

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

**Substantive Order Review Hearing  
Thursday, 9 May 2024 and  
Friday, 17 May 2024**

Virtual Hearing

**Name of Registrant:** Kamila Maria Ahonle

**NMC PIN** 11F2207E

**Part(s) of the register:** Children's Nurse – Level 1 (March 2012)  
RSN – Specialist Practitioner: School Nurse (January 2014)  
V100 – Nurse Prescriber (March 2014)

**Relevant Location:** Hackney

**Type of case:** Misconduct

**Panel members:** Elliott Kenton (Chair, Lay member)  
Sharon Haggerty (Registrant member)  
Georgina Wilkinson (Lay member)

**Legal Assessor:** Paul Hester

**Hearings Coordinator:** Khatra Ibrahim

**Nursing and Midwifery Council:** Represented by Rosie Welsh, Case Presenter

**Mrs Ahonle:** Present and represented by Simon Holborn and supported by Cathryn Watters, both of HumansHR

**Order being reviewed:** Suspension order (6 months)

**Fitness to practise:** Impaired

**Outcome:** **Suspension order (6 months) to come into effect on 14 June 2024 in accordance with Article 30 (1)**

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

At the outset of the hearing, Mr Holborn, on your behalf made an application that this case be held partly in private on the basis that the presentation of your case [PRIVATE] The application was made pursuant to Rule 19 of the 'Nursing and Midwifery Council (Fitness to Practise) Rules 2004', as amended (the Rules).

Ms Welsh, on behalf of Nursing and Midwifery Council (NMC) indicated that she supported the application to the extent that any reference to [PRIVATE].

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.

Having considered the application, the panel granted the application for the hearing to be heard partly in private. It directed the parties to indicate when they were to go into private session in connection [PRIVATE].

## **Decision and reasons on review of the substantive order**

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

The current order is due to expire at the end of 14 June 2024.

This is the first review of a substantive suspension order originally imposed for a period of 6 months by a Fitness to Practise Committee panel on 14 November 2023.

The panel decided to confirm and extend the current suspension order for a further period of 6 months.

This order will come into effect at the end of 14 June 2024 in accordance with Article 30(1) of the 'Nursing and Midwifery Order 2001' (the Order).

The charges found proved by way of admission and by facts proved on the evidence which resulted in the imposition of the substantive order were as follows:

***'Details of charges***

*That you, a registered nurse:*

- 1. Between September and October 2020, failed to attend one or more looked after children's homes to conduct required review health assessments.*
- 2. On 18 November 2020, indicated to Colleague A that you had conducted the review health assessments referred to at charge 1*
- 3. Your actions at charge 2 were dishonest in that you knew you had not conducted the relevant review health assessments and were seeking to mislead Colleague A.*
- 4. Between September and October 2020, failed to complete one or more review health assessments within a reasonable time of having visited the relevant looked after child's home.*
- 5. Failed to raise safeguarding concerns in respect of Child A's parents' behaviour timeously or, in any event, at any point prior to your own practice in respect of Child A being called into question.*
- 6. Used Child A's iPad for your own personal use.*
- 7. Your actions at charge 6 breached professional boundaries with Child A.*
- 8. On one or more occasions between 21 and 27 October 2020:*
  - a) administered medication to Child A:*
    - i. Without checking that the medication was in date.*
    - ii. Without checking the medication was in its true form.*

- iii. *Without shaking the medication bottle to ensure active ingredients are equally distributed.*
- iv. *[...]*
- v. *Without checking medication to be given by syringe at eye level or otherwise in a manner which would allow you to check that the right amount had been withdrawn.*
- vi. *[...]*
- vii. *[...]*
- viii. *With the lights in Child A's room turned off.*

b) *Failed to have appropriate regard to infection control procedures in that you provided care to Child A without any or any adequate personal protective equipment in place.*

9. *[...]*

10. *On 25 October 2020, failed to have appropriate regard to a Child A's dignity in that, without clinical reason, you allowed him to be naked/partially naked.*

11. *On 25 and 27 October 2020, took personal calls when you were responsible for Child A's 121 care.*

12. *On 25 and 27 October 2020, moved Child A in a manner contrary to his care plan.*

13. *[...]*

14. *On 27 October 2020, worked a shift for First Options and claimed to have also worked at shift for Homerton Healthcare NHS Foundation Trust.*

