

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

**Substantive Hearing
Wednesday 9 November 2022**

Virtual Hearing

Name of registrant: Rhiannon Claire Jones

NMC PIN: 9710350W

Part(s) of the register: Registered Nurse Sub Part 1
Learning Disabilities Nurse - Level 1
October 2000

Relevant Location: Merthyr Tydfil

Type of case: Conviction

Panel members: Vicki Wells (Chair, Registrant member)
Claire Matthews (Registrant member)
Janine Green (Lay member)

Legal Assessor: Lachlan Wilson

Hearings Coordinator: Sophie Cubillo-Barsi

Nursing and Midwifery Council: Represented by Unyime Davies, Case Presenter

Miss Jones: Not present and unrepresented

Consensual Panel Determination: Accepted

Facts proved: Charges 1 a) and b)

Fitness to practise: Impaired

Sanction: Striking-off order

Interim order: Interim suspension order – 18 months

Decision and reasons on service of Notice of Hearing

The panel was informed at the start of this hearing that Miss Jones was not in attendance and that the Notice of Hearing letter had been sent to Miss Jones' registered email address on 11 October 2022.

The Notice of Hearing was also sent to Miss Jones' representative at the Royal College of Nursing (RCN) on 11 October 2022.

Ms Davies, on behalf of the Nursing and Midwifery Council (NMC), submitted that it had complied with the requirements of Rules 11 and 34 of the 'Nursing and Midwifery Council (Fitness to Practise) Rules 2004', as amended (the Rules).

The panel accepted the advice of the legal assessor.

The panel took into account that the Notice of Hearing provided details of the allegation, the time, date and virtual link to join the hearing and included information about Miss Jones' right to attend, be represented and call evidence, as well as the panel's power to proceed in her absence.

In the light of all of the information available, the panel was satisfied that Miss Jones' has been served with the Notice of Hearing in accordance with the requirements of Rules 11 and 34.

Decision and reasons on proceeding in the absence of Miss Jones

The panel next considered whether it should proceed in the absence of Miss Jones. It had regard to Rule 21 and heard the submissions of Ms Davies who invited the panel to continue in the absence of Miss Jones. She submitted that Miss Jones had voluntarily absented herself.

Ms Davies informed the panel that a provisional Consensual Panel Determination (CPD) agreement had been reached and signed by the RCN on behalf of Miss Jones on 19 October 2022.

Ms Davies referred the panel to the statement within the CPD from Ms Jones' representative from the RCN dated 19 October 2022 which stated:

“Miss Jones is aware of the CPD hearing. Miss Jones does not intend on attending the hearing and is content for it to proceed in her and her representative's absence. Miss Jones' representative, the Royal College of Nursing, will endeavour to be available by telephone should any clarification on any point be required, or should the panel wish to make any amendment to the provisional agreement.”

This position was confirmed in an email, dated 9 November 2022, from the RCN, which states:

“The registrant is not intending to attend today, nor will she be represented. No discourtesy is intended.

She has given an indication that she will seek to be available by phone in the event that the panel have any queries.”

The panel accepted the advice of the legal assessor.

The panel noted that its discretionary power to proceed in the absence of a registrant under the provisions of Rule 21 is not absolute and is one that should be exercised “with the utmost care and caution” as referred to in the case of *R. v Jones (Anthony William)* (No.2) [2002] UKHL 5.

The panel has decided to proceed in the absence of Miss Jones. In reaching this decision, the panel has considered the submissions of Ms Davies, the representations from Ms Jones’ representative made on her behalf, and the advice of the legal assessor. It has had particular regard to the factors set out in the decision of *R v Jones* and *General Medical Council v Adeogba* [2016] EWCA Civ 162 and had regard to the overall interests of justice and fairness to all parties. It noted that:

- Ms Jones has engaged with the NMC and has signed a provisional CPD agreement which is before the panel today;
- The CPD provisional agreement indicates Ms Jones does not intend to attend the hearing and is content for it to proceed in her and her representative’s absence;
- There is no reason to suppose that adjourning would secure her attendance at some future date; and
- There is a strong public interest in the expeditious disposal of the case.

