

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

**Substantive Order Review Hearing**

**Friday, 26 May 2023**

**Thursday, 15 June 2023**

Virtual Hearing

**Name of Registrant:** Sarah Fiona Badila

**NMC PIN** 07H3434E

**Part(s) of the register:** Nursing, Sub part 1 RNMH  
Registered Nurse - Mental Health – 26 March 2008

**Relevant Location:** Hertfordshire

**Type of case:** Misconduct

**Panel members:** Ashwinder Gill (Chair, Lay member)  
Jodie Jones (Registrant member)  
Georgina Wilkinson (Lay member)

**Legal Assessor:** Richard Ferry-Swainson  
Alain Gogarty (15 June 2023)

**Hearings Coordinator:** Amie Budgen  
Margia Patway (15 June 2023)

**Nursing and Midwifery Council:** Represented by Sophia Ewula, Case Presenter

**Mrs Badila:** Present and represented by Mr Muhammad Munir,  
instructed by Daffodils Solicitors

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

**Fitness to practise:** Impaired

**Outcome:** **Conditions of practice order (6 months) to come into effect on 4 July 2023, the expiry date of the existing order, in accordance with Article 30 (1)**

## Decision and reasons on review of the substantive order

The panel decided to replace the current suspension order with a conditions of practice order.

This order will come into effect at the end of 4 July 2023 in accordance with Article 30 (1) of the 'Nursing and Midwifery Order 2001' (the Order).

This is the first review of a substantive suspension order originally imposed for a period of twelve months by a Fitness to Practise Committee panel on 1 June 2022.

The current order is due to expire at the end of 4 July 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, a registered nurse:*

*1) Did not carry out supervision effectively and/or thoroughly in that:*

*a) ...*

*b) ...*

*c) On 11 April 2019, four supervision sessions were recorded as **timed** between 16.00 and 16.20 which **indicates an unduly short** time frame in which to carry out supervisions for four members of staff. **[Found proved]***

*2) Did not document the correct time that supervisions took place, in that:*

*a) On 11 April 2019, two different supervision sessions were both recorded as taking place at the same time of 16.10. **[Found proved]***

- b) *On 12 April 2019, a supervision was recorded as taking place at 20.10 but you signed out on the register when you left the building at 16.00. [Found proved]*
- c) *On 1 May 2019, a supervision was recorded as taking place at 20.30 but you signed out on the register when you left the building at 17.10. [Found proved]*
- 3) *Between 9 6 August 2018 and 28 August 2018 requested Colleague A to complete one or more learning modules on your behalf. [Found proved]*
- 4) *Your request at charge 3, above, was made in exchange for granting annual leave to Colleague A. [Found proved]*
- 5) *Your conduct in charges 3 and/or 4, above, lacked integrity in that you used your position of authority to influence Colleague A to complete the learning modules for you. [Found proved]*
- 6) *Your conduct in charge 3, above, was dishonest in that you intended to create the misleading impression that you had completed the learning modules yourself when you had not. [Found proved]*

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

The original panel determined the following with regard to impairment:

*'The panel next went on to decide if as a result of the misconduct, your 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. 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... show that his/her fitness to practise is impaired in the sense that s/he:*

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

*The panel decided that although patients were not directly put at risk of harm by your actions, there is an indirect risk to patient safety when a nurse does not complete up-to-date training required for her role and does not appreciate the seriousness of getting a colleague to complete the training in her name. Further,*

*the panel considered that your conduct was dishonest and lacked integrity and this brings the nursing profession into disrepute. The panel also decided that your misconduct breached the fundamental professional tenets of probity and of not abusing your position. It was satisfied that confidence in the nursing profession would be undermined if its regulator did not judge charges relating to lack of integrity and dishonesty to be serious.*

