

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

**Substantive Order Review Hearing
Friday, 06 October 2023**

Virtual Hearing

Name of Registrant: Storms Welly Menri

NMC PIN 16L0243E

Part(s) of the register: Registered Nurse
Adult Nurse (January 2017)

Relevant Location: Cosham

Type of case: Lack of competence

Panel members: Museji Ahmed Takolia (Chair, Lay member)
Susan Tokley (Registrant member)
Clare Taggart (Lay member)

Legal Assessor: Marian Killen

Hearings Coordinator: Sabrina Khan

Nursing and Midwifery Council: Represented by Louisa Simpson, Case Presenter

Mr Menri: Not Present and unrepresented (at the hearing)

Order being reviewed: Conditions of practice order (12 months)

Fitness to practise: Impaired

Outcome: **Conditions of practice order (18 months)
to come into effect at the end of the expiry of the
current order on 13 November 2023, in accordance
with Article 30 (1)**

Decision and reasons on application for hearing to be held in private

At the outset of the hearing, Ms Simpson made a request that part of this case be held in private on the basis that she would be making a reference to [PRIVATE]. The application was made pursuant to Rule 19 of the 'Nursing and Midwifery Council (Fitness to Practise) Rules 2004', as amended (the Rules).

The legal assessor reminded the panel that while Rule 19(1) provides, as a starting point, that hearings shall be conducted in public, Rule 19(3) states that the panel may hold hearings partly or wholly in private if it is satisfied that this is justified by the interests of any party or by the public interest.

The panel decided that any part of the hearing that referred to [PRIVATE] should be held in private.

Decision and reasons on review of the substantive order

The panel decided to vary the current conditions of practice order.

This order will come into effect at the end of 13 November 2023 in accordance with Article 30(1) of the 'Nursing and Midwifery Order 2001' (the Order).

This is the second review of a substantive conditions of practice order originally imposed for a period of 18 months by a Fitness to Practise Committee panel on 14 April 2021. The order was first reviewed on 5 October 2022 where the panel varied the conditions of practice order.

The current order is due to expire at the end of 13 November 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:

“Whilst employed as a registered nurse by Joint Hospital Group South, at the Queen Alexandra Hospital, between 24 January 2017 and 23 November 2018, failed to demonstrate the standards of knowledge, skill and judgement required to practise without supervision as a Band 5 Staff Nurse, in that you:

1) Did not make satisfactory progress under a performance management programme ‘Performance Advisory Group (PAG) between January 2017 and 12 June 2018 and/or ‘Nursing Performance Review Panel (NPRP)’ between 12 July 2018 and 24 October for reasons including the following:

a) Could not demonstrate competency in all areas of management and/or administration of medication; including

i) On 16 February 2017, when you dispensed medication to the wrong patient;

ii) On 10 April 2017 when you dispensed medication to the wrong patient

b) Did not communicate effectively with colleagues in that you

i) did not ensure that a Patient who had a fall was appropriately escalated to the Nurse in Charge on 29 December 2017

c) On one or more occasions you did not respond appropriately when dealing with deteriorating patients

d) On 15 November 2017 did not properly set a Patient’s oxygen machine to ensure that they received sufficient oxygen

e) did not complete patient records adequately and/or in a timely manner

f) Around 20-25 May 2018, demonstrated poor adherence to infection control procedures

And, in light of one or more of the matters set out in Charge 1 above, your fitness to practise is impaired by reason of your lack of competence.”

The first reviewing panel determined the following with regard to 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 and the documents provided by you. It has taken account of the submissions made by Mr Akram on behalf of the NMC and Ms Michaels’ submissions on your behalf.

Mr Akram outlined the background of the case and referred the panel to the relevant documentation. He submitted that you have not been able to demonstrate practical remediation since the substantive hearing. He told the panel that the NMC accepts the reasons for this put on your behalf.

Mr Akram said that the substantive hearing panel noted that you had made admissions and stated that your overall insight was good. That panel had also taken account of your reflective pieces as well as relevant training undertaken, the numerous positive references and your excellent theoretical knowledge. However, the panel was of the view that there was a risk of repetition as you had not demonstrated that you are able to put all your skills into practice safely. Mr Akram submitted that this remains the issue today as you have not worked as a nurse since October 2018. He therefore submitted that a finding of impairment was necessary on the grounds of public protection and was also otherwise in the public interest.