15. *On 03 November 2020, worked a shift for First Options and claimed to have also worked at shift for Homerton Healthcare NHS Foundation Trust.*

16. *Your actions at charges 14 and 15 were dishonest in that you knew you had not simultaneously worked for First Options and Homerton Healthcare NHS Foundation Trust.'*

The original panel determined the following with regard to impairment:

*'The panel next went on to decide if, as a result of your 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 and to maintain professional boundaries. 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 regard to making a decision on whether your fitness to practice was impaired in the past the panel considered the judgment of Mrs Justice Cox in the case of CHRE v NMC and Grant [2011] EWHC 927 in reaching its decision. 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 Child A was put at risk and could have been caused physical and/or emotional harm as a result of your misconduct, and the lack of proper checks on the LAC also risked harm to them. Your misconduct had breached the fundamental tenets of the nursing profession and therefore brought its reputation into disrepute. It was satisfied that confidence in the nursing profession would be undermined if its regulator did not find charges relating to dishonesty extremely serious.*

*In making its decision on whether your fitness to practice is currently impaired by reason of your misconduct the panel considered the case of Ronald Jack Cohen v General Medical Council [2008] EWHC 581 (Admin) where the court set out three matters which it described as being 'highly relevant' to the determination to the question of current impairment:*

- 1. Whether the conduct that led to the charge(s) is easily remediable*
- 2. Whether it has been remedied*
- 3. Whether it is highly unlikely to be repeated'*

*The panel considered that the following categories encapsulate the charges proved in this case and made its decision on current impairment through these categories:*

- Dishonesty (Charges 2, 3, 14, 15 and 16);*
- Not completing assigned tasks for LACs (Charges 1 and 4);*
- Safeguarding concerns (Charge 5);*
- Professionals boundaries (Charges 6, 7 and 11);*
- Medication administration (Charge 8(a)(i), (ii), (iii) and (v));*
- Personal Protective Equipment (PPE) concerns (Charge 8(b));*
- Protecting Child A's dignity (Charge 10);*

- *Moving and Handling (Charge 12).*

*Regarding the dishonesty concerns, the panel acknowledged that this is inherently difficult to remediate dishonesty. However, the panel determined that the dishonesty in this case is capable of being remedied as the panel found that it was largely unpremeditated. In determining whether this dishonesty has been remedied, the panel considered the detailed reflections you have provided as well as the difficult personal circumstances that were affecting you at the time. In your reflection you explained that the choices you made at charges 1, 2, 14 and 15 were wrong and you identified how you would act differently in the future. It determined that these reflections do show that you understand the crucial importance of honesty for a registered nurse and that you have identified the influencing factors in your dishonest acts.*

*In considering the likelihood or otherwise of repetition, the panel took into account [PRIVATE] and how you considered that the associated muddled thinking was instrumental in leading to your dishonest acts. [PRIVATE] On this basis the panel determined that, whilst you have shown insight into the dishonesty concerns and it is unlikely that these actions will be repeated, it cannot be satisfied that the high bar of actions being 'highly unlikely' set out in the third question of Cohen has been met. The panel determined that, in relation to dishonesty, a finding of current impairment is necessary on public protection grounds due to the current risk of repetition whilst [PRIVATE] are very new. The panel also determined that, in relation to dishonesty, a finding of impairment is otherwise necessary on public interest grounds as a well-informed member of the public would be concerned if dishonesty charges were not dealt with seriously.*

*In relation to the second category outlined above, the panel determined that your actions in not completing assigned tasks for LACs are remediable. The panel determined that you have partly remediated this concern through your lengthy reflections in which you expressed remorse, explained what you would do differently in the future, provided examples of training you have undertaken to address this concern, and explained the effects of your [PRIVATE]. However, the panel was not satisfied that these actions are 'highly unlikely to be repeated'*

*because your [PRIVATE] is only recent and you have expressed that you are still getting to grips with it. The panel determined that [PRIVATE]. The panel therefore determined that a finding of current impairment is necessary on public protection grounds due to the risk of repetition. The panel determined that a finding of current impairment is also necessary in the public interest as a well-informed member of the public would be concerned that a panel who found a risk of repetition did not find current impairment.*