*The panel considered that your insight is limited. The panel referred to your response bundle of December 2019, in which you conceded that your actions were dishonest and wrong, and considered that you appear to have demonstrated more insight at that time, than in your most recent statement or in oral evidence during this hearing, where you treat your misconduct in getting Colleague A to complete your training modules for you as unimportant on the grounds that you had done similar training in an earlier employment. The panel was concerned that over time, since your statement in 2019, you may have rationalised your actions and now do not acknowledge the seriousness or the importance of not completing your own training modules and asking another member of staff to complete the training modules on your behalf. In your witness statement, dated 19 May 2022, despite acknowledging that you had asked Colleague A to complete training modules on your behalf, you say “I always conducted my role with honesty and never mislead and gave wrong impression in completing my modules”. The panel considered that this demonstrated a significant lack of insight into your misconduct.*

*While the panel noted that you have apologised for your actions and have demonstrated some remorse, it also considered that your insight into the impact your actions had on Colleague A, your colleagues, and the wider nursing profession is yet to be sufficiently developed.*

*The panel also noted that you did not provide a reflective piece, addressing the concerns, outlining what you would have done differently and the impact of your actions for the panel’s consideration. It also noted the absence of any character references or any information from your current employment or references from*

*your current manager detailing your progress and how, if at all, you are addressing the concerns.*

*The panel noted the absence of any evidence of training you may have completed since you left the Priory or that you have completed the outstanding training that was mandated for you while you were employed at the Priory. More significantly, your willingness to cause another member of staff to do your training modules for you and your insufficient insight into the gravity of this behaviour present a risk to the public.*

*Taking all these factors into account, the panel determined that there is a risk of repetition. The panel therefore decided that a finding of impairment is necessary on the grounds of public protection.*

*The panel bore in mind 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 proper professional standards for members of those professions.*

*The panel determined that, in this case, a finding of impairment on public interest grounds was also required. The panel considered that the public would expect a registered nurse in a senior position to act with integrity and honesty, and would expect the regulator to take action in cases where a nurse has been found to be dishonest in relation to completing and recording her own professional development and training. Further it would also expect the regulator to take action when a nurse had been found to abuse her position as a Ward Manager to persuade a new and junior colleague to complete training on her behalf in exchange for the approval of annual leave. The panel considered that proper professional standards and public confidence in the profession would be undermined if a finding of current impairment were not made. Therefore the panel also finds your fitness to practise impaired on the grounds of public interest.*

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

The original reviewing panel determined the following with regard to sanction:

*'The panel then went on to consider whether a suspension order would be an appropriate sanction. The SG states that suspension 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 repetition of behaviour since the incident;*
- The Committee is satisfied that the nurse has insight and does not pose a significant risk of repeating behaviour.*

*This was a single episode of misconduct and there is no evidence that it has been repeated since.*

*The panel considered your lack of meaningful insight or recognition of the impact of your failings on clients, your colleagues and the wider profession. It bore in mind the senior position you held when you asked a much junior member of staff to complete modules on your behalf. However, it determined that your dishonest actions were opportunistic rather than pre-planned. It considered that you were trying to take an easy way out when faced with the pressure of a new managerial role and its associated workload. While this was serious and fell far short of the standards required of a registered nurse it was, in the panel's judgement, limited in extent and was not fundamentally incompatible with remaining on the register.*

*The panel therefore determined that a suspension order is the proper order in this case. In reaching this decision, it took account of the hardship such an order would have on you and balanced your interests with the need to protect the public and to meet the public interest.*

*The panel then considered for how long the order should be. The panel determined that the maximum period of 12 months was required to maintain public confidence in the profession given the findings in this case. In the panel's judgement, a period of 12 months would also allow you the time to reflect on the findings of this panel as to your misconduct, to take the steps necessary to demonstrate that your practice has been strengthened and to enable you to provide substantive evidence of your progress in addressing the concerns identified.*

*The panel gave very careful consideration to whether a striking-off order was necessary to address the public interest concerns in your case. However, taking account of all the information before it, the panel concluded that it would be disproportionate. Whilst the panel acknowledges that a suspension may have a punitive effect, it would be unduly punitive in your case to impose a striking-off order at this stage.*

...