Mr Akram submitted that any sanction must be appropriate and proportionate and although it may not be intended to be punitive, it may have such consequences. Mr Akram stated that the NMC accepts the commendable steps that you have taken, and which were evidenced in the documents provided by you. One of the documents sets out a summary of your job application history and the number of unsuccessful attempts that you have made to secure employment.

Mr Akram referred the panel to the determination which records that you stated that you wished to return to nursing under a preceptorship programme and that it would help you to return to the profession and ensure that you were able to practise in a safe manner. The panel on the last occasion considered that to require you to undergo further formal preceptorship programme would be too prescriptive. Mr Akram submitted that the current conditions are appropriate, and they also provide the level of protection necessary. He asked the panel that those conditions be continued in their current form.

Ms Michaels, on your behalf, stated that you qualified as a registered nurse in December 2016 and commenced employment in a nursing role in January 2017 on a preceptorship programme. You worked as a registered nurse between January 2017 and November 2018, leading to the concerns that were found proved. You are currently working within the fire services, but you have a real desire to return to nursing.

Ms Michaels referred the panel to the documents provided by you. She told the panel that you have not been able to secure a role as a nurse. You have had offers but you have not been able to secure the final role once pre-employment checks were carried out. As a result, you have not been able to engage actively with the conditions of practice order yet.

Ms Michaels submitted that you have faced obstacles with your job applications and you have been informed by prospective employers that, due to some of the conditions of practice, they would find it impossible to

accommodate you. In particular condition 6, which requires you to be supervised by a band 6 nurse, has raised problems. Due to difficulties in finding appropriate band 6 nurses to supervise you and the pressure of staff shortages, it has been more difficult for employers to support you in a role as a band 5. Therefore, you have not had the opportunity to demonstrate that you can put your clinical skills into practice safely. Ms Michaels submitted that, should the current conditions of practice be varied, you may be able to find a suitable supervisor who is not necessarily a band 6 nurse.

Ms Michaels said that you have continued to keep your clinical knowledge up to date and have provided certificates for training successfully completed. She submitted that you have shown focused remediation addressing the concerns raised by the original panel. She said that you have also worked as a volunteer vaccinator during the pandemic and that you remain as a medical technician and medical instructor. Ms Michaels submitted that it is clear that you are still trying to remain within a clinical setting, and you have continued to use your clinical and medical knowledge in your current role.

Ms Michaels submitted that you have continued to engage with the NMC proceedings. You have done your best to address and remediate the failings around your clinical practice despite not being able to secure a nursing role. Ms Michaels invited the panel to vary the conditions in order to allow you to obtain a role where you can address the identified failings. She submitted that the current conditions have proven not to be workable. She invited the panel to amend conditions 2 and 3, and to simplify the conditions to ensure that they do not appear onerous to future employers.

The panel heard and accepted the advice of the legal assessor and had regard to the NMC's published guidance on impairment.

In reaching its decision, the panel was mindful of the need to protect the public, to 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.

The panel noted that you did not seek to challenge that your fitness to practise remains impaired. The panel also noted that the substantive hearing panel found that your overall insight was good. However, it also noted that you had not worked as a nurse since October 2018. The present panel at the hearing today was satisfied that you have demonstrated reflection and insight, as well as making attempts to improve your theoretical clinical knowledge. It also noted however that you have been unable to work as a registered nurse because employers cannot support the current conditions of practice. Consequently, as you have not been able to obtain work as a registered nurse and work towards meeting the conditions of practice order, the panel determined that you have been unable to remediate fully the previously identified concerns in respect of your practice. The panel therefore considered that a risk of repetition remains and that patients would be placed at risk of harm if you were able to practise without restriction. The panel therefore determined that a finding of impairment remains necessary on the grounds of public protection.