*In relation to the safeguarding concerns the panel determined that these can be remedied. The panel determined that through your reflections you have provided clear reasons why you did not escalate safeguarding concerns and you recognised what you should have done in this situation. You provided an example of how you have raised safeguarding concerns in your current working position. The panel determined that the safeguarding concerns have been remedied and it is highly unlikely for you to repeat this behaviour. It therefore determined that a finding of impairment is not necessary in relation to safeguarding concerns.*

*Regarding professional boundaries and taking personal calls on duty, the panel determined that these can be remedied. It determined that the reflection provided is sufficient in that you have explained why these actions were wrong and you have explained what you do differently in your current employment to ensure this does not happen again. The panel therefore determined that it is highly unlikely that you would repeat these actions and so determined that a finding of current impairment is not necessary in relation to professional boundaries or taking personal calls on duty.*

*In relation to the medication administration concerns, the panel determined that this is possible to be remedied. The panel noted your reflections in which you explained what you would do differently. Whilst the panel determined that the medication administration concerns can be remedied, it determined that your reflections have not met the high bar of showing that these actions are 'highly unlikely' to be repeated and you have yet to demonstrate practical remediation, specifically in relation to the administration of medication to children. The panel determined that a finding of impairment is necessary on public protection grounds due to the risk of*



*repetition. Due to this risk the panel determined that a finding of current impairment is otherwise necessary on public interest grounds.*

*The panel determined that the PPE concerns are capable of remediation. It noted your reflections in which you explained the importance of PPE and stated that you now wear PPE in your current employment as you understand the importance of infection control. The panel determined that the reflections provided are sufficient to show that it is highly unlikely that these actions would be repeated and so determined that a finding of current impairment, in relation to PPE concerns, is not necessary.*

*In considering the concerns relating to the maintenance of Child A's dignity, the panel determined that these can be remediated. The panel considered your reflections including how important you find maintaining your current employer's dignity is and you acknowledged why maintaining Child A's dignity was important. The panel was satisfied that it is highly unlikely that you would repeat these concerns based on your reflections. Additionally, the panel determined that the concerns relating to incorrect moving and handling can be remedied and that you have shown sufficient remediation of these concerns through your reflections together with examples you have outlined in how you are using correct moving and handling techniques in your current employment. The panel therefore determined that a finding of current impairment is not necessary in relation to maintaining patient dignity or moving and handling techniques.*

*In summary, the panel determined that a finding of current impairment is necessary on public protection grounds and is otherwise necessary in the public interest in relation to the concerns relating to:*

- Dishonesty;*
- Not completing your assigned tasks for LAC; and*
- Medication administration.*

*Having regard to all of the above, the panel was satisfied that your fitness to practise is currently impaired in relation of dishonesty concerns not completing*

*assigned tasks for LAC and medication administration concerns, but not in relation to any of the other findings of misconduct identified earlier in this determination.'*

The original panel determined the following with regard to sanction:

*'Having found your 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') and the advice of the legal assessor. The decision on sanction is a matter for the panel independently exercising its own judgement.*

*The panel first took account of the NMC's guidance on Considering sanctions for serious cases, specifically the guidance on dishonesty. The panel found that whilst there were two instances, they were not premeditated and did not constitute a pattern of behaviour. In the first case, your lack of honesty about the work you had not done caused indirect risk to the LAC, but the panel considered this to be an unplanned reaction brought about by your stress. In the second case, you may have gained financially from the shifts worked for the agency when you should have been working for the Trust, but the panel determined that any gain was incidental and not the motivation for your action which was responding to a plea for urgent assistance from Child A's mother. [PRIVATE] and the pressured working environment at the Trust. Weighing all of these factors, the panel found your dishonesty to be at the lower end of the spectrum.*

*The panel took into account the following aggravating features:*

- The patients in your care, both Child A and the LAC, were vulnerable and were put at potential risk of harm;*
- There is a risk of repetition in the clinical concerns;*
- Dishonesty concerns, albeit at the lower end of the scale, are always serious.*

*The panel also took into account the following mitigating features:*

- *[PRIVATE];*
- *[PRIVATE];*
- *The significant insight and remorse shown through your in-depth reflections;*
- *Evidence of your efforts to strengthen your practice;*
- *The difficult working environment and lack of staffing resources at the Trust at the time of the concerns;*
- *Positive testimonials provided, including one from a registered nurse and another from your current employer, both of whom had full knowledge of the concerns*

