

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

**Substantive Order Review Meeting  
Wednesday, 19 April 2023**

Virtual Meeting

**Name of Registrant:** Sally Rita Furlong

**NMC PIN** 73A2896E

**Part(s) of the register:** Registered Nurse - Mental Health  
Nursing RN2: Adult, level 2 (August 1976)  
RN3: Mental Health, level 1 (November 1979)

**Relevant Location:** Kent

**Type of case:** Lack of competence

**Panel members:** Derek McFaul (Chair, Lay member)  
Tricia Breslin (Lay member)  
Frances Clarke (Registrant member)

**Legal Assessor:** Gillian Hawken

**Hearings Coordinator:** Daisy Sims

**Order being reviewed:** Suspension order (12 months)

**Fitness to practise:** Impaired

**Outcome:** **Suspension order (12 months) to come into effect on 25 May 2023 in accordance with Article 30 (1)**

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

The panel noted at the start of this meeting that the Notice of Meeting had been sent to Mrs Furlong's registered address by recorded delivery and by first class post on 1 March 2023.

The panel had regard to the Royal Mail 'Customer Receipt' stamp which showed the Notice of Meeting was delivered to Mrs Furlong's registered address on 1 March 2023.

The panel took into account that the Notice of Meeting enclosed a copy of the substantive order previously made and that panel's reasons for making the order. The Notice also provided details of the review including the fact that this meeting will be held no sooner than 10 April 2023 and that this meeting will be heard virtually.

The panel accepted the advice of the legal assessor.

In the light of all of the information available, the panel was satisfied that Mrs Furlong has been served with notice of this meeting in accordance with the requirements of Rules 11A and 34 of the Nursing and Midwifery Council (Fitness to Practise) Rules 2004 (as amended) (the Rules).

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

The panel decided to impose a further suspension order for a period of 12 months. This order will come into effect at the end of 25 May 2023 in accordance with Article 30(1) of the Nursing and Midwifery Order 2001 (as amended) (the Order).

This is the first review of a substantive suspension order originally imposed for a period of 12 months by a Fitness to Practise Committee panel on 26 April 2022.

The current order is due to expire at the end of 25 May 2023.

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, between 16 January 2017 and 22 July 2018 failed to demonstrate the standards of knowledge, skill and judgement to practise without supervision as a band 6 nurse in that you:*

- 1) *Failed to adequately supervise and support a student nurse under your mentorship*
- 2) *Failed to send GP letters without delay*
- 3) *Sent a letter/fax to Patient A's GP surgery when the letter/fax should have referred to Patient H who was registered at a different GP surgery*
- 4) *Failed to adequately document Patient I's care plan*
- 5) *Failed to complete the core assessment for Patient B*
- 6) *Failed to document adequate details of Patient C's depot injection*
- 7) **NOT PROVED**
- 8) *Failed to promptly request a letter be sent to a patient following an assessment thereby incurred a 2 month delay*
- 9) **NOT PROVED**
- 10) **NOT PROVED**
- 11) *Failed to ensure a patient received their depot injection on the same day each month*

12) Requested a colleague administer a depot injection to Patient C on the wrong day

13) In relation to Patient R:

- a) Failed to document 'needs and risks'
- b) Failed to adequately document the 'mental state examination'
- c) Failed to obtain the patient's signature on the care plan
- d) Having failed to obtain the signature in charge 13 c) above, failed to document any reasons why the patient had not signed
- e) **NOT PROVED**
- f) Failed to adequately complete areas of the RIO notes, including:
  - i) Advance care/recovery plans
  - ii) Crisis and contingency plan
  - iii) Risk assessment

14) Failed to re-arrange a follow up appointment for Patient E

15) In relation to Patient F:

- a) **NOT PROVED**
- b) Failed to adequately complete areas of the RIO notes, including:
  - i) Behaviour
  - ii) Speech
  - iii) Presenting situation
  - iv) Current medication