The panel bore in mind that its primary function is both to protect patients and to meet the wider public interest which includes maintaining confidence in the nursing profession and upholding proper standards of conduct and performance. The panel noted that you have been unable to practise as a nurse since October 2018, and therefore have been unable to continue your journey towards remediating the concerns with your clinical competence. It considered that members of the public would not expect a nurse, with outstanding concerns around their clinical competence, to be able to practise without restriction. The panel therefore determined that a finding of impairment also remains necessary on public interest grounds, in order to maintain confidence in the nursing profession and in the NMC as a regulator.

For these reasons, the panel finds that your fitness to practise remains impaired.'

The first reviewing panel determined the following with regard to 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.

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 your 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 imposing a conditions of practice order on your registration would still be a sufficient and appropriate response. The panel was mindful that any conditions imposed must be proportionate, measurable and workable and it took into account the parties' submissions in respect of the existing conditions of practice. The panel assessed the current conditions.

The panel determined that it would be possible to formulate appropriate and practicable conditions, which would address the failings highlighted in this case. The panel accepted that you have been unable to comply with conditions of practice due to your current employment status but that you

are engaging with the NMC and are willing to comply with any conditions imposed.

Having considered Ms Michaels' submissions and having carefully considered your reflections, the panel determined that amending the current conditions of practice would provide the necessary safeguards without restricting you to a band 6 mentor or to an NHS post. The panel was satisfied that the variation of the conditions of practice order would sufficiently protect the public and address the public interest. In this case, there are conditions which could be formulated which would protect patients during the period they are in force.

The panel was of the view that to impose a suspension order would be wholly disproportionate and would not be a reasonable response in light on your ongoing engagement, and your progress in addressing the concerns, including providing evidence of further training and positive testimonials.

Accordingly, the panel determined, pursuant to Article 30(2), to vary the conditions in the order. The conditions of practice order, as varied, is then extended for a further 12 months under Article 30(1). The new conditions come into immediate effect. The further period of 12 months will run from the expiry of the present term. The panel decided to impose the following varied conditions which it considers are appropriate and proportionate in this case:

'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 work as an agency or bank nurse.*
- 2. You must ensure that you are supervised at any time you are working. Your supervision must consist of working at all times on the same*

shift as, but not always directly observed by, a registered nurse. This must continue until you are signed off by your employer as competent against clinical standards of nursing care.

3. *You must not administer IV medication unless you are directly supervised by a suitably qualified registered nurse until signed off by your employer as competent.*

4. *[PRIVATE]*

5. *You must work with a mentor, who must be a registered nurse nominated by your line manager, to create a personal development plan (PDP). Your PDP must address the concerns around:*

- *Administration of medication;*
- *Your assessment and response to the deteriorating patient;*
- *Professional standards of infection control.*

You must:

a. *Send your case officer a copy of your PDP before this order is reviewed;*

b. *Meet with your nominated mentor at least monthly to discuss your progress towards achieving the aims set out in your PDP;*

c. *Send your case officer a report from your nominated mentor before this order is reviewed. This report must show your progress towards achieving the aims set out in your PDP.*

6. *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.*

7. *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.*
8. *You must immediately give a copy of these conditions to:*
- a. *Any organisation or person you work for;*
 - b. *Any employers you apply to for work (at the time of application);*
 - c. *Any establishment you apply to (at the time of application), or with which you are already enrolled, for a course of study.*
9. *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.*
10. *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 panel considered that 12 months was the appropriate term to enable you to secure employment and demonstrate appropriate remediation in respect of the identified concerns.

Before the end of the period of the order, a panel will hold a review hearing to review the order and 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 vary any condition of it, or it may replace the order with another order.

Any future panel reviewing this case would be assisted by:

- *Your continued engagement and attendance at any review hearing;*
- *Evidence of achievement of competency;*
- *Continued professional developments;*
- *Relevant testimonials and references.'*

Decision and reasons on current impairment

The panel has considered carefully whether Mr Menri'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 documents provided by Mr Menri including Mr Menri's training certificates and written representations on his behalf by the RCN. It has also taken account of the submissions made by Ms Simpson on behalf of the NMC.

Ms Simpson outlined the background of the case and referred the panel to the relevant documentation. She briefly stated the findings of the previous panel.