In these circumstances, the panel has decided that it is fair, appropriate and proportionate to proceed in the absence of Ms Jones.

Details of charge

That you, a registered nurse:

1. Were convicted:
 - a. On 10th August 2020 at Merthyr Tydfil Crown Court of Intimidation, contrary to section 51(1) of the Criminal Justice and Public Order Act 1994, and
 - b. On 4th June 2021 at Merthyr Tydfil Magistrates' Court of sending a threat by electronic communication, contrary to s(1)(1)(a) and (4) of the Malicious Communications Act 1988.

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

Consensual Panel Determination

At the outset of this hearing, Ms Davies informed the panel that a provisional agreement of a Consensual Panel Determination (CPD) had been reached with regard to this case between the NMC and Miss Jones and her representative.

The agreement, which was put before the panel, sets out Miss Jones' full admissions to the facts alleged in the charges, and that her fitness to practise is currently impaired by reason of her conviction. It is further stated in the agreement that an appropriate sanction in this case would be a striking-off order.

Ms Davies stated that although an agreement has been reached, it is for the panel to make an independent judgement on whether Ms Jones fitness to practise is impaired and if so, what sanction to impose.

The panel has considered the provisional CPD agreement as reached by the parties, the relevant parts read as follows:

'...

Background

4. *Miss Jones appears on the register of nurses, midwives and nursing associates maintained by the NMC as a Registered Nurse, specialising in Learning Disabilities. Miss Jones has been a registered nurse since 1 November 2000.*
5. *On 31 January 2018, Miss Jones referred herself to the NMC.*

The facts relating to the charges

6. *Between August and October 2017, Miss Jones pursued a course of conduct which amounted to harassment of Victim 1.*

7. *On 25 October 2017, Miss Jones was arrested and charged with harassment contrary to section 2(1) and (2) of the Protection from Harassment Act 1997.*
8. *On 10 November 2017, Miss Jones appeared at Merthyr Tydfil Magistrates' Court and plead guilty. She was sentenced to pay a fine of £235.00 and issued with a restraining order. The restraining order was not to contact the victim directly or indirectly by any means be it face to face, telephone, message calls, texts, postal address, electric social media or via a third party.*
9. *However, following this, Miss Jones contacted Victim 1 on a number of occasions. Miss Jones was subsequently arrested and charged on 17 January 2018 for breaching the restraining order. As a result, Miss Jones received a Community Order for the latter offence on 12 February 2018, to be complied with by 11 February 2019.*
10. *Miss Jones was later arrested on 22 April 2020 for harassment in respect of the same victim of the previous offences.*
11. *Miss Jones was subsequently charged and bailed, with one of the conditions being not to contact Victim 1 by any means. That matter was eventually discontinued by the prosecution. However before it was discontinued, and while Miss Jones was on bail for this, Miss Jones contacted Victim 1 from 25 June to 28 June 2020 using a different mobile phone number.*
12. *Miss Jones contacted Victim 1 trying to get him to withdraw his statement. Miss Jones did this by sending numerous and disturbing messages, including offering sexual favours.*
13. *On 6 July 2020, Miss Jones was charged with intimidation, contrary to section 51(1) of the Criminal Justice and Public Order Act 1994, and remanded into custody by the police.*

14. On 10 August 2020, Miss Jones appeared at Merthyr Tydfil Crown Court and pleaded guilty. She was sentenced to 19 weeks imprisonment, a sentence which she has now served. Miss Jones also received a restraining order for 10 years and a victim surcharge of £128.00.

15. We refer to pages 17 to 18 of the Judge's sentencing remarks:

'I would assess the Defendant's culpability as high, this is deliberate and persistent attempts to get the victim to withdraw his complaint but the harm, however, I take the view that some distress was caused but I have got nothing to indicate there was very serious distress of any kind, so lower harm.'

'The offending is very gravely aggravated by the Defendant's previous convictions but, in mitigation, there are, and I think it is very limited mitigation, there is the Defendant's assertion that the Complainant has been sending her these messages.'

