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

## Substantive Order Review Meeting Friday, 1 March 2024

Nursing and Midwifery Council 2 Stratford Place, Montfichet Road, London, E20 1EJ

Name of Registrant: Catherine Margaret Hunter

**NMC PIN** 88D0159N

Part(s) of the register: Registered Nurse – Adult

Effective - 1 October 2001

Registered Nurse – Children Effective – 1 October 2001

Relevant Location: Belfast

Type of case: Misconduct

Panel members: Richard Youds (Chair, Lay member)

Jim Blair (Registrant member) Linda Redford (Lay member)

Legal Assessor: John Moir

**Hearings Coordinator:** Amanda Ansah

Order being reviewed: Suspension order (12 months)

Fitness to practise: Impaired

Outcome: Striking-Off order to come into effect at the end of 11

April 2024 in accordance with Article 30 (1)

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

The panel noted at the start of this meeting that the Notice of Meeting had been sent to Mrs Hunter's registered email address by secure email on 12 January 2024.

The panel took into account that the Notice of Meeting provided details of the review, that the review meeting would be held no sooner than 19 February 2024 and inviting Mrs Hunter to provide any written evidence seven days before this date.

The panel accepted the advice of the legal assessor.

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

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

The panel decided to impose a striking-off order. This order will come into effect at the end of 11 April 2024 in accordance with Article 30(1) of the Nursing and Midwifery Order 2001 (as amended) (the Order).

This is the first review of a substantive suspension order originally imposed for a period of 12 months by a Fitness to Practise Committee panel on 14 March 2023.

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

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) On 16 September 2019 signed a clock report for the week commencing 9 September 2019 which included inaccurate information regarding the hours you worked on 11 September 2019.
- 2) On 21 October 2019 signed a clock report for the week commencing 14 October 2019 which included inaccurate information regarding the hours you worked on 17 October 2019.
- 3) ....
- 4) On 11 or 12 November 2019 asked a Colleague A to say you had met her on the morning of 11 September 2019 when you had not.
- 5) Your actions at charge 4 were dishonest in that you were seeking to mislead your employer as to your whereabouts on 11 September 2019.
- 6) ...
- 7) ...
- 8) Placed signatures for one or more of the staff members detailed in Schedule 2
- 9) Your actions at charge 8 were dishonest in that you were seeking to give the misleading impression that the staff members had signed the documents when they had not.'

The original panel determined the following with regard to impairment:

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

Nurses occupy a position of privilege and trust in society and are expected at all times to be professional. Patients and their families must be able to trust nurses

with their lives and the lives of their loved ones. 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/ 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 finds that Mrs Hunter's misconduct had breached 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 heard Mr James' submissions that Mrs Hunter's fitness to practise is impaired on the ground of public protection. However, the panel noted that there is no evidence before it that resources had been taken away from patients as a result of Mrs Hunter's action or evidence of any consequential effect in the ward or the Hospital. The panel was of the view that Mrs Hunter's actions were dishonest in her managerial position at the Hospital and that the evidence before it is insufficient to demonstrate that the public protection ground is engaged.

Regarding insight, the panel noted that in Mrs Hunter's response bundle, she acknowledged her "errors of judgment" and expressed some remorse regarding her wrongdoings. However, the panel concluded that Mrs Hunter demonstrated limited insight into the consequences of her wrongdoings.

The panel considered that Mrs Hunter's actions were in breach of fundamental tenets of the profession and are likely to bring the profession into disrepute. It took into account the relevant Guidance and that dishonesty is difficult to remediate. It noted that there is no evidence before it regarding what Mrs Hunter has done, if anything, to address or remediate her dishonesty. It took into account that Mrs Hunter, by asking Witness 6 to lie, actually tried to cover up her dishonesty.

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 therefore determined that a finding of impairment on public interest grounds is required. The panel concluded that public confidence in the profession would be undermined if a finding of impairment were not made in this case.

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

The original panel determined the following with regard to sanction:

'Having found Mrs Hunter'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 Sanctions Guidance (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:

- Lack of full insight into failings
- More than one incident of dishonesty
- Dishonesty over a period of time
- Abuse of a position of trust, in that Mrs Hunter pressurised a junior member of staff to lie

The panel also took into account the following mitigating features:

- Mrs Hunter made early admissions in relation to some charges
- Mrs Hunter expressed remorse in relation to some charges
- Previous good character over a 31-year career
- No clinical concerns

The panel first considered whether to take no action but concluded that this would be inappropriate in view of the dishonesty elements in this case and the seriousness of the misconduct found. The panel decided that it would be neither proportionate nor in the public interest to take no further action.

