# Nursing and Midwifery Council Fitness to Practise Committee

# Substantive Meeting Monday, 18 December 2023 – Wednesday, 20 December 2023

Virtual Meeting

Name of Registrant: Parul Shafl

**NMC PIN** 07H3409E

Part(s) of the register: Registered Nurse – Sub Part 1

Adult Nursing (Level 1) – 14 February 2008

Relevant Location: Belfast

Type of case: Misconduct

Panel members: Derek McFaull (Chair, Lay member)

Catherine Devonport (Registrant member)

Alison Hayle (Lay member)

Legal Assessor: Jayne Salt

Hearings Coordinator: Amanda Ansah

Facts proved: All Charges

Facts not proved: None

Fitness to practise: Impaired

Sanction: Striking-off order

Interim order: Interim suspension order (18 months)

## Decision and reasons on service of Notice of Meeting

The panel was informed at the start of this meeting that that the Notice of Meeting had been sent to Mrs Shafl's registered email address by secure email on 7 November 2023.

The panel accepted the advice of the legal assessor.

The panel took into account that the Notice of Meeting provided details of the allegation, the time, dates and the fact that this meeting was heard virtually.

In the light of all of the information available, the panel was satisfied that Mrs Shafl 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).

# **Details of charges**

That you, a registered nurse:

- 1) Submitted claim forms to Medlocums agency for shifts you had not worked for the following dates:
  - a) 20 May 2019;
  - b) 24 May 2019;
  - c) 25 May 2019
- 2) Your actions in charge 1 above were dishonest in that you intended to claim monies not owed to you.
- 3) Submitted a claim form for 20 May 2019 which had a signature purported to be that of Colleague A.

- 4) Your actions in charge 3 above were dishonest in that you knew Colleague A had not signed the claim form.
- 5) Submitted a claim form for 24 May 2019 which had a signature purported to be that of Colleague B.
- 6) Your actions in charge 5 above were dishonest in that you knew Colleague B had not signed the claim form.
- 7) Submitted a claim form for 25 May 2019 which had a signature purported to be that of Colleague C.
- 8) Your actions in charge 7 above were dishonest in that you knew Colleague C had not signed the claim form.
- 9) During an investigation into criminal conduct alleged against you, failed to cooperate with a police investigation in that you:
  - a) Cancelled appointments to attend for police interview on 3 occasions between 19 July 2021 and 22 August 2021;
  - b) Failed to contact the police to re-arrange an interview;
  - c) Failed to provide the police with your up to date contact information.

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

#### **Background**

The charges arose whilst Mrs Shafl was employed as a Band 5 registered nurse by Medlocums ('the Agency'), working as an agency nurse at the Belfast Health and Social Care Trust ('the Trust'). Mrs Shafl was scheduled to work at the Trust on 20 and 25 May 2019. Allegedly, she did not attend for work on those dates but submitted timesheets for them. Mrs Shafl is also alleged to have claimed for work on 24 May 2019, even though she was not scheduled to work that day and she did not attend for work on that date. The timesheets appeared to have been counter-signed by various members of

staff at the Trust. However, the purported counter signatories have since confirmed that they did not counter-sign the timesheets and on 2 of the occasions the counter signatories could not have signed as they were not at work.

The matters were referred to the police, who decided to take no further action because no loss was incurred to either the Trust or the Agency. NHS Counter Fraud also took no further action because Mrs Shafl was employed by a third party at the time. On 18 June 2021, the NMC received a further referral from an agency called Altrix regarding Mrs Shafl in respect of similar concerns between May 2021 and June 2021. The matter was reported to the police who commenced an investigation. Mrs Shafl failed to cooperate with the police investigation. She initially agreed to attend for a police interview on a voluntary basis. However, she allegedly cancelled appointments on 3 occasions between 19 July 2021 and 22 August 2021 and then ceased communication with the police. The police had been unable to locate Mrs Shafl who was circulated as wanted in connection with this matter. She was arrested and interviewed on 8-9 July 2023, and she is bailed to return to the police station on 9 January 2024.

Mrs Shafl's response to the Agency when they informed her that the payments had been rejected was a brief message stating that she had told them that it was a genuine mistake, an error and there was no way she was seeking payments for work she had never done. She had been unresponsive to the Agency since that time and had not adequately explained the falsified signatures. The NMC have attempted to contact Mrs Shafl using her registered email address. The only response received from Mrs Shafl was an email dated 18 August 2019. She reiterated that it was an error, a mistake which she had explained to the Agency.