16. Miss Jones was later convicted on 4 June 2021 for two offences under the Malicious Communications Act 1988, relating to two victims unrelated to the previous offending, for which she received a 12 month community order and a restraining order for 2 years.

17. Miss Jones has accepted the Regulatory charges and that her fitness to practise is impaired in the case management form dated 27 July 2020.

Impairment

18. Miss Jones' fitness to practise is currently impaired by reason of her conviction. Her conduct as described in the charges, all of which she has admitted, fall seriously short of the standards set out in **The Code: Professional standards of practice and behaviour for nurses and midwives (2015)** ("the Code").

19. The Parties agree that the following paragraphs of the Code have been breached:

20 Uphold the reputation of your profession at all times

To achieve this, you must:

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, treating people fairly and without discrimination, bullying or harassment

20.3 be aware at all times of how your behaviour can affect and influence the behaviour of other people

20.8 act as a role model of professional behaviour for students and newly qualified nurses, midwives and nursing associates to aspire to

20. Miss Jones has been convicted of serious offences, escalating with each breach of restraining order showing flagrant disregard for Court Orders in place. This coupled, with the serious offence of witness interference, demonstrates a lack of regard and respect for authority and the law.

21. Although the offences are not connected with Miss Jones' professional life, they undermine fundamental tenets of a registered professional to comply with the laws of the country and to act with integrity. The offences and convictions raise serious questions about the trustworthiness of Miss Jones and public confidence in the profession would be seriously undermined if Miss Jones was to continue practicing.

22. The Parties have considered the factors outlined by **Dame Janet Smith in her Fifth Report from Shipman, approved by Cox J in the case of CHRE v Grant & NMC [2011] EWHC 927 (Admin) ("Grant")**. A summary is set out in the case at paragraph 76 in the following terms:

"Do our findings of fact in respect of the [nurses] 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:

I. ...

II. has in the past brought and/or is liable in the future to bring the medical profession into disrepute; and/or

III. 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

IV...

23. *The Parties agree that limbs II) and III) are engaged in this case. Dealing with each limb in turn:*

Public Interest

Has in the past brought and/or is liable in the future to bring the medical profession into disrepute

24. *Registered professionals occupy a position of privilege and trust in society to be responsible for the care of residents or patients. They are expected to be professional at all times. Patients and families must be able to trust registered professionals with their lives and the lives of their loved ones. Miss Jones accepts that her conduct directly constitutes a breach of the trust placed in her as a registered professional.*

25. *Miss Jones also acknowledges that her behaviour not only brought her reputation into disrepute, but also that of the wider profession, which in turn undermines the public's confidence in the profession as a whole.*

*The panel should also consider the comments of **Cox J in Grant** at paragraph 101:*

“The Committee should therefore have asked themselves not only whether the Registrant continued to present a risk to members of the public, but whether the need to uphold proper professional standards and public confidence in the Registrant and in the profession would be undermined if a finding of impairment of fitness to practise were not made in the circumstances of this case.”

Has in the past breached and/or is liable in the future to breach one of the fundamental tenets of the medical profession

26. *The Code divides its guidance for nurses in to four categories which can be considered as representative of the fundamental principles of nursing care. These are:*

1. *a) Prioritise people;*
2. *b) Practice effectively;*
3. *c) Preserve safety and*
4. *d) Promote professionalism and trust*

27. *Miss Jones agrees that she has breached fundamental tenets of the profession.*

These sections of the Code define, in particular, the responsibility to promote professionalism and trust, including the absolute requirement to maintain good health to ensure safe conduct and practise. Miss Jones further agrees that there is a risk of breaching future fundamental tenets of the profession.

