and store medicines, which had been delivered to the Hospital.

Following these errors, Mrs Bennion took a period of annual leave. A local investigation was commenced and Mrs Bennion was informed that she had failed her probation period. Mrs Bennion's employment was terminated on 21 October 2020.

Public interest considerations

Our voluntary removal guidance explains that the only circumstances in which we'll accept applications for voluntary removal are where:

- the nurse, midwife or nursing associate accepts the regulatory concern(s);
- the regulatory concerns are not so serious that they are fundamentally incompatible with being a registered professional; and
- the nurse, midwife or nursing associate provides evidence that they do not intend to continue practising.

Does the nurse accept the regulatory concerns?

Mrs Bennion has admitted the facts and current impairment in the voluntary removal forms dated 16 February 2022. Mrs Bennion's application contains a signed declaration that she admits to the facts of the allegation against her and that her fitness to practise is impaired.

Are the regulatory concerns so serious that they are fundamentally incompatible with being a registered professional?

I've considered whether the concerns are so serious they're fundamentally incompatible with being a registered professional. The seriousness of the concerns will be a key factor in considering whether voluntary removal is suitable or whether we need to take action in the public interest.

Our guidance explains this as a small number of concerns which are so serious that it may be less easy for the nurse, midwife or nursing associate to put right the conduct, the problems in their practice, or the aspect of their attitude which led to the incidents

happening. We are more likely to need to take action for these types of concerns. This may include causing deliberate harm to patients. In such cases the misconduct may be so serious that it's fundamentally incompatible with being a registered professional. Having carefully considered the concerns raised in relation to Mrs Bennion's practice I'm satisfied that it isn't indicative of a serious concern more difficult to put right.

The alleged facts of this case relates to Mrs Bennion's clinical practice during her probationary period in 2020. In her reflective statement Mrs Bennion acknowledges the risk of harm her conduct posed. She also reflected on aspects of the concerns raised about her, demonstrating how she would act differently if presented with similar issues.

Having carefully considered the sanctions guidance, were this case to go to a panel of the Fitness to Practise Committee, there is unlikely to be a real risk of a striking off order being made. While recognising that there have been a number of clinical concerns raised about Mrs Bennion the matters did not result in any serious patient harm, although I recognise that there was a potential for serious harm. There is no information to suggest that Mrs Bennion acted deliberately or with any intention to harm any patients in her care as oppose to recklessly. There is also no indication that Mrs Bennions' attitude led to the incidents happening. The concerns don't involve the type of conduct that is fundamentally incompatible with being on the register. As such it doesn't require a Fitness to Practise Committee decision in order to uphold the public interest based on the seriousness of the allegations.

Has the nurse provided evidence that they do not intend to continue practising?

Our voluntary removal guidance also explains that the only circumstances in which voluntary removal applications will be accepted is where the nurse, midwife or nursing associate provides evidence that they do not intend to continue practising.

Mrs Bennion has confirmed that she has not practised as a Nurse since August 2020. Her application for voluntary removal contains a signed declaration confirming she won't reapply to the NMC register for a period of at least 5 years.

Mrs Bennion appears to be currently working in a role at a local council although she has not provided any evidence to support this.

Voluntary removal would mean that Mrs Bennion would be immediately removed from the register and would not be able to work as a Nurse. This would remove the risk to the public.

Following voluntary removal, Mrs Bennion would not be able to seek employment or practise as a nurse. Voluntary removal would protect the public and as explained above the concerns themselves are not so serious that they need the Fitness to Practise Committee to consider them in order to uphold the public confidence in the professions. Were Mrs Bennion to reapply to the register in the future, a Registrar would be able to consider the original concerns about her practice and reasons for readmission. Mrs Bennion would have to show that she is able to practise safely and effectively.

In summary I consider that the public interest is met by the publishing of this decision and the immediate removal of Mrs Bennion from the register.

Comments from the maker of the allegations

The NMC contacted the maker of the allegations for their comments on Mrs Bennion's voluntary removal from the register, but have not received a response.

Registrar's decision

I'm satisfied that Mrs Bennion accepts the concerns and doesn't intend to work as a registered nurse again the future. Approving Mrs Bennion's application would immediately remove any future risk and address the public protection issues. The concerns don't involve the type of conduct that is fundamentally incompatible with being on the register. I've therefore decided to accept Mrs Bennion's application for voluntary removal from the register.