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

In reaching its decisions on the disputed facts, the panel took into account all the documentary evidence in this case together with the representations made by the NMC and very limited responses from Mrs Shafl.

The panel was aware that the burden of proof rests on the NMC, and that the standard of proof is the civil standard, namely the balance of probabilities. This means that a fact will be proved if a panel is satisfied that it is more likely than not that the incident occurred as alleged.

The panel had regard to the written statements of the following witnesses on behalf of the NMC:

• Witness 1: Colleague A

Witness 2: Colleague B

Witness 3: Colleague C

Witness 4: Colleague D

Witness 5: Colleague E

Before making any findings on the facts, the panel heard and accepted the advice of the legal assessor, which included reference to *Ivey v Genting Casinos* UKSC 67 (UK) *Ltd T/A Crockfords*, *O'Brien v Chief Constable of South Wales Police* [2005] UKHL 26 and *Dutta v GMC* [2020] EWHC 1974 Admin. It considered the documentary evidence provided by the NMC.

The panel then considered each of the disputed charges and made the following findings:

## Charge 1

"Submitted claim forms to Medlocums agency for shifts you had not worked for the following dates:

- a) 20 May 2019;
- b) 24 May 2019;
- c) 25 May 2019."

#### These charges are found proved.

In reaching this decision, the panel took into account the evidence provided by Witness 4 in his witness statement. Witness 4 provided a copy of the electronic roster which details that Mrs Shafl was scheduled to work on 20 and 25 May 2019, but she did not attend on those dates. Indeed, a replacement nurse attended on 25 May 2019 to cover Mrs Shafl's shift. The panel noted that the rota provided within the documentary evidence indicated that Mrs Shafl was not scheduled to work on 24 May 2019, however, Witness 4 provided evidence that she submitted claims for all three dates. This evidence is by way of the timesheets provided to the Agency dated 20 May 2019, 24 May 2019, and 25 May 2019 signed by Mrs Shafl.

The panel further noted Mrs Shafl's response to this charge by way of her email dated 18 August 2019. She stated that: "it was an error, it was a mistake which I have explained to the agency, this happened on the last day of the revalidation date." Her explanation to the Agency was by way of a text message sent on WhatsApp in which she stated: "I will not comment, as I have told you and explained it was a genuine mistake an error and there was no way I was seeking payments for the work I have never done".

The panel noted that Witness 4's statement was supported by the strong electronic evidence he provided by way of the electronic rosters which detail when Mrs Shafl was scheduled to work. There was no other formal response from Mrs Shafl in respect of this charge apart from the text message she sent to the Trust on 5 January 2020, and the response to the NMC dated 18 August 2019 stating that she made a "genuine mistake".

The panel determined that on the balance of probabilities, it is more likely than not that Mrs Shafl submitted claim forms for shifts she had not worked on 20, 24 and 25 May 2019. The panel therefore finds these charges proved.

## Charge 2

"Your actions in charge 1 above were dishonest in that you intended to claim monies not owed to you."

## This charge is found proved.

In reaching this decision, the panel took into account the evidence it considered in the charges above. The panel was of the view that when relying on all of the evidence outlined in the charges above, an ordinary decent person would be of the view that Mrs Shafl submitted claims on 3 separate dates and was unlikely to have made the same mistake 3 times.

The panel noted that Mrs Shafl has previously been found to be dishonest around similar issues in 2016, any member of the public would be of the view that Mrs Shafl should have had a heightened awareness of making sure that her actions were honest. Evidence presented to the panel was that these claim forms were presented by Mrs Shafl for payment for 3 dates she had not worked and had contained counter-signatures from supervisors which had been evidenced as false. The panel was of the view that in light of this previous dishonesty, a defence of her actions in this case being a "genuine mistake" is difficult to accept. The panel was of the view that Mrs Shafl's responses sought to shift the blame for her actions, and the panel did not accept that she had made a "genuine mistake" as she claimed.

The panel determined that Mrs Shafl's actions demonstrated a pattern of behaviour and were not simply a mistake. It noted her response that this was a mistake as a result of the pressures she faced in preparing for revalidation. The panel acknowledged that she may have felt under pressure, but revalidation is something that every registered nurse has to complete and should not cause such serious mistakes to be made.

The panel determined that an ordinary member of the public would think that Mrs Shafl's actions were dishonest because of the repetition on three separate dates where Mrs Shafl submitted claim forms for shifts she did not work. The panel therefore finds these charges proved.

## Charge 3

"Submitted a claim form for 20 May 2019 which had a signature purported to be that of Colleague A."