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

- *Your continued engagement with the NMC;*
- *Your attendance at the review hearing;*
- *A structured written reflective piece using a recognised model which demonstrates your understanding of:*
  - *the concerns identified above;*
  - *the effect of your misconduct on patients/clients, their families, the nursing profession and the public's perception of nurses; and*
  - *how you would approach similar circumstances differently in the future.*
- *Any testimonials commenting on your recent performance in the workplace from either paid or voluntary positions; and*
- *Any personal references attesting to your honesty, integrity and character.'*

## Decision and reasons on current impairment

The panel has considered carefully whether your fitness to practise remains impaired. Whilst there is no statutory definition of fitness to practise, the Nursing and Midwifery Council (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, on-table papers and Mr Munir's submissions on your behalf. It has taken account of the submissions made by Ms Ewulo's on behalf of the NMC.

Ms Ewulo referred the panel to the background of the case, including details of the referral that the NMC received and the details of the original substantive hearing which took place between 20 May 2022 and 1 June 2022.

Ms Ewulo submitted that there remains current impairment and that a substantive order remains necessary on the ground of public protection and is also otherwise in the wider public interest.

In relation to public protection, Ms Ewulo submitted that the regulatory concerns are serious in nature, relating to the abuse of trust, as well as dishonesty and lack of integrity. Ms Ewulo referred the panel to the following statement from your reflective piece dated 14 May 2023:

*'Following the outcome of the hearing 20 – 1 June 2022, I have been on suspension for 12 months, starting from 05 July 2022 because I was given 28 days to appeal the order, which I did not exercise my right to appeal, hence, the start of the suspension time was 05 July 2022. I was suspended as a result of the following charges by the NMC:*

*a) Not carrying out adequate and/or supervision for staff members who reported me;*

- b) *Not documenting the correct time that the supervisions took place;*
- c) *Requesting a colleague to undertake learning modules on my behalf.'*

Ms Ewulo submitted that there is an omission of reference to the most serious charges relating to dishonesty and your lack of integrity. Further, that you lack acknowledgement of the serious charges which were found proved.

Ms Ewulo submitted that whilst you did apologise for your misconduct and lack of judgement in paragraph 6 of the reflective piece dated 14 May 2023, you have not demonstrated tangible examples of what you have done to strengthen your practice since the imposition of the substantive suspension order on 1 June 2022.

Ms Ewulo submitted that the reflective piece you have provided is brief in some areas and that you fail to acknowledge the charge found proved in relation to you asking Colleague A to complete mandatory training on your behalf in exchange for annual leave. Ms Ewulo submitted that whilst you did give reference to the NMC Code of Conduct, you did not make a direct reference to your insight, nor explain what you would do differently in that situation in the future.

Ms Ewulo referred the panel to the testimonials from your daughter and your work colleague. Ms Ewulo invited the panel to consider that it was inappropriate to request your daughter to write your reference and that it is unclear if your daughter is a medical practitioner or a registrant. Ms Ewulo submitted that asking your daughter for a testimonial coincides with your inappropriate request for Colleague A to complete your mandatory training for you.

Ms Ewulo referred the panel to the training certificates you have provided, namely the *'Immediate Life Support (ILS)'* certificate dated 15 April 2023, the *'Incident Health and Safety Training and Reflective Practice'* certificate dated 22 April 2023, the *'Basic Life Support People Moving and Handling Care Certificate Introduction'* certificate dated 22 April 2023 and the *'Physical Intervention, Breakaway and De-escalation Skills'* certificate dated 21 April 2023. Ms Ewulo submitted that whilst there are a number of training completion certificates, they do not relate to the regulatory concerns and charges found proved at the original substantive hearing.

Ms Ewulo submitted that therefore, whilst you have engaged with the NMC proceedings, there remains a risk of harm to the public as you have not adequately demonstrated remediation, nor insight, nor indication of your strengthened practice.