16) Failed to arrange a home medic visit for Patient G

17) In relation to Patient Q:

- a) Failed to document any discussion with the medic regarding the CT scan results
- b) Failed to arrange a meeting with the patient to deliver their diagnosis

18) In relation to Patient N:

- a) *Failed to arrange an ECG*
- b) *Failed to arrange a home visit wellbeing check*

19) *Failed to arrange an appointment for a wellbeing check on Patient S*

20) *In relation to Patient T:*

- a) *Failed to conduct and/or document the core assessment*
- b) *Failed to adequately document the risk assessment*
- c) *Failed to adequately document the care plan*

21) *Failed to adequately document Patient L's 'mental state examination' without prompting and assistance*

22) **NOT PROVED**

23) *In relation to Patient HH:*

- a) *Failed to discuss medication with the doctor*
- b) *Failed to discharge the patient*

24) **NOT PROVED**

25) *In relation to Patient Z, failed to adequately document details including:*

- a) *Family and personal history*
- b) *Social history*
- c) *Formulation*
- d) *Pre-morbid history*

26) *Failed to complete the 'non-compliance' section of Patient S's notes*

*AND in light of the above, your fitness to practise is impaired by reason of your lack of competence.'*

The original panel determined the following with regard to impairment:

*'The panel next went on to decide if as a result of the lack of competence, Mrs Furlong's fitness to practise is currently impaired.*

*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 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 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 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) ....'*

*The panel determined that limbs a, b and c in the above test were engaged both in the past and likely to continue in the future.*

*Taking into account all of the evidence adduced in this case, the panel finds that patients were put at risk of serious harm as a result of Mrs Furlong's lack of competence. Mrs Furlong's lack of competence had breached the fundamental tenets of the nursing profession and therefore brought it into disrepute.*

*The panel noted that it had not received any evidence to suggest that Mrs Furlong has demonstrated an understanding of how her actions put patients at a risk of serious harm or how this impacted negatively on the reputation of the nursing profession. The panel found that Mrs Furlong has not demonstrated any insight or remorse. In addition, the panel has not received any information to suggest that Mrs Furlong has taken any steps to strengthen her practice. The panel bore in mind that Mrs Furlong does not appear to have worked in a clinical setting since the referral.*

*The panel was of the view that there is a high risk of repetition based on the lack of evidence of any insight, remorse, or evidence that she has strengthened her practice. On the basis of all the information before it, the panel decided that there is a risk to the public if Mrs Furlong was allowed to practise without restriction. The panel therefore determined that a finding of current impairment on public protection grounds is necessary.*

*The panel bore in mind that the overarching objectives of the NMC are to protect, promote and maintain the health safety and well-being of the public and patients, and 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.*

*The panel concluded that public confidence in the profession would be undermined if a finding of impairment were not made in this case and therefore finds Mrs Furlong's fitness to practise is also impaired on the grounds of public interest.*

*Having regard to all of the above, the panel was satisfied that Mrs Furlong's fitness to practise is currently impaired.'*

The original panel determined the following with regard to sanction:

*'Having found Mrs Furlong's 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 features:*

- Repetition of errors/omissions despite extensive support and assistance;*
- Conduct which put patients at risk of suffering serious harm;*
- The clinical incidents spanned an extended period of time;*
- Lack of insight into failings;*
- Unwillingness to change behaviour despite support and assistance.*

*The panel also took into account the following mitigating features:*

- No previous regulatory concerns.*

*The panel had regard to contextual factors, namely Mrs Furlong's allegations of bullying. However, the panel noted that no formal grievance had been submitted by Mrs Furlong. It therefore determined that this was not a mitigating feature in the circumstances of this case.*