## This charge is found proved.

In reaching this decision, the panel noted the timesheet Mrs Shafl provided for a shift worked on 20 May 2019. On the timesheet, Witness 1 (Colleague A)'s name had been entered as authorised approver and there is an illegible signature in the authorised approver's signature box. Witness 1 (Colleague A)'s statement to the NMC stated that this signature did not belong to him. He further stated "I didn't sign this timesheet. I wasn't rostered as working on this day, and wasn't present at work". Witness 1 (Colleague A) provided a copy of the rota dated 21 May 2019, showing that he was not at work on this day, when his signature is dated.

The panel noted the evidence of Witness 4 (Colleague D) and Witness 5 (Colleague E) is that this timesheet was submitted by Mrs Shafl, and there has been no information provided by her to challenge this. Therefore, the panel has no reason to challenge the validity of the timesheet at this stage.

When considering this evidence, the panel was satisfied that Mrs Shafl had submitted a claim form for 20 May 2019 which had a signature purported to be that of Witness 1 (Colleague A)'s own. The panel therefore finds this charge proved.

# Charge 4

"Your actions in charge 3 above were dishonest in that you knew Colleague A had not signed the claim form."

## This charge is found proved.

In reaching this decision, the panel took into account the evidence it considered in the charges above. The panel was of the view that when relying on all of the evidence outlined in the charges above, an ordinary decent person would be of the view that Mrs Shafl submitted a claim form which she knew had not been signed by Colleague A, and therefore her actions were dishonest.

The panel was of the view that in light of Mrs Shafl's previous dishonesty, a defence of her actions in this case being a "genuine mistake" is difficult to accept.

The panel noted Mrs Shafl's response that this was a mistake as a result of the pressures she faced in preparing for revalidation. The panel acknowledged that she may have felt under pressure, but revalidation is something that every registered nurse has to complete and should not cause such serious mistakes to be made.

The panel determined that an ordinary member of the public would think that Mrs Shafl's actions were dishonest because she knew she did not work on this day yet submitted a timesheet for it attempting to forge the signature of Witness 1 (Colleague A) in order to have the timesheet approved and claim money for it. The panel therefore finds this charge proved.

## Charge 5

"Submitted a claim form for 24 May 2019 which had a signature purported to be that of Colleague B."

#### This charge is found proved.

In reaching this decision, the panel noted the timesheet dated 25 May 2019 which Mrs Shafl provided for a shift worked on 24 May 2019. On this timesheet, Witness 2 (Colleague B)'s name had been entered as authorised approver and her signature had been entered in the approved signature box. Witness 2 (Colleague B)'s statement to the

NMC stated that this signature did not belong to her. She further stated: "I wasn't rostered to work on 25 May 2019, the date which I supposedly signed Ms Shafl's timesheet, as I was on annual leave and wasn't in the country". Witness 2 (Colleague B) provided a copy of the rota dated 25 May 2019, showing that she was not at work on this day, when her signature is dated. The panel further noted that Witness 2 (Colleague B) also stated that she is authorised to countersign timesheets and does so on a daily basis, however she had never been asked by Mrs Shafl to sign a timesheet for her.

The panel noted the evidence of Witness 4 (Colleague D) and Witness 5 (Colleague E) is that this timesheet was submitted by Mrs Shafl, and there has been no information provided by her to challenge this. Therefore, the panel has no reason to challenge the validity of the timesheet at this stage.

When considering this evidence, the panel was satisfied that Mrs Shafl had submitted a claim form for 24 May 2019 which had a signature purported to be that of Witness 2 (Colleague B). The panel therefore finds this charge proved.

#### Charge 6

"Your actions in charge 5 above were dishonest in that you knew Colleague B had not signed the claim form."

## This charge is found proved.

In reaching this decision, the panel took into account the evidence it considered in the charges above. The panel was of the view that when relying on all of the evidence outlined in the charges above, an ordinary decent person would be of the view that Mrs Shafl submitted a claim form which she knew had not been signed by Colleague B, and therefore her actions were dishonest.

The panel was of the view that in light of Mrs Shafl's previous dishonesty, a defence of her actions in this case being a "genuine mistake" is difficult to accept.

The panel noted Mrs Shafl's response that this was a mistake as a result of the pressures she faced in preparing for revalidation. The panel acknowledged that she may have felt under pressure, but revalidation is something that every registered nurse has to complete and should not cause such serious mistakes to be made.

The panel determined that an ordinary member of the public would think that Mrs Shafl's actions were dishonest because she knew she did not work on this day yet submitted a timesheet for it attempting to forge the signature of Witness 2 (Colleague B) in order to have the timesheet approved and claim money for it. The panel therefore finds this charge proved.