Ms Ewulo submitted that a substantive order also remains in the wider public interest as a well-informed member of the public would be concerned to learn that a registrant was continuing to work as a registered nurse without restriction in place in light of the charges found proved in the original substantive hearing on 1 June 2022.

The panel also had regard to Mr Munir's submissions on your behalf.

Mr Munir submitted that charges 1a and 1b were not found proved.

Mr Munir informed the panel that you have complied with all of the following instructions by the former panel on 1 June 2022:

- *'Your continued engagement with the NMC;*
- *Your attendance at the review hearing;*
- *A structured written reflective piece using a recognised model which demonstrates your understanding of:*
  - *the concerns identified above;*
  - *the effect of your misconduct on patients/clients, their families, the nursing profession and the public's perception of nurses; and*
  - *how you would approach similar circumstances differently in the future.*
- *Any testimonials commenting on your recent performance in the workplace from either paid or voluntary positions; and*
- *Any personal references attesting to your honesty, integrity and character.'*

Mr Munir submitted that you have not received further complaints, nor been referred to the NMC for further regulatory concerns since the imposition of the substantive suspension order on 1 June 2022.

Mr Munir submitted that the training you have completed is relevant to the charges found proved. He referred the panel to the training certificates you completed on 15 April 2023, 21 April 2023 and 22 April 2023.

When asked how the training certificates relate to the charges found proven, Mr Munir informed the panel the *'Incident Health and Safety Training and Reflective Practice'* course, completed on 22 April 2023 relates to the charges found proven as they cover training in the following areas:

*'Supervision Training and Leadership:*

- *Models of supervision*
- *Roles of the supervisor and supervisee*
- *Rules around confidentiality*
- *Supervisor contract and escalating concerns*
- *Documentation*

*Duty of Candour:*

- *Admitting to mistakes in an open and honest way*
- *Being receptive to peer reviews and feedback*
- *Importance of ongoing supervision*
- *Importance of reflective practice'*

Mr Munir submitted that in relation to the testimonial that your daughter provided, the reference is credible as your daughter is also in the medical field and has known you her whole life.

Mr Munir submitted that you have not repeated the regulatory concerns and invited the panel to allow the order to lapse upon expiry at the end of 4 July 2023.

The panel clarified to you which charges were relevant to this hearing, as there appeared to be some confusion and disagreement between the parties. The panel clarified although the facts of charges 1c, 2a, 2b and 2c were found proved, the previous panel had found these charges did not amount to misconduct. You were therefore referred to the charges which were found proved and amount to misconduct at the original substantive hearing,

namely charges 3, 4, 5 and 6. In other words the charges which related to you asking Colleague A to complete CPD on your behalf.

You gave evidence under affirmation.

When asked by the panel how you would handle things differently if you were in the same situation again, you told the panel that you would reflect on your time management and prioritise particular tasks by creating a timetable, so that you are not pressured. You informed the panel that at the time of the incidents, the Care Quality Commission (CQC) were coming to review *'the ward'* so you were experiencing elevated stress at the time of the incidents.

You told the panel that you would inform your deputy manager if you were struggling to complete your workload and would delegate more work to junior nurses. You told the panel that at the time of the incidents, it was your first time working in a management role and that you made mistakes which you do not want to repeat.

When asked about your future nursing career if the suspension was lifted, you told the panel that you enjoy ward nursing, you interacted well with patients and worked hard. You told the panel that patient care is your priority and you enjoy your job. Further, that you would learn from past mistakes and complete all online mandatory training yourself. You told the panel that if you returned to work as a registered nurse and were struggling with time pressures you would inform your manager and seek support.

When asked how you think Colleague A felt at the time you asked them to do training on your behalf, you told the panel that you believe they may have been shocked. You told the panel that you do not deny that what you did was wrong, and you accept that you did not learn from that module because you did not complete it yourself. You told the panel that you accept that you need to complete your own modules in future in order to learn and deliver better care to patients.