The panel then considered the imposition of a caution order but again determined that, due to the dishonesty elements of the case and the seriousness of the misconduct found, an order that does not restrict Mrs Hunter'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 Hunter'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 placing conditions of practice on Mrs Hunter's registration would be a sufficient and appropriate response. The panel is mindful that any conditions imposed must be proportionate, measurable and workable. However, the panel is of the view that there are no practical or workable conditions that could be formulated, given the nature of the misconduct in this case which was not something that can be addressed through retraining. Furthermore, the panel concluded that the placing of conditions on Mrs Hunter's registration would not adequately address the dishonesty element of this case.

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

• No evidence of repetition of behaviour since the incident;

The panel was satisfied that in this case, the misconduct was not fundamentally incompatible with remaining on the register.

The panel did go on to consider whether a striking-off order would be proportionate but, taking account of all the information before it, and of the mitigation identified,

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 Mrs Hunter's case to impose a striking-off order.

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

The panel noted the hardship such an order will inevitably cause Mrs Hunter. However, this is outweighed by the public interest in this case.

The panel considered that this order is necessary to mark the importance of maintaining public confidence in the profession, and to send to the public and the profession a clear message about the standard of behaviour required of a registered nurse.

The panel determined that a suspension order for a period of one year was appropriate in this case to mark the seriousness of the misconduct and address the dishonesty element.'

## Decision and reasons on current impairment

The panel has considered carefully whether Mrs Hunter'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 an email from Mrs Hunter dated 26 October 2023.

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

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

The panel considered whether Mrs Hunter's fitness to practise remains impaired.

The panel noted that the original panel found that Mrs Hunter had limited insight. At this meeting, the panel determined that there had been no change in this position. Mrs Hunter has made no further attempts to demonstrate developing insight since the substantive order was imposed. There is no evidence before this panel that she has taken steps to ensure that she is no longer impaired.

In its consideration of whether Mrs Hunter has taken steps to strengthen her practice, the panel determined that it did not have any evidence before it to suggest that Mrs Hunter has taken any action to remediate the concerns. The panel noted that the only new information before it from Mrs Hunter was an email dated 26 October 2023 in which she states:

"In consultation with my legal representatives and following their advice, I didn't engage in the initial hearing and this position will remain in place going forward.

I accept the previous decision the NMC came to and regret the entire episode.

I advise that I wasn't in a position to re-validate as a nurse in September 2022 and I have no intention of doing this in the future. My career in nursing is at an end and it is my intention to retire from all employment in 2024."

This panel noted that the original panel determined that impairment was not necessary on the grounds of public protection as there was insufficient evidence before it to demonstrate that the public protection ground was engaged.

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 these reasons, the panel finds that Mrs Hunter's fitness to practise remains impaired.

#### Decision and reasons on sanction

Having found Mrs Hunter'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, an order that does not restrict Mrs Hunter'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 Hunter'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 a conditions of practice order on Mrs Hunter's registration would be a sufficient and appropriate response. The panel is mindful that any conditions imposed must be proportionate, measurable, and workable. The panel bore in mind the seriousness of the facts found proved at the original hearing and concluded that a conditions of practice order would not adequately satisfy the public interest. The panel was not able to formulate conditions of practice that would adequately address the concerns relating to Mrs Hunter's misconduct.

The panel has received information from Mrs Hunter in her email dated 26 October 2023 that she does not intend to return to practise as a nurse and her "career in nursing is at an

end". In view of Mrs Hunter's clear settled intention not to return to nursing and no evidence of strengthened practice, the panel considered that any conditions of practice order would not be workable and would serve no useful purpose.

The panel next considered imposing a further suspension order. It determined that Mrs Hunter has not demonstrated any further insight into her previous failings. The panel was of the view that considerable evidence would be required to show that Mrs Hunter had strengthened her practise sufficiently for her to return back to practise. The panel determined that a further period of suspension would not serve any useful purpose in all of the circumstances. The panel determined that it was necessary to take action to give effect to Mrs Hunter's desire to bring her nursing career to an end. The panel concluded that the only sanction that would adequately serve the public interest was a striking-off order.

This striking-off order will take effect upon the expiry of the current suspension order, namely the end of date in accordance with Article 30(1).

This decision will be confirmed to Mrs Hunter in writing.

That concludes this determination.