## Charge 7

"Submitted a claim form for 25 May 2019 which had a signature purported to be that of Colleague C."

## This charge is found proved.

In reaching this decision, the panel noted the timesheet Mrs Shafl provided for a shift worked on 25 May 2019. On the timesheet, Witness 3 (Colleague C)'s name had been entered as authorised approver and there is an illegible signature in the authorised approver's signature box. Witness 3 (Colleague C)'s statement to the NMC stated that this signature did not belong to her.

The panel further noted that Witness 3 (Colleague C) also stated that she was interviewed by Witness 4 (Colleague D) in relation to this matter. She provided a local statement in which she stated: "I [Colleague C] can confirm that the signature on the timesheet for the agency nurse in question is not my true signature. I have been shown this timesheet by [Witness 4 (Colleague D)] and confirm that I did not sign this timesheet for the shift as I was on annual leave at this time."

The panel noted the evidence of Witness 4 (Colleague D) and Witness 5 (Colleague E) is that this timesheet was submitted by Mrs Shafl, and there has been no information provided by her to challenge this. Therefore, the panel has no reason to challenge the validity of the timesheet at this stage.

When considering this evidence, the panel was satisfied that Mrs Shafl had submitted a claim form for 25 May 2019 which had a signature purported to be that of Witness 3 (Colleague C)'s own. The panel therefore finds this charge proved.

## Charge 8

"Your actions in charge 7 above were dishonest in that you knew Colleague C had not signed the claim form."

#### This charge is found proved.

In reaching this decision, the panel took into account the evidence it considered in the charges above. The panel was of the view that when relying on all of the evidence outlined in the charges above, an ordinary decent person would be of the view that Mrs Shafl submitted a claim form which she knew had not been signed by Colleague C, and therefore her actions were dishonest.

The panel was of the view that in light of Mrs Shafl's previous dishonesty, a defence of her actions in this case being a "genuine mistake" is difficult to accept.

The panel noted Mrs Shafl's response that this was a mistake as a result of the pressures she faced in preparing for revalidation. The panel acknowledged that she may have felt under pressure, but revalidation is something that every registered nurse has to complete and should not cause such serious mistakes to be made.

The panel determined that an ordinary member of the public would think that Mrs Shafl's actions were dishonest because she knew she did not work on this day yet submitted a timesheet for it attempting to forge the signature of Witness 3 (Colleague C)

in order to have the timesheet approved and claim money for it. The panel therefore finds this charge proved.

## Charge 9a

"During an investigation into criminal conduct alleged against you, failed to cooperate with a police investigation in that you:

 a) Cancelled appointments to attend for police interview on 3 occasions between 19 July 2021 and 22 August 2021."

## This charge is found proved.

In reaching this decision, the panel took into account the email from the Police DC 6 to the NMC dated 6 December 2022 stating:

"I can confirm that attempts have been made to contact Shafi on her mobile number, email addresses linked to her, enquires at her last known home address and previous home addresses.

Also 3 appointments have been made for to attend the police station for a voluntary appointments, these were arranged via her solicitor with her, as follows:

19/7/22 – Shafi cancelled due to government advice not to travel due to the extreme heat

8/8/22 - Shafi cancelled

22/8/22 - Shafi cancelled stating she had a hospital appointment.

Shafi has never made direct contact with me."

The panel noted that it did not have a formal witness statement from DC 6 however it accepts the email dated 6 December 2022 as contemporaneous evidence, as it did not have any information or a response from Mrs Shafl to challenge this evidence or provide an explanation as to why these appointments were cancelled. The panel therefore finds this charge proved.

#### Charges 9b and 9c

"During an investigation into criminal conduct alleged against you, failed to cooperate with a police investigation in that you:

- b) Failed to contact the police to re-arrange an interview;
- c) Failed to provide the police with your up-to-date contact information.;"

## These charges are found proved.

In reaching this decision, the panel took into account the evidence it considered in the charge above. It also considered the email chain between DC 6 and the NMC dated between 1 February 2022 and 6 December 2022. The correspondence between these dates shows sporadic contact between the police and the NMC and throughout this email trail, it is clear that the Police were struggling to locate Mrs Shafl following her non-attendance at her last interview scheduled for 22 August 2022. The Police were seeking to locate Mrs Shafl but they did not have any contact details for her.

It is clear from the email trail that Mrs Shafl failed to rearrange an interview with the Police as she had not by then been interviewed. She has also not provided any up-to-date contact information as the Police are seeking to locate her. The Police asked the NMC for Mrs Shafl's contact details and upon receiving them, then declared her wanted. The panel was of the view that had Mrs Shafl co-operated with the Police investigation, she would not have been declared wanted.

