

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

**Substantive Order Review Hearing
Tuesday 2 April 2024**

Virtual Hearing

Name of Registrant: Onyenuche Courage Amalime

NMC PIN 17J0805E

Part(s) of the register: Registered Nurse
Mental Health Nursing – 14 March 2018

Relevant Location: Milton Keynes

Type of case: Misconduct

Panel members: Phil Lowe (Chair, Lay member)
Amanda Revill (Registrant member)
Sabrina Sheikh (Lay member)

Legal Assessor: Nigel Mitchell

Hearings Coordinator: Petra Bernard

Nursing and Midwifery Council: Represented by Alex Radley, Case Presenter

Mr Amalime: Present and not represented

Order being reviewed: Suspension order (12 months)

Fitness to practise: Not Impaired

Outcome: Order to lapse upon expiry in accordance with Article 30(1), namely 11 May 2024

Decision and reasons on review of the substantive order

This is the second review of a substantive suspension order originally imposed for a period of 12 months by a Fitness to Practise panel by a Consensual Panel Determination at a meeting on 12 April 2023. The order was reviewed at an early review hearing on 5 October 2023 when the suspension order was confirmed for the remaining period.

The current order is due to expire at the end of 11 May 2024.

The panel is reviewing the order pursuant to Article 30(1) of the Order.

The charges found proved by way of admission which resulted in the imposition of the substantive order following a Consensual Panel Determination and stated:

‘ Mr Amalime admits the following charges:

That you, a registered nurse:

1) On 29 June 2021:

a) Punched Patient A;

b) Kicked Patient A; and

c) Failed to follow restraining techniques and procedure in accordance with the Trust’s policy.

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

The previous reviewing panel determined the following with regard to impairment:

‘In reaching its decision, the panel was mindful of the need to protect the public, maintain public confidence in the profession and to declare and uphold proper standards of conduct and performance.

The panel considered whether your fitness to practise remains impaired.

The panel noted that the original panel found that your insight was still developing.

In its consideration of whether you have taken steps to strengthen your practice, the panel took into account your engagement with the NMC proceedings, your reflection and the impact your actions would have on the patient and the steps you are taking to strengthen your practice through training.

In its consideration of whether you have remedied your practice, the panel took into account the training you have undertaken and your reflections including your letter of 18 August 2023. Despite this the panel concluded that your insight is still developing, and that further insight and reflection is necessary. The panel concluded you had demonstrated insufficient insight into the impact of your actions on patient A, your colleagues, and the wider profession. The panel determined that as you have stated you are unable to fully explain why you reacted the way you did in the incident, a risk of repetition remains. The panel determined that there is still a risk of harm to the public and a finding of impairment remains necessary on the grounds of public protection.

The panel has borne in mind that its primary function is to protect patients and the wider public interest which includes maintaining confidence in the nursing profession and upholding proper standards of conduct and performance. The panel determined that, in this case, a finding of continuing impairment on public interest grounds is required.

For the reason of facts these facts and those found at the original hearing, the panel finds that your fitness to practise remains impaired.'

The previous 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 next considered whether a conditions of practice order would be a sufficient and appropriate response. The panel is mindful that any conditions imposed must be proportionate, measurable and workable. The panel bore in mind the seriousness of the facts found proved at the original hearing and concluded that a conditions of practice order would not adequately protect the public or satisfy the public interest. The panel was not able to formulate conditions of practice that would adequately address the concerns raised by your current level of insight and your being unable to account for why your conduct occurred and the risk of repetition that this presents. It therefore concluded that the risks have not yet been adequately addressed.

The panel therefore considered whether to confirm the existing suspension order. It concluded to do so would allow you further time to fully reflect more deeply, particularly from the patient's perspective on your insight into the impact this incident had on the patient and your colleagues. This would also allow you time to gain a full understanding of how the actions of one nurse can impact upon the nursing profession as a whole and not just the organisation that the individual nurse is working for. It therefore concluded that to confirm the suspension order would be the appropriate and proportionate response.

The panel determined that confirmation of the existing suspension order would continue both to protect the public and satisfy the wider public interest.

The panel did consider a striking-off order as a sanction but concluded that this would be wholly disproportionate and would not be a reasonable response in the circumstances of your case.