Ms Simpson submitted that Mr Menri has not complied with the current conditions of practice order since he had not worked in the capacity of a registered nurse since the last review hearing. She stated that although Mr Menri has not submitted any reflective piece for this hearing, she noted that the previous panels were satisfied that he had good insight, but simply had not been able to put into practise any of his theoretical learning and training. Thus, she submitted that Mr Menri was unable to demonstrate any improvement in terms of his impairment of fitness to practice.

Ms Simpson submitted that although there are a number of training certificates that have been provided by Mr Menri, there was no evidence of any training courses specifically relevant to the concerns and a return to practice course was not undertaken by Mr Menri.

Ms Simpson therefore submitted that Mr Menri was not able to strengthen his practice or mitigate the risk involved to the public and so there remains a risk to the public, patient safety and a risk of undermining public confidence in the profession and the regulator.

Ms Simpson submitted that allowing Mr Menri to practise without any restriction will put patients at a risk of harm and bring the profession into disrepute.

The panel also had regard to the written submissions of Safiyya Khan, on behalf of Mr Menri from RCN in which it is stated:

'We set out below the Registrant's representations and ask that this letter be placed before the Panel at the hearing.

Since the imposition of the substantive conditions of practice order, the Registrant has been attempting to find work in line with this order as evidenced in the enclosed screenshots of unsuccessful applications. In these circumstances, the Registrant has not had the opportunity to demonstrate compliance with his current substantive conditions of practice order.

The Registrant attended a webinar run by Health Education England ("HEE") aiming to advise health professionals struggling to return to work on 16 February 2023. Following the webinar, the Registrant sought the counsel of Claire Wardle, Programme Lead (Nurse Expansion) at NHS England – South East, who provided independent advice in seeking work and career development opportunities in his particular circumstances. A record of the correspondence between the Registrant and Ms Wardle has been enclosed with these submissions. The Registrant has also explored with Ms Wardle the possibility of undertaking a Return to Practice ("RtP") course at a university as it incorporates both theoretical knowledge and practical application in a placement. The Registrant instructs that he is still intending to go down the RtP route.

To address the regulatory concerns, the Registrant has undertaken relevant training courses while unable to secure work as a registered nurse. Specifically, the Registrant has attained high scores in the following courses:

- *Safe Administration of Medicines – 100%*
- *Communicating Effectively – 100%*
- *Infection Control – 100%*
- *Sleep – 96%*

The Registrant has also recently been invited to attend the Lord-Lieutenant of Hampshire Awards Ceremony as an award recipient on 26 October 2023. This ceremony is held in recognition of individuals who demonstrate the volunteer ethos and to build and nurture the enduring relationships that are important to the County and local community.

It is respectfully submitted that the risk profile has not changed. We respectfully invite the Panel to extend the current conditions of practice order to allow the Registrant the opportunity to undertake and complete a RtP course. It is hoped that the RtP course will help to demonstrate compliance with the substantive order and to demonstrate contemporary evidence of the Registrant's fitness to practice at the next review proceedings.'

The panel heard and accepted the advice of the legal assessor and had regard to the NMC's published guidance on impairment and substantive order reviews namely DMA1 and REV3.

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 Mr Menri's fitness to practise remains impaired.

In pursuant to the guidance the panel was of the view that Mr Menri cannot practise safely as Mr Menri has not had the opportunity to work as a registered nurse since the case was last reviewed. Therefore, the panel was of the view that although he did not breach any of the conditions imposed he has not been able to strengthen or remediate his practice. Thus, the risk of harm remains. The panel also noted that the previous review panel found

that Mr Menri's overall insight was good and made attempts to improve his theoretical knowledge.

The panel then considered the training certificates provided by Mr Menri but was of the view that although Mr Menri attempted to develop his theoretical knowledge, most of the courses failed to adequately address important elements of the current conditions of practice order. Consequently, the panel determined that he had been unable to remediate fully the previously identified concerns in respect of his practice.

The panel therefore concluded that a risk of repetition remains and that patients would be placed at risk of harm if Mr Menri were permitted to practise without restriction. The panel therefore determined that a finding of impairment remains necessary on the grounds of public protection.