The panel therefore finds these charges proved.

#### Fitness to practise

Having reached its determination on the facts of this case, the panel then moved on to consider, whether the facts found proved amount to misconduct and, if so, whether Mrs Shafl's fitness to practise is currently impaired. There is no statutory definition of fitness

to practise. However, the NMC has defined fitness to practise as a registrant's ability to practise kindly, safely and professionally.

The panel, in reaching its decision, has recognised its statutory duty to protect the public and maintain public confidence in the profession. Further, it bore in mind that there is no burden or standard of proof at this stage and it has therefore exercised its own professional judgement.

The panel adopted a two-stage process in its consideration. First, the panel must determine whether the facts found proved amount to misconduct. Secondly, only if the facts found proved amount to misconduct, the panel must decide whether, in all the circumstances, Mrs Shafl's fitness to practise is currently impaired as a result of that misconduct.

## Representations on misconduct and impairment

In coming to its decision, the panel had regard to the case of *Roylance v GMC (No. 2)* [2000] 1 AC 311 which defines misconduct as a 'word of general effect, involving some act or omission which falls short of what would be proper in the circumstances.'

The NMC invited the panel to take the view that the facts found proved amount to misconduct. The panel had regard to the terms of 'The Code: Professional standards of practice and behaviour for nurses and midwives (2015)' (the Code) in making its decision.

The NMC identified specific, relevant standards where Mrs Shafl's actions amounted to misconduct. It submitted that Mrs Shafl's conduct detailed in charges 1-9 fell far short of what is expected of a registered nurse. The facts amount to misconduct and the NMC consider the misconduct serious. Honesty and integrity are the cornerstones of the nursing profession and submitting timesheets for shifts Mrs Shafl did not attend for financial gain is a significant departure from the standards expected of a registered nurse.

Mrs Shafl submitted claim forms in an attempt to benefit financially from monies not owed to her by falsifying the signatures of 3 colleagues on 20, 24 and 25 May 2021. Mrs Shafl has further failed to cooperate with the police in respect of their investigation into other similar concerns. She has also failed to respond to contact from the NMC. Her behaviour raises concerns about her integrity and trustworthiness as a registered professional and therefore restrictive action is necessary in order to maintain public confidence in the profession.

The NMC requires the panel to bear in mind its overarching objective to protect the public and the wider public interest. This included the need to declare and maintain proper standards and maintain public confidence in the profession and in the NMC as a regulatory body. The panel has referred to the case of *Council for Healthcare Regulatory Excellence v (1) Nursing and Midwifery Council (2) Grant* [2011] EWHC 927 (Admin).

The NMC invited the panel to find Mrs Shafl's fitness to practise impaired on public interest grounds only. The NMC's guidance explains that impairment is not defined in legislation but is a matter for the Fitness to Practise Committee to decide. When determining whether a registrant's fitness to practice is impaired, the questions outlined by Dame Janet Smith in the 5th Shipman Report (as endorsed in the case of *CHRE v NMC and Grant*) are instructive. Those questions were:

- 1. has [the Registrant] in the past acted and/or is liable in the future to act as so to put a patient or patients at unwarranted risk of harm; and/or
- 2. has [the Registrant] in the past brought and/or is liable in the future to bring the [nursing] profession into disrepute; and/or
- 3. has [the Registrant] in the past committed a breach of one of the fundamental tenets of the [nursing] profession and/or is liable to do so in the future and/or
- 4. has [the Registrant] in the past acted dishonestly and/or is liable to act dishonestly in the future.

The NMC submit that questions 2, 3 and 4 can be answered in the affirmative in this case as Mrs Shafl's past actions have brought the profession into disrepute. It submitted that trust and confidence are the bedrock of the nursing profession and members of the public need to have confidence that they and their loved ones will be treated by a nurse they can put their confidence and trust in. Deliberately breaching that expectation of trust will understandably cause patients to distrust members of the profession.

The NMC further submitted that failing to cooperate with the police in their investigation will also affect the public's confidence and trust. Mrs Shafl's actions demonstrate a flagrant disregard for and departure from the standards expected of a registered nurse. All applicable versions of the NMC Code of Conduct establish that upholding the reputation of the profession are fundamental requirements of any nurse. Mrs Shafl has a duty to promote professionalism and uphold the reputation of the nursing profession. She also has a duty to act with honesty and integrity in any financial dealings. As Mrs Shafl breached these aspects of the Code of Conduct by dishonestly providing fabricated claim forms for financial gain, she has thereby breached fundamental tenets of the profession.