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

Any future panel reviewing this case would be assisted by:

- *References from any employment or voluntary work you undertake;*
- *A more detailed reflective piece on the following:*
 - *why the incident occurred and your reaction;*
 - *the impact of your actions on the patient, the public, your colleagues and the wider profession; and*
- *Your attendance at the next review hearing...'*

Decision and reasons on current impairment

Mr Radley on behalf of the Nursing and Midwifery Council (NMC) submitted that it is the NMC's position that the decision in relation to the Order is to be left to the panel, and the NMC make no particular representations in relation to the Order.

Mr Radley took the panel through the background of the case and the reasoning of the previous panel's determination on 5 October 2023.

Mr Radley drew the panel's attention to the previous panel's directions on certain actions to be considered by you prior to any future panel reviewing this case, which included:

- *'References from any employment or voluntary work you undertake;*
- *A more detailed reflective piece on the following:*
 - *why the incident occurred and your reaction;*

- *the impact of your actions on the patient, the public, your colleagues and the wider profession; and*
- *Your attendance at the next review hearing.'*

Mr Radley acknowledged your attendance today and the further reflective piece you have provided.

You told the panel that you sincerely apologise and deeply regret your actions to all parties involved, including your former employer, the NMC and to the patient involved. You said that it was not an intentional or deliberate action against the patient but felt you were under attack, and you tried to save yourself. You acknowledged that you may have over-reacted.

You told the panel that you have undertaken Cognitive Behavioural Therapy (CBT) training which has helped you to understand how to do things differently next time. You said that you needed training on focussing on mindfulness and how to control your impulsive behaviour in times of situations such as this. You have also taken further training on risk management in health instructional care, safeguarding, management of physical violence and how to keep safe from patients. You said that at the time you did not follow the safety rule of breaking away techniques or safe techniques.

You told the panel that the Order has been distressing however it has given you time to reflect on the incident. You said that you would like the panel to allow you to return to nursing practice. You said you have never had any incidents brought against you nor are you of questionable character.

You said that a career in nursing practice is what you have done all of your life. You said that you are not a violent person, have never been to a police station nor fought anyone in your life.

In response to panel questions, you confirmed that you had been practising as a mental health nurse for four years prior to the incident and before that you worked as a healthcare assistant in mental health. You said that you are currently employed as a warehouse operative for a logistics company. You explained in more detail the training courses you have undertaken and said they were undertaken over the last two years. In terms of

keeping up to date within the sector, you said that you receive publication updates on clinical topics from the Royal College of Nursing (RCN) and your former employer.

The panel has considered carefully whether your 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. It has taken account of the submissions made by Mr Radley on behalf of the NMC and those made by you.

The panel accepted the advice of the legal assessor, which included reference to *Cohen v GMC [2008] EWHC 581 (Admin)*.

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.

The panel noted that the last reviewing panel found that your insight was still developing. At this hearing, the panel was of the view that you have demonstrated an understanding of how your actions put the patient at a risk of harm and an understanding of why what you did was wrong and how this impacted negatively on the reputation of the nursing profession. The panel took account that you apologised to the patient for your actions.

When questioned during the course of this hearing about how you would handle the situation differently in the future, you were able to provide sufficiently detailed answers to the panel's satisfaction.

In its consideration of whether you have taken steps to strengthen your practice, the panel took into account that you have not been working as a nurse therefore have not had an opportunity to do so. The panel took into account the training you have undertaken, including Cognitive Behavioural Therapy (CBT), risk management in health instructional care, safeguarding, management of physical violence and how to keep safe from patients. The panel also considered the (undated) supplementary reflective piece you provided addressing how your actions impacted your former employer, the patient and members of the public.

The last reviewing panel determined that as you have stated you were unable to fully explain why you reacted the way you did in the incident, a risk of repetition remains. Today's panel has heard oral submissions from you, had regard to the further reflective statement you provided and the further extensive training you have undertaken. The panel was satisfied that you would be better equipped to deal with a situation if an incident was to occur again. The panel acknowledge that you have not been able to strengthen your practice as you have not been working as a nurse.

In light of this, this panel determined that you are now not liable to repeat matters of the kind found proved. The panel therefore decided that a finding of continuing impairment is not necessary on the grounds of public protection.

The panel has borne in mind that its primary function is to protect patients and the wider public interest which includes maintaining confidence in the nursing profession and upholding proper standards of conduct and performance. The panel determined that, in this case, a finding of continuing impairment on public interest grounds is also not required.

For these reasons, the panel finds that, although your fitness to practise was impaired at the time of the incidents, given all of the above, your fitness to practise is not currently impaired.

In accordance with Article 30(1), the suspension order will lapse upon expiry, namely 11 May 2024.

This will be confirmed to you in writing.

That concludes this determination.