When asked how you thought your position as a manager impacted your junior Colleague's decision to undertake your training, you told the panel that you accept that Colleague A may have complied because they were your junior and they were being

asked by a manager. You informed the panel that although you were not trying to defend yourself, Colleague A did not know what she was doing by undertaking your training for you.

*“...I think when I asked her to complete the the modules for me, obviously it might probably have shocked her to say a person like a manager but at the same time the colleague that I asked, she holds a degree in psychology.*

*So she was somebody that she was doing if she was a carer, a waiting to be put to the team for psychologist.*

*So she was just not somebody who was not, who didn't know what she was doing.*

*But that's not the point, and that is not my I am not.*

*I am not saying that was good...”*

The panel felt that this placed responsibility on Colleague A and minimised your own personal responsibility and therefore your insight needs further development.

When asked if any of the references are related to your current employment, you told the panel that the reference from Premium staff was from your current employer.

You told the panel that you stayed at home for a while after being suspended. You told the panel that you returned to a care role to look after Patient A, where you were required to stay in their home for three months between October 2022 and May 2023. You told the panel that you received training on how to care for a patient with Patient A's particular condition and treatment plan. You told the panel that you have learnt various new skills when caring for Patient A.

Ms Ewulo asked if you are aware that dishonesty and a lack of integrity are serious charges, you told Ms Ewulo that you accept that they are serious charges.

[PRIVATE].

Ms Ewulo asked if you think it is appropriate to ask your daughter for a reference. You told Ms Ewulo that your daughter is an adult and is aware of all of the charges and is also a practitioner in the profession, so you thought it was an appropriate request.

Ms Ewulo asked you if your employment, caring for Patient A in their home was a paid job with an agency, you told the panel that it was a paid role with the agency Premium Staff.

[PRIVATE] you were passionate about working as a registered nurse. You informed the panel that the incidents which resulted in the charges at the original substantive hearing were out of character and you deeply regret your actions.

When asked if there was a reason why you did not specifically mention the incident with Colleague A in your reflective piece, you told the panel that there was no reason behind this and that your reflection was intended to cover the matters broadly.

The panel invited Mr Munir to make further submissions if necessary.

Mr Munir submitted that your honesty, integrity, and good character have been addressed in your reflective piece and the oral evidence you have provided at today's hearing. Further, that there is nothing wrong with you asking your daughter to provide you with a testimonial as evidence.

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

The panel carried out a comprehensive review in the light of all the information before it.

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 your fitness to practise remains impaired.

In its consideration of whether you have taken steps to strengthen your practice, the panel noted that you have shown remorse and regret for your actions and that you take responsibility for them. You acknowledged how not completing training could harm patients. You recognised that Colleague A may have had no choice but to act on your request. However the panel were concerned that you did not acknowledge the power imbalance between you and Colleague A who was your junior, and placed some blame for your actions on Colleague A. The panel noted that you did not demonstrate sufficient insight into how your dishonesty, which involved an abuse of power and a lack of integrity could damage the public confidence in the profession or how this might impact on wider colleagues.

The panel felt you had however demonstrated some developing insight and commended your progress. The panel noted that there were no clinical concerns relating to your practice. The panel also noted you have engaged with the NMC, undertaken various training in relation to the charges found proved, and completed your continuous professional growth ('CPD'). The panel also took account your detailed reflective piece in which you stated:

*"...With regard to the third charge of requesting a colleague to undertake learning modules on my behalf. This was outright dishonest and manipulative which is out of my character and I am ashamed of myself. I was under pressure and decided to cut corners instead of addressing issues appropriately: It is imperative that I undertake and complete all training, so as to keep abreast with current practice, as there are frequent advances in practice. Also, as a nurse it is important to act with honesty and integrity at all times.*

*"As a nurse, I am passionate about the work I do and it is of utmost importance to me that those I care for, their families and my colleagues have confidence and trust in my care giving. As such I am deeply regretful for having fallen short of the expectations as set in the Code above. This situation has taught me many valuable lessons, and I accept without reservations the issues that were raised and will ensure that they will not happen again.*

*Above all I am grateful for the lesson the suspension has given me, the opportunity to look at myself as a person not just a nurse and acknowledge that this is not the*

*way I want to present myself to anyone. I have already started from the time this referral came up and I saw it in words what I had done, started putting in the work to never misrepresent myself in such a way again. This is not whom I am, and this is not how I would like to interact with people again in the future, ever...”*

The panel took into consideration all of the character references you had provided in relation to your honesty and integrity.