The NMC submitted that at a local investigation Mrs Shafl stated that the incidents were an error with no intention to falsely claim but she has not addressed the falsified signatures. Mrs Shafl has not indicated any remorse, reflection or insight into her actions or provided any material concerning the impact of her actions on members of the public or the nursing profession. It submitted that the risk of repetition of dishonesty conduct is high.

The NMC referred the panel to its guidance 'Can the concern be addressed' (FTP-13a) which states that:

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

• dishonesty, particularly if it was serious and sustained over a period of time, or directly linked to the nurse, midwife or nursing associate's practice."

The NMC noted that dishonesty by its nature is very difficult to remediate. Mrs Shafl submitted claim forms for 3 shifts she did not attend and falsified signatures of 3 of her colleagues. This conduct has fallen short of the standards the public expect of professionals caring for them, so that public confidence in the nursing and midwifery professions could be undermined.

The second question to ask is whether the concern has been addressed. Mrs Shafl has not provided any sufficient response to the NMC to address the concerns and therefore has not demonstrated any insight or remorse.

The final question to ask is whether it is unlikely that Mrs Shafl's actions will be repeated. In the absence of genuine remorse, detailed reflection, full insight, and remediation there remains a high risk that Mrs Shafl's conduct is likely to be repeated if she were to be permitted to practise without restriction.

The NMC referred the panel to its guidance on seriousness. Serious concerns include those based on public confidence and professional standards (FTP-3c). The guidance states that "Sometimes we may need to take regulatory action against a nurse, midwife or nursing associate because of our objectives to promote and maintain professional standards and the public's trust and confidence in nurses, midwives and nursing associates. We may also need to take action in cases where the concerns were not directly related to the care the nurse, midwife or nursing associate provided to people, but which call into question the basics of their professionalism".

It is the NMC's position that the allegations are serious as they involved dishonesty. Mrs Shafl had been rostered to work on 20 and 25 May 2019 however had not turned up for these shifts. The Agency were looking into some of her claims for work as they did not appear correct and when they contacted the Trust, they were informed that she had not attended on 20 or 25 May 2019. It was also discovered that a claim had been put in by Mrs Shafl for working on 24 May 2019 however not only had she not attended on that day, but she was not even rostered to work then.

The NMC submitted that Mrs Shafl's deception appears to be complex and premeditated. This level of dishonesty raises questions as to her integrity and ability to act in a professional manner and in the interests of patients under her care. Therefore, restrictive action needs to be taken. The NMC considers there is a risk of repetition of dishonest behaviour which could undermine the public's trust and confidence in nurses, midwives and nursing associates should she be permitted to practise as a registered nurse without some form of restriction. Due to the nature and seriousness of the allegations in this matter, the NMC consider that there is a public interest requirement in a finding of impairment being made in this case to declare and uphold proper standards of conduct and behaviour.

It is the NMC's case that a finding of impairment on public interest grounds is made out due to the type of misconduct. The actions of Mrs Shafl are a serious departure from the standards expected of a registered nurse. The public must be able to trust a nursing professional with the care of themselves or loved ones and the type of misconduct reflects badly on the nursing profession.

The panel had no representations before it from Mrs Shafl.

The panel accepted the advice of the legal assessor which included reference to a number of relevant judgments. These included: *Roylance v General Medical Council* (No 2) [2000] 1 A.C. 311, *Nandi v General Medical Council* [2004] EWHC 2317 (Admin), and *General Medical Council v Meadow* [2007] QB 462 (Admin).

#### **Decision and reasons on misconduct**

When determining whether the facts found proved amount to misconduct, the panel had regard to the terms of the Code.

The panel was of the view that Mrs Shafl's actions did fall significantly short of the standards expected of a registered nurse, and that Mrs Shafl's actions amounted to a breach of the Code. Specifically:

## '10 Keep clear and accurate records relevant to your practice

This applies to the records that are relevant to your scope of practice. It includes but is not limited to patient records.

To achieve this, you must:

10.3 complete records accurately and without any falsification...

## 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...
- 20.4 keep to the laws of the country in which you are practising

# 21 Uphold your position as a registered nurse, midwife or nursing associate

To achieve this, you must:

21.3 act with honesty and integrity in any financial dealings you have with everyone you have a professional relationship with...'

The panel appreciated that breaches of the Code do not automatically result in a finding of misconduct. However, the panel was of the view that Mrs Shafl's dishonest actions in submitting claim forms for shifts she knew had not worked and forging signatures of her colleagues to have these forms approved, were very serious failings that breached the fundamental tenets of the profession.