Remediation, reflection, training, insight, remorse

28. *With regard to future risk it may assist the panel to consider the comments of **Silber J in Cohen v General Medical Council [2008] EWHC 581 (Admin)** namely (i) whether the concerns are easily remediable; (ii) whether they have in fact been remedied; and (iii) whether they are highly unlikely to be repeated.*

29. *The NMC's guidance on **Criminal Convictions and Cautions (FTP-2c)** says, "If the criminal offending took place in the nurse, midwife or nursing associate's private life, and there's no clear risk to patients or members of the public, then it is unlikely that we'll need to take regulatory action to uphold confidence in nurses, midwives or nursing associates, or professional standards. We'd only need to do that if the nurse, midwife or nursing associate was given a custodial sentence (this includes suspended sentences) ..."*

30. *Miss Jones was sentenced to a custodial sentence on 10 August 2020 when she appeared before Merthyr Tydfil Crown Court. In accordance with Guidance FTP-2c, regulatory action to uphold confidence in nurses and the profession is required.*
31. *Further guidance on Serious concerns which are more difficult to put right (FTP-3a), suggests that a small number of concerns 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.*
32. *Miss Jones has displayed some insight. This is shown by the very fact that Miss Jones has admitted that her fitness to practise is impaired and accepted all of the charges. Miss Jones also made full admissions to the concerns raised, in submissions provided on 23 May 2022.*
33. *However, Miss Jones' behaviour shows a pattern of repeat offending, despite sanctions having been imposed by the criminal justice system. Miss Jones has not reflected fully on her conduct or understood the impact that her conduct has on the profession and her trustworthiness as a registered professional.*
34. *Based on the above, the Parties agree that a reasonable and fully informed member of the public would expect a finding of impairment to follow and would be extremely concerned if a nurse was not found impaired due to the concerns raised. Any other outcome would undermine confidence in the profession. A finding of impairment is therefore necessary in the public interest.*

Sanction

35. *Whilst sanction is a matter for the panel's independent professional judgement, the Parties agree that a Striking-Off order is the most appropriate and proportionate sanction.*

36. *In reaching this agreement, the Parties considered the NMC's Sanctions Guidance ("the Guidance"), 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 satisfy 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 Miss Jones' interests.*

37. *The aggravating features of this case have been identified as follows:*

- *Pattern of offending, escalating in seriousness each time*

38. *No mitigating features of this case have been identified.*

39. *Considering each sanction in turn starting with the least restrictive:*

a) *No further action (SAN-3a) – The Parties agree that taking no further action would not adequately deal with the seriousness of the concerns raised and would fail to maintain public confidence in the profession.*

b) **Caution Order (SAN-3b)** – *The Parties agree that a Caution Order (would be insufficient to maintain public confidence in the profession and would be inadequate to mark the seriousness of the potential risk in this case.*

c) **Conditions of Practice Order (SAN-3c)** – *The Guidance says that a conditions of practice order is appropriate when the concerns can be remediated. In this case, there are no identifiable concerns capable of remediation. No assessment or training has been identified which could address the risk and seriousness. A conditions of practice order would not be in the public interest.*

d) **Suspension Order (SAN-3d)** – *Miss Jones' conduct is fundamentally incompatible with continuing to practise as a professional. Although Miss Jones has been practicing*

since 2000 seemingly without concern about her clinical practice, these are serious offences. Furthermore, the convictions relate to witness intimidation which involves the interference with the administration of justice, showing Miss Jones lacks integrity. The public would be appalled if Miss Jones was allowed to continue to practice in light of the seriousness of the offences. There have been a number of breaches and offences since she was first convicted in 2017 which demonstrates her disregard for the law and Court Orders. The reputation of the profession is more important than the fortunes of any individual member of those professions (SAN-2).

*e) **Striking-Off Order (SAN-3e)** - A striking-off order is the most appropriate sanction in this case. The regulatory concerns raise fundamental questions about the Registrant's professionalism, public confidence in the profession and in the NMC cannot be maintained if Miss Jones is not removed from the Register, this order is the only sanction which will be sufficient to maintain public confidence in the profession and professional standards. The courts have supported decisions to strike off healthcare professionals where there has been lack of probity, honesty or trustworthiness, notwithstanding that in other regards there were no concerns around the professional's clinical skills or any risk of harm to the public, e.g. **Parkinson v NMC [2010] EWHC 1898 (Admin)**, **Mvenge v GMC [2010] EWHC 3529 (Admin)**, **Ige v Nursing and Midwifery Council [2011] EWHC 3721 (Admin)**.*

Interim order

40. An interim order is required in this case. The interim order is necessary for otherwise in the public interest. The interim order should be for a period of 18 months in the event Miss Jones seeks to appeal against the panel's decision. The interim order should take the form of ~~an interim conditions of practice order~~ an interim suspension order.