Although you had shown developing insight in relation to some of the concerns, the panel determined that your insight was still developing in relation to the position of trust you held as a ward manager and the responsibilities that come with such a role, particularly to those junior to you. The panel had concerns that you lacked insight into the impact of your action in relation to Colleague A. The panel determined that there remained a risk of repetition until you are able to demonstrate insight into this aspect of your actions. The panel decided that a finding of impairment is necessary on the grounds of public protection.

It was of the view that the ongoing risk to public confidence in the profession has not been reduced since the last hearing. It concluded that your fitness to practise remains impaired by your misconduct. 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 your fitness to practise remains impaired.

## **Decision and reasons on sanction**

Having found your 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.

It had regard to the principle of proportionality and 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 public protection and public interest issues identified, an order that does not restrict your practice would not be appropriate in the circumstances.

The panel considered whether to make a conditions of practice order to take effect on the expiry of the existing order of the suspension order. The panel determined you have demonstrated developing insight and have shown remorse into the charges found proved. The panel was satisfied that it would be possible to formulate practicable and workable conditions that, if complied with, may lead to your unrestricted return to practice and would serve to protect the public and the reputation of the profession in the meantime. The panel also noted that you have been engaging with the NMC and are willing to comply with any conditions imposed.

The panel was of the view that to impose a suspension order or a striking-off order would be wholly disproportionate and would not be a reasonable response in the circumstances of your case.

The panel decided that the public would be suitably protected as would the reputation of the profession by the implementation of the following conditions of practice:

For the purposes of these conditions, 'employment' and 'work' mean any paid or unpaid post in a nursing, midwifery or nursing associate role. Also, 'course of study' and 'course' mean any course of educational study connected to nursing, midwifery or nursing associates.

1. You must not be employed or work in any managerial capacity, including the line management of any staff.
2. You must keep the NMC informed about anywhere you are working by:
  - a) Telling your case officer within seven days of accepting or leaving any employment.
  - b) Giving your case officer your employer's contact details.
3. You must keep the NMC informed about anywhere you are studying by:
  - a) Telling your case officer within seven days of accepting any course of study.
  - b) Giving your case officer the name and contact details of the organisation offering that course of study.
4. You must immediately give a copy of these conditions to:
  - a) Any organisation or person you work for.
  - b) Any agency you apply to or are registered with for work.
  - c) Any employers you apply to for work (at the time of application).
  - d) Any establishment you apply to (at the time of application), or with which you are already enrolled, for a course of study.
  - e) Any current or prospective patients or clients you intend to see or care for on a private basis when you are working in a self-employed capacity
5. You must tell your case officer, within seven days of your becoming aware of:
  - a) Any clinical incident you are involved in.
  - b) Any investigation started against you.
  - c) Any disciplinary proceedings taken against you.

6. You must allow your case officer to share, as necessary, details about your performance, your compliance with and / or progress under these conditions with:
  - a) Any current or future employer.
  - b) Any educational establishment.
  - c) Any other person(s) involved in your retraining and/or supervision required by these conditions

The period of this order is for six months.

This conditions of practice order will take effect on the expiry of the suspension order in accordance with Article 30(1).

Before the end of the period of the order, a panel will hold a review hearing to see how well you have complied with the order. At the review hearing the panel may revoke the order or any condition of it, it may confirm the order or vary any condition of it, or it may replace the order for another order.

Any future panel reviewing this case would be assisted by:

- Your reflection around the misuse of power and the impact this could have had on your colleagues, the wider profession and patients.

This will be confirmed to you in writing.

That concludes this determination.