*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 placing conditions of practice on your registration would be a sufficient and appropriate response. The panel is mindful that any conditions imposed must be proportionate, measurable and workable. The panel took into account the SG, in particular:*

- *No evidence of harmful deep-seated personality or attitudinal problems;*
- *Identifiable areas of the nurse or midwife's practice in need of assessment and/or retraining;*
- *No evidence of general incompetence;*
- *Potential and willingness to respond positively to retraining;*

- *The nurse or midwife has insight into any health problems and is prepared to agree to abide by conditions on medical condition, treatment and supervision;*
- *Patients will not be put in danger either directly or indirectly as a result of the conditions;*
- *The conditions will protect patients during the period they are in force; and*
- *Conditions can be created that can be monitored and assessed.*

*The panel is of the view that practicable and workable conditions could be formulated to address the clinical concerns in this case as the panel could impose conditions for a period of supervised practice to ensure that you are on top of your workload and that you are administering medication safely. However, whilst the panel determined that the dishonesty concerns in this case are at the lower end of the scale of seriousness, it determined that there are no practicable or workable conditions that could be formulated to address this at this time. It noted that dishonesty is inherently difficult to rectify through conditions as it is not something that can be monitored or assessed. The panel concluded that the placing of conditions on your registration would not adequately address the seriousness of the dishonest elements of this case and would not satisfy the public interest in this regard.*

*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:*

- *A single instance of misconduct but where a lesser sanction is not sufficient;*
- *No evidence of harmful deep-seated personality or attitudinal problems;*
- *No evidence of repetition of behaviour since the incident;*
- *The Committee is satisfied that the nurse or midwife has insight and does not pose a significant risk of repeating behaviour;*

- *In cases where the only issue relates to the nurse or midwife's health, there is a risk to patient safety if they were allowed to continue to practise even with conditions.*

*The panel was satisfied that in this case, the misconduct was not fundamentally incompatible with your remaining on the register. The panel considered the dishonesty in this case is at the lower end of the spectrum of seriousness and does not show evidence of a deep-seated attitudinal problem. The panel noted that this is not a single instance of misconduct, but it was satisfied that you have shown significant insight. The panel considered that a suspension order would be sufficient to satisfy the public interest in this case in marking that dishonesty is unacceptable.*

*It 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 provided, 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.*

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

*The panel took account of the NMC Guidance that, in a dishonesty case, it does not only have a choice between suspending a nurse or removing them from the register, but on the facts of this case the panel concluded that a conditions of practice order would be too lenient and a striking-off order would be too harsh a sanction.*

*The panel noted the hardship such an order will inevitably cause you. 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 6 months was sufficient to mark the seriousness of the dishonesty in this case.*

*At 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:*

- *Your continued engagement and attendance at the review hearing;*
- *Written evidence of your efforts to keep up to date with professional practice in your field, including completion certificates of courses if available;*
- *Testimonials;*
- *[PRIVATE]*
- 

### **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 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 had regard to all of the documentation before it, including the NMC bundle, your documentation, responses from you and submissions from Mr Holborn and Ms Welsh. It has taken account of the submissions made by Ms Welsh on behalf of the NMC. She took the panel through the background of the case and submitted that at the conclusion of the substantive hearing on 14 November 2023, a suspension order was imposed on your practice. [PRIVATE]. She submitted that the order was made on the grounds of public protection and public interest and that the original panel found your fitness to practice impaired. She also submitted that the previous panel, although it had reflective pieces from

you, found your fitness to practice impaired in relation to not completing assignments for the LAC (Looked After Children) and medication administration. She also submitted that the charges proved amounted to misconduct and that there was a serious shortfall in your conduct and standards of practice.

She submitted that the NMC's position is neutral in relation to impairment and sanction, and it is for the panel to decide if any restrictions should be placed on your practice.

The panel also had regard to submissions from Mr Holborn, on your behalf. He submitted that the NMC process has been a difficult time for you and that you have strengthened your practice by way of training and reflections since the suspension was imposed on 14 November 2023. He submitted that the charges are serious, and you have fully engaged with the NMC's procedures. He submitted that you have attended courses and have provided reflective pieces and testimonials to the panel today. He submitted that your practice is no longer impaired and that the current order should be revoked.

You gave evidence under oath.