The panel bore in mind that its primary function is both to protect patients and to meet the wider public interest which includes maintaining confidence in the nursing profession and upholding proper standards of conduct and performance. The panel noted that Mr Menri have been unable to practise as a nurse since October 2018, and therefore has been unable to continue his journey towards remediating the concerns with his clinical competence. It considered that members of the public would not expect a nurse, with outstanding concerns around their clinical competence, to be able to practise without restriction as it could bring the profession into disrepute and undermine confidence in the nursing profession and the NMC as a regulator. The panel therefore determined that a finding of impairment also remains necessary on public interest grounds.

For these reasons, the panel finds that Mr Menri's fitness to practise remains impaired.

Decision and reasons on sanction

Having found Mr Menri'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 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 Mr Menri'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 Mr Menri's misconduct 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 imposing a further conditions of practice order on Mr Menri's registration would still be a sufficient and appropriate response. The panel is mindful that any conditions imposed must be proportionate, measurable and workable.

The panel noted the written submissions from Mr Menri's representative (email dated 3 October 2023) in which she stated:

'It is respectfully submitted that the risk profile has not changed. We respectfully invite the Panel to extend the current conditions of practice order to allow the Registrant the opportunity to undertake and complete a RtP course. It is hoped that the RtP course will help to demonstrate compliance with the substantive order and to demonstrate contemporary evidence of the Registrant's fitness to practice at the next review proceedings.'

The panel determined that it would be possible to formulate appropriate and practical conditions which would address the failings highlighted in this case. The panel accepted that Mr Menri has been unable to comply with conditions of practice due to his current

employment status but that he is engaging with the NMC and is willing to comply with any conditions imposed.

The panel was of the view that a further variation of the conditions of practice order is necessary in order to protect patients and the wider public interest. It had particular regard to the original panel's conclusion that there were no deep-seated attitudinal problems. However, the panel determined that the current condition two as drafted needs to be more specific and better reflect the concerns about Mr. Menri's practice.

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 light of Mr Menri's ongoing engagement and his insight, including providing evidence of further training.

Accordingly, the panel determined, pursuant to Article 30(2), to vary the conditions in the order. The conditions of practice order, as varied, is then extended for a further 18 months under Article 30(1). The further period of 18 months will run from the expiry of the present term. The panel decided to impose the following varied conditions which it considers are appropriate and proportionate in this case:

'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 work as an agency or bank nurse.
2. You must ensure that you are supervised at any time you are working. Your supervision must consist of working at all times on the same shift as, but not always directly observed by, a registered nurse. This must continue until you are signed off by your employer as competent against clinical standards outlined in conditions three and five.
3. You must not administer IV medication unless you are directly supervised by a suitably qualified registered nurse until signed off by your employer as competent.

4. [PRIVATE].

5. You must work with a mentor, who must be a registered nurse nominated by your line manager, to create a personal development plan (PDP). Your PDP must address the concerns around:
 - Administration of medication;
 - Your assessment and response to the deteriorating patient;
 - Professional standards of infection control.

6. You must:
 - a. Send your case officer a copy of your PDP before this order is reviewed;
 - b. Meet with your nominated mentor at least monthly to discuss your progress towards achieving the aims set out in your PDP;
 - c. Send your case officer a report from your nominated mentor before this order is reviewed. This report must show your progress towards achieving the aims set out in your PDP.

7. 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.

8. 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.

9. You must immediately give a copy of these conditions to:
 - a. Any organisation or person you work for;

- b. Any employers you apply to for work (at the time of application);
 - c. Any establishment you apply to (at the time of application), or with which you are already enrolled, for a course of study.
10. 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.
11. 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 panel considered that 18 months was the appropriate term to enable you to secure employment and demonstrate appropriate remediation in respect of the identified concerns.

Before the end of the period of the order, a panel will hold a review hearing to review the order and 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 vary any condition of it, or it may replace the order with another order.

Any future panel reviewing this case would be assisted by:

- Your continued engagement and attendance at any review hearing;
- Evidence of achievement of competence, and safe practice in a healthcare setting;
- Continued professional development;

- Relevant testimonials and references.

This will be confirmed to you in writing.

That concludes this determination.