41. The parties understand that this provisional agreement cannot bind a panel, and that the final decision on findings impairment and sanction is a matter for the panel. The parties understand that, in the event that a panel does not agree with this provisional agreement, the admissions to the charges and the agreed statement of facts set out above, may be placed before a differently constituted panel that is determining the allegation, provided that it would be relevant and fair to do so.'

Here ends the provisional CPD agreement between the NMC and Miss Jones. The provisional CPD agreement was signed by RCN Legal Service on behalf of Miss Jones and the NMC on 19 October 2022.

Decision and reasons on the CPD

The panel decided to accept the CPD which it considers is appropriate and reasonable. The allegation is proved and the panel, reaching its own conclusion determined that Miss Jones is impaired and the appropriate sanction is a striking-off order.

The panel heard and accepted the legal assessor's advice.

Ms Davies referred the panel to the 'NMC Sanctions Guidance' (SG) and to the 'NMC's guidance on Consensual Panel Determinations'. She reminded the panel that they could accept, amend or outright reject the provisional CPD agreement reached between the NMC and Miss Jones. Further, the panel should consider whether the provisional CPD agreement would be in the public interest. This means that the outcome must ensure an appropriate level of public protection, maintain public confidence in the profession and the regulatory body, and declare and uphold proper standards of conduct and behaviour.

After making her submissions, Ms Davies acknowledged that at paragraph 40 of the CPD agreement, a request is made for an interim conditions of practice order for 18 months. After questioning by the panel, Ms Davies agreed to contact the NMC reviewing lawyer to clarify what was being requested. Whilst the panel were in camera, Ms Davies informed the hearings coordinator that she had made contact with the NMC reviewing lawyer and the RCN and it was agreed by both parties that the submission is a mistake and should be amended to an 'interim suspension order' for 18 months. The panel acknowledged the submission and agreement between both parties and determined it would be fair and appropriate to accept the amendment.

Decisions on facts in the CPD

The panel noted that Miss Jones had admitted the facts of the charges in full. As such, it was satisfied that the charges are found proved by way of Miss Jones admission, as set out in the signed provisional CPD agreement.

Decision and reasons on impairment

The panel then went on to consider whether Miss Jones' fitness to practise is currently impaired. Whilst acknowledging the agreement between the NMC and Miss Jones, the panel has exercised its own independent judgement in reaching its decision on impairment.

The panel noted that the convictions relate to serious offences which occurred over a prolonged period of time and involved multiple victims. It acknowledged that Miss Jones breached her restraining order and determined that this evidenced an attitudinal problem and a disregard for authority. Whilst the panel acknowledged that the convictions did not relate to Miss Jones' practice as a registered nurse, it noted that registered professionals occupy a position of privilege and trust in society and they are expected to be professional at all times. In light of this, the panel determined that Miss Jones' conviction has breached a fundamental tenet of the nursing profession, brought the profession into disrepute and remains liable to do so in the future. In light of the information before it, including the pattern of repeated behaviour by Miss Jones and the absence of any developing insight, the panel determined that a finding of impairment is necessary on the grounds of public protection.

The panel further determined that a finding of impairment on public interest grounds is also required. It concluded that a reasonable and fully informed member of the public would expect a finding of impairment to follow and would be extremely concerned if a nurse was not found impaired due to the concerns raised. Any other outcome would undermine confidence in the profession.

In this regard, the panel endorsed paragraphs 18 to 34 of the CPD agreement.

Decision and reasons on sanction

Having found Miss Jones' fitness to practise 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. The decision on sanction is a matter for the panel independently exercising its own judgement.

The panel took into account the following aggravating feature:

- Pattern of offending, escalating in seriousness each time

The panel did not identify any mitigating factors in Miss Jones' case.