*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 further action.*

*It then considered the imposition of a caution order but again determined that, due to the seriousness of the case, and the public protection issues identified, an order that does not restrict Mrs Furlong's 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 considered that Mrs Furlong’s lack of competence was not at the lower end of the spectrum and that a caution order would be inappropriate in view of the issues identified. 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 conditions of practice on Mrs Furlong’s registration would be a sufficient and appropriate response. The panel is mindful that any conditions imposed must be proportionate, measurable and workable. The panel noted that Mrs Furlong did not accept any fundamental issues with her practice, and that it did not receive any evidence of insight or remorse. In these circumstances, the panel was of the view that it had no information to suggest if Mrs Furlong would be willing to submit to and comply with conditions. The panel took into account the SG and the range and nature of the issues identified with Mrs Furlong’s practice as a band 6 CPN. The panel noted the support and assistance that had already been offered by her employer, some of which had been declined. The panel considered that given there had been no sustained improvements in Mrs Furlong’s practice, workable conditions could not be formulated, which would adequately protect the public and meet the public interest, even if there was a willingness to comply.*

*The panel bore in mind that in cases solely relating to a lack of competence, a striking off order is not available at this stage in NMC proceedings.*

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

- In cases where the only issue relates to the nurse or midwife’s lack of competence, there is a risk to patient safety if they were allowed to continue to practise even with conditions.*

*The panel noted that the concerns in this case do not relate to an isolated incident and there has been significant repetition. The panel considered that*

*some of the concerns within the lack of competence had the potential for patient harm and Mrs Furlong resigned before demonstrating that she had strengthened her practice. The panel also considered that it received no evidence that Mrs Furlong has demonstrated any insight or remorse. For these reasons, the panel determined that there remains a risk to patients from the short comings in Mrs Furlong's clinical practice associated with lack of competence.*

*Balancing all of these factors the panel has concluded that a suspension order would be the appropriate and proportionate sanction.*

*The panel noted the hardship that such an order may cause Mrs Furlong. However this is outweighed by the public interest in this case.*

*The panel considered that this order is 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.*

*The panel determined that a suspension order for a period of 12 months was appropriate in this case to mark the seriousness of the lack of competence and also to give Mrs Furlong the opportunity to reflect and undertake retraining should she wish to retain her place on the register.*

*At the end of the period of suspension, another panel will review the order. At the review the panel may revoke the order, or it may confirm the order, or it may replace the order with another order.*

*Any future panel reviewing this case would be assisted by:*

- Evidence of insight and reflection;*
- Evidence of training to address the specific issues identified with Mrs Furlong's practice;*
- Character references;*

- *Reference from a recent employer;*
- *Confirmation of Mrs Furlong's intention in relation to her return to nursing.'*

### **Decision and reasons on current impairment**

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

The panel has had regard to all of the documentation before it, including the NMC bundle and the written responses from Mrs Furlong which included:

- A phone message from Mrs Furlong to the NMC dated 31 May 2022.
- An email from Mrs Furlong to the NMC dated 28 October 2022.

In those brief communications Mrs Furlong stated that she was '*fully retired*', '*not fit to work*', and asked to '*be left alone*' by the NMC.

The panel heard and accepted the advice of the legal assessor. The case of *Abrahaem v GMC [2008] EWHC 183* (Admin) makes it clear that the panel must consider whether the concerns raised in the substantive hearing have been addressed and whether or not Mrs Furlong is able to persuade the panel that she now has the insight and understanding into her actions, and has demonstrated remediation of the deficiencies in her practice, so as to offer assurance that her fitness to practise is no longer impaired. Blake J said at paragraph 23:

*"In my judgment, the statutory context for the rule relating to reviews must mean the review has to consider whether all the concerns raised in the original finding of impairment...had been sufficiently addressed as to the panel's satisfaction. In practical terms there was a persuasive burden on the practitioner at a review to demonstrate*

*that he or she has fully acknowledged why past professional performance was deficient, that through insight, application, education, supervision or other achievement sufficiently addressed past impairment.”*

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 Mrs Furlong’s fitness to practise remains impaired.