The panel found that Mrs Shafl's actions did fall seriously short of the conduct and standards expected of a nurse and amounted to misconduct.

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

The panel next went on to decide if as a result of the misconduct, Mrs Shafl's fitness to practise is currently impaired.

In coming to its decision, the panel had regard to the Fitness to Practise Library, updated on 27 March 2023, which states:

'The question that will help decide whether a professional's fitness to practise is impaired is:

"Can the nurse, midwife or nursing associate practise kindly, safely and professionally?"

If the answer to this question is yes, then the likelihood is that the professional's fitness to practise is not 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. To justify that trust, nurses must be honest and open and act with integrity. 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 *CHRE v NMC and 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 misconduct, deficient professional performance, adverse health, conviction, caution or

determination show that his/her/their fitness to practise is impaired in the sense that S/He/They:

- 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.'

Whilst the panel noted that patients were not directly put at risk or caused physical or emotional harm as a result of Mrs Shafl's misconduct, the panel was of the view that Mrs Shafl's failure to attend work on these days could have put patients at an unwarranted risk of harm. Further, Mrs Shafl has demonstrated that she has a fundamentally dishonest personality having undergone previous regulatory concerns of similar type of dishonest offences. With no evidence of remorse, remediation or insight the panel could not be satisfied that someone with this dishonest character would not in the future put patients at unwarranted risk of harm. The panel therefore found that limb a) of the test is engaged.

The panel determined that Mrs Shafl's misconduct had breached the fundamental tenets of the nursing profession and therefore brought its reputation into disrepute. It was satisfied that confidence in the nursing profession would be undermined if its regulator did not find charges relating to dishonesty extremely serious. The panel therefore determined that limbs b), c), and d) of the test were also engaged.

Regarding insight, the panel had no evidence before it that demonstrated Mrs Shafl had any insight into her actions. The panel has determined that Mrs Shafl has repeated dishonest behaviour similar to that for which she had previous regulatory findings against her. The panel noted that Mrs Shafl is currently under Police investigation for dishonest concerns. The panel was therefore not satisfied that Mrs Shafl's dishonest behaviour would not be repeated again in the future. The panel had no evidence before it that Mrs Shafl had demonstrated any remediation or remorse into her behaviour. The panel noted that dishonesty is difficult to remediate, however Mrs Shafl had not demonstrated any attempt to address it. The only response received from Mrs Shafl was an email dated 18 August 2019 in which she describes the concerns as a genuine mistake. Mrs Shafl did not accept her behaviour neither did she demonstrate that she understood how her actions impacted on patients, colleagues, and the wider profession.

The panel was of the view that there is a risk that Mrs Shafl could bring patients into an unwarranted risk of harm because of her dishonest behaviour. Mrs Shafl has demonstrated that she has a fundamentally dishonest personality at the core and such behaviour could repeat itself when dealing with patients directly. The panel therefore finds Mrs Shafl's fitness to practise impaired on public protection grounds.

The panel bore in mind that the overarching objectives of the NMC; to protect, promote and maintain the health, safety, and well-being of the public and patients, and to uphold and protect the wider public interest. This 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 determined that a finding of impairment on public interest grounds is required to declare and uphold proper standards of conduct and behaviour. The panel determined that Mrs Shafl's dishonest behaviour could undermine the public's trust and confidence in nurses, midwives and nursing associates. 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 Shafl'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 Shafl's fitness to practise is currently impaired.

#### Sanction

The panel has considered this case very carefully and has decided to make a striking-off order. It directs the registrar to strike Mrs Shafl off the register. The effect of this order is that the NMC register will show that Mrs Shafl has been struck-off the 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. The panel accepted the advice of the legal assessor.

#### Representations on sanction

The panel noted that in the Notice of Meeting, dated 7 November 2023, the NMC had advised Mrs Shafl that it would seek the imposition of a striking-off order if it found her fitness to practise currently impaired.

The NMC submitted that Mrs Shafl's conduct involved dishonesty for the purposes of personal financial gain by providing claim forms with falsified signatures of her colleagues for shifts she did not work, which is serious. Mrs Shafl has further failed to cooperate with the police in their investigation in respect of similar concerns which have since been raised. It further submitted that the dishonesty was not a single isolated incident. There were 3 occasions where Mrs Shafl falsified claim forms for shifts she did not attend. Mrs Shafl has a previous history of dishonesty for both criminal and regulatory matters.