The panel first considered whether to take no action but concluded that this would be inappropriate in the light of the seriousness of Miss Jones' convictions. The panel decided that it would be neither proportionate nor in the public interest to take no further action.

It then considered the imposition of a caution order but again determined that, due to the seriousness of the convictions, as well the panel's finding of current impairment on public protection grounds, an order that does not restrict Miss Jones' practice would not be appropriate in the circumstances. The SG 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 found that Miss Jones' repeated behaviour and convictions were extremely serious and were not at the lower end of the spectrum. It therefore determined that a caution order would be neither proportionate nor in the public interest.

The panel next considered whether placing conditions of practice on Miss Jones' registration would be a sufficient and appropriate response. The panel is of the view that there are no practical or workable conditions that could be formulated, given the nature of the charges in this case. The convictions in this case do not relate to Miss Jones' practice as a nurse and/or her clinical ability and therefore is not something that can be addressed through retraining. Furthermore, the panel concluded that the placing of conditions on Miss Jones' registration would not adequately address the seriousness of this case and would not protect the public.

The panel then went on to consider whether a suspension order would be an appropriate sanction. The SG states that a suspension order may be appropriate where some of the following factors are apparent:

- *A single instance of misconduct but where a lesser sanction is not sufficient;*
- *No evidence of harmful deep-seated personality or attitudinal problems;*
- *No evidence of repetition of behaviour since the incident;*
- *The Committee is satisfied that the nurse or midwife has insight and does not pose a significant risk of repeating behaviour;*

Miss Jones' behaviour, as highlighted by her conviction and subsequent sentence, was a significant departure from the standards expected of a registered nurse and was not an isolated incident, to the extent that she continued to demonstrate a pattern of deliberate and persistent behaviour, evidencing a blatant disregard for Court orders.

The conduct, as highlighted by the facts found proved, was a significant departure from the standards expected of a registered nurse. The panel noted that the serious breach of the fundamental tenets of the profession evidenced by Miss Jones' actions is fundamentally incompatible with Miss Jones remaining on the register.

In this particular case, the panel determined that a suspension order would not be a sufficient, appropriate or proportionate sanction.

Finally, in looking at a striking-off order, the panel took note of the following paragraphs of the SG:

- *Do the regulatory concerns about the nurse or midwife raise fundamental questions about their professionalism?*
- *Can public confidence in nurses and midwives be maintained if the nurse or midwife is not removed from the register?*
- *Is striking-off the only sanction which will be sufficient to protect patients, members of the public, or maintain professional standards?*

Miss Jones' actions were significant departures from the standards expected of a registered nurse, and are fundamentally incompatible with her remaining on the register. The panel was of the view that the findings in this particular case demonstrate that Miss Jones' actions were serious and to allow her to continue practising would undermine public confidence in the profession and in the NMC as a regulatory body.

Balancing all of these factors and after taking into account all the evidence before it during this case, the panel agreed with the CPD that the appropriate and proportionate sanction is that of a striking-off order. Having regard to the matters it identified, in particular the effect of Miss Jones' actions in bringing the profession into disrepute by adversely affecting the public's view of how a registered nurse should conduct herself, the panel has concluded that nothing short of this would be sufficient in this case. The panel determined that the reputation of the profession is more important than the fortunes of any individual member of those professions.

The panel considered that this order was necessary to mark the importance of maintaining public confidence in the profession, and to send to the public and the profession a clear message about the standard of behaviour required of a registered nurse.

This will be confirmed to Miss Jones' in writing.

Decision and reasons on 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 in Miss Jones' own interest until the striking-off sanction takes effect. The panel heard and accepted the advice of the legal assessor.

The panel was satisfied that an interim order is necessary for the protection of the public and is otherwise in the public interest. The panel had regard to the seriousness of Miss Jones' convictions and the reasons set out in its decision for the substantive order in reaching the decision to impose an interim order.

The panel agreed with the CPD (as amended) that an interim conditions of practice order would not be appropriate or proportionate in this case, due to the reasons already identified in the panel's determination for imposing the substantive order. The panel therefore imposed an interim suspension order for a period of 18 months to cover any potential appeal period.

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

That concludes this determination.