The panel noted that the original panel found that Mrs Furlong had shown no insight and had taken no steps to strengthen her practice. At this meeting the panel determined that there has been no change in circumstances as the panel had received no submissions from Mrs Furlong. Therefore, the panel had no evidence before it that Mrs Furlong has shown insight or any evidence of her strengthening her practice.

The original panel determined that Mrs Furlong was liable to repeat matters of the kind found proved. Today’s panel has received no new information to suggest that this risk has changed. In light of this the panel determined that Mrs Furlong is still liable to repeat matters of the kind found proved. The panel therefore decided that a finding of continuing impairment is necessary on the grounds of public protection.

The panel has borne in mind that its primary function is 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 also required.

For these reasons, the panel finds that Mrs Furlong’s fitness to practise remains impaired.

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

Having found Mrs Furlong’s 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 did consider allowing the order to lapse. The panel considered the following NMC Guidance (REV-3H) '*Allowing orders to expire when a nurse or midwife's registration will lapse*':

*'The nurse, midwife or nursing associate will need to give the panel a clear explanation of their plans for the future away from nursing. Such information is only likely to be available if the nurse is in contact with us so it will be important for panel's to consider if the nurse is fully engaging with the process before deciding to take this option'.*

It considered the brief correspondence from Mrs Furlong dated 31 May 2022 and 2 October 2022 in which she indicated that she does not want to work as a registered nurse again and that she is retired. However, the panel determined that there was no clear explanation provided in this correspondence. Furthermore, the panel noted that Mrs Furlong has not engaged with the NMC since October 2022, and determined that she has not been fully engaging in the process as outlined in the Guidance above.

Therefore, the panel concluded that to allow for the order to lapse is not appropriate at this stage.

It then considered the imposition of a caution order but again determined that, due to the seriousness of the case, and the public protection issues identified, an order that does not restrict Mrs Furlong's practice would not be appropriate in the circumstances. The panel decided that it would be neither proportionate nor in the public interest to impose a caution order.

The panel next considered whether a conditions of practice on Mrs Furlong's registration would be a sufficient and appropriate response. The panel is mindful that any conditions imposed must be proportionate, measurable and workable. The panel bore in mind the seriousness of the facts found proved at the original hearing and concluded that a conditions of practice order would not adequately protect the public or satisfy the public

interest. The panel was not able to formulate conditions of practice that would adequately address the concerns relating to Mrs Furlong's lack of competence. The panel has received information that Mrs Furlong does not intend to return to practise as a nurse. In view of Mrs Furlong's briefly stated indication that she does not intend to return to nursing, her lack of engagement with the NMC, the panel considered that any conditions of practice order would not be workable and would serve no useful purpose.

The panel considered the imposition of a further period of suspension. It was of the view that a suspension order would allow Mrs Furlong further time to fully engage with the NMC and to provide further detail in relation to her intention to retire from nursing practice or to reflect on her previous failings.

The panel determined therefore that a suspension order is the appropriate sanction which would continue to both protect the public and satisfy the wider public interest. Accordingly, the panel determined to impose a suspension order for the period of 12 months would provide Mrs Furlong with an opportunity to properly engage with the NMC. It considered this to be the most appropriate and proportionate sanction available.

This suspension order will take effect upon the expiry of the current suspension order, namely the end of 25 May 2023 in accordance with Article 30(1).

Before the end of the period of suspension, another panel will review the order. At the review hearing the panel may revoke the order, or it may confirm the order, or it may replace the order with another order. If Mrs Furlong provides more detailed information in line with the NMC's Guidance around her intention to retire, she can ask for an early review of this matter.

Any future panel reviewing this case would be assisted by:

- Mrs Furlong's engagement with the NMC by providing clear indications of her future intentions.

This will be confirmed to Mrs Furlong in writing.

That concludes this determination.