The NMC informed the panel that Mrs Shafl was convicted at Luton Crown Court of 2 counts of making off without paying - offences of dishonesty. She contested these charges and was convicted after trial on 12 November 2010. This case resulted in a suspension order for 6 months imposed on her registration on 1 July 2013. She failed to disclose her conviction and failed to disclose that she was subject to an NMC

investigation to prospective employers; another case involving dishonesty which resulted in a suspension order for 12 months being imposed on her registration on 7 April 2015.

The NMC referred the panel to its sanction guidance SAN-3a and SAN-3, and submitted that the case is too serious for taking no action or a caution order. Mrs Shafl's conduct clearly undermines the public's trust in nurses. The sanctions guidance SAN-3c, states that a conditions of practice order may be appropriate when there is no evidence of harmful deep-seated personality or attitudinal problems; there are identifiable areas of the registered professionals practice in need of assessment and/or retraining; and conditions can be created that can be monitored and assessed. The NMC submitted that there are no concerns which directly relate to Mrs Shafl's clinical practise. The dishonesty in this case would be very difficult to address through re-training or assessment. It submitted that it would not be possible to formulate workable conditions of practice which would address the concerns raised and protect the public and satisfy the wider public interest considerations. These concerns are indicative of a harmful deep-seated attitude or personality problem and therefore a conditions of practice order is not appropriate.

In considering its sanction guidance SAN-3d, the NMC submitted that a suspension order is appropriate where a registrant has insight and does not pose a risk of repeating behaviour. This was not an isolated incident; there were 3 occasions Mrs Shafl falsified claim forms for the shifts that she did not work. There is also a history of dishonesty with previous cases which resulted in suspension orders. There is evidence of deep-seated attitudinal problems and Mrs Shafl's conduct relates to dishonesty for financial gain. It submitted that a period of suspension would not reflect the gravity and seriousness of Mrs Shafl's actions and adequately address the serious public interest concerns identified. The dishonesty reflects badly on the nursing profession as a whole and undermines public trust.

The NMC submitted that the most appropriate and proportionate sanction to impose in this case is a striking off order, as per the NMC sanctions guidance SAN-3e. This guidance states that a striking-off order is appropriate when the registrant's misconduct

is fundamentally incompatible with being a registered professional. It further submitted that the misconduct in this case is very serious and raises fundamental questions about Mrs Shafl's professionalism. Allowing continued registration would be seriously damaging to the reputation of the profession. In light of the seriousness of the concerns, a striking-off order is the only sanction which will sufficiently address the public interest concerns in this case.

The panel had no representations before it from Mrs Shafl.

#### Decision and reasons on sanction

The panel heard and accepted the advice of the legal assessor.

Having found Mrs Shaff'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:

- Previous regulatory and criminal findings in relation to dishonesty
- Lack of insight into failings
- A pattern of dishonest misconduct over a period of time
- Acts carried out for personal financial gain
- Pre-meditated acts of dishonesty.

The panel determined that there were no mitigating features in 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 repeated dishonesty, an order that does not restrict Mrs Shafl'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 Shafl's misconduct was not at the lower end of the spectrum 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 conditions of practice on Mrs Shafl's 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 misconduct identified in this case was not something that can be addressed through retraining. Furthermore, the panel concluded that the placing of conditions on Mrs Shafl's 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 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 panel determined that these factors were not apparent in this case and 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 Mrs Shafl's actions is fundamentally incompatible with Mrs Shafl 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?

Mrs Shafl's 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 Mrs Shafl's 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 determined that the appropriate and proportionate sanction is that of a striking-off order. Mrs Shafl had demonstrated a pattern of dishonest behaviour that she has not addressed, and with personal financial gain as the motivator. Having regard to the matters it identified in the fitness to practise stage, in particular the effect of Mrs Shafl's 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 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 Mrs Shafl in writing.

#### 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 Mrs Shafl's own interests until the striking-off sanction takes effect. The panel heard and accepted the advice of the legal assessor.

## Representations on interim order

The panel took account of the representations made by the NMC that an 18-month interim suspension order should be imposed. Mrs Shafl's conduct is a breach of one of the fundamental tenets of the nursing profession. It submitted that in the absence of such an order and in the event of an appeal, Mrs Shafl would be allowed to practise without restriction pending the outcome of any such appeal. If there is no appeal, the interim order falls away.

The panel had no representations before it from Mrs Shafl.

#### Decision and reasons on interim order

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 the facts found proved and the reasons set out in its decision for the substantive order in reaching the decision to impose an interim order.

The panel concluded 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 substantive striking off order 28 days after Mrs Shafl is sent the decision of this hearing in writing.

That concludes this determination.