Mr Holborn asked how the order has given you insight and you said the imposition of the suspension order gave you sufficient time to [PRIVATE].

You said that you understand and accept the seriousness of the dishonesty and medication administration charges, and the impact it has had on your patients and family. You also stated that being a nursing professional is not only confined to the workplace, and that [PRIVATE] has an impact on your accountability to patients and the public. You said that you have gained insight into what has happened and that you have remediated and reflected on what has occurred. You said that you have engaged with and attended a course run by Health Education England (HEE) and this has strengthened your practice and increased your knowledge. You also said that upon completion, a certificate was issued to you.

You said that you have been fully focused on your professional growth and you feel you are no longer a burden to the NMC, as your regulator. You said that you have a better understanding of what has happened [PRIVATE].

You said that you have acknowledged and accepted [PRIVATE].

[PRIVATE].

You are currently working in a role as a Young People's Advisor. You told the panel you are grateful to have an opportunity to work with young people and that you wish to eventually specialise in ADHD and ADD care, as that is your passion. You also told the panel you have been working as a personal assistant since December 2023 and that you feel your employer has been very supportive and is aware of the NMC proceedings. [PRIVATE], you assessed the risks of continuing to work for this employer and decided you could no longer fulfil this role due to risks you identified to both the patients and yourself.

Mr Holborn asked you how you have dealt with the concerns related to dishonesty and public protection. You said that you have accepted and taken accountability for what has happened. You said that you have taken steps to acknowledge the impact it has had, and you recognise when you need to seek support from your employer when struggling. You told the panel that you have been engaging in weekly supervision meetings with your line manager, and that you feel comfortable to approach your manager when you feel you are struggling with the tasks at hand. [PRIVATE].

Mr Holborn asked how you have changed since the imposition of the suspension order, and you said that you always seek and accept help and advice. You said that you acknowledge the issues highlighted and that you are now constantly risk assessing situations when at work. [PRIVATE].

Mr Holborn asked you how you would return to nursing if the panel today were to change or revoke the order. You said that there are a number of testimonials provided by a number of your colleagues and university supervisors, detailing your professional practice and your personal development. You told the panel that if you were to return to nursing, your aspiration would be to resume work as a school nurse.



When questioned by Ms Welsh on the concerns related to medication administration and how you have improved, you said that you have undertaken online courses suitable for paediatric nurses. You have been assessed online as competent in medication administration and going forward, you explained what you would do differently following the medication course, such as the “five rights approach” to medicine administration. You also told the panel that when you start a new role as a nurse, you would ensure your competencies were completed and that if you have any queries, you would ask for support from another qualified nurse. You said that you understand the importance of keeping patients safe by administering the correct dose of medication and ensuring the correct medications are administered appropriately.

In response to Ms Welsh’s question regarding workload and how you intend to manage it, you said that you plan to break down tasks into more manageable pieces, and if you feel like you [PRIVATE], you understand you must notify your supervisor/line manager. You said that you understand that the vulnerable patients you work with require a level of care, and that they are often subject to safeguarding and you realise the importance of being accountable for your workload and patient safety is paramount.

In response to Ms Welsh’s questions on dishonesty, [PRIVATE]. You told the panel that the impact of dishonesty as a nurse is that it can put patients at risk of harm, and that honesty is crucial for being a professional, and being accountable. You also told the panel that the public could lose confidence in the nursing profession if a nurse is found to be dishonest.

In response to panel questions on medications management, you responded that in your role as a personal assistant you assisted with the patient’s medication administration, but that this was different to your role as a nurse as the patient had to consent to the medication and took accountability for his own medication management.

In response to panel questions on dishonesty, you told the panel that you now realise it is a criminal offence to commit fraud. You advised that your dishonesty occurred as the mother of Child A kept asking you for help. [PRIVATE] and that you ended up working for two employers at the same time. [PRIVATE].

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 your fitness to practise remains impaired.

In regard to insight, the panel noted the training courses you have undertaken, and the certificates contained in the bundle before it. [PRIVATE]. Through your written evidence, the panel determined that you have demonstrated some understanding of how your actions put patients at risk of harm and that you now understand how these actions were wrong and how this has negatively impacted on the reputation of the nursing profession. When questioned during the course of this hearing about how you would handle the situation differently in the future, you were able to provide sufficient information related to the steps you would take to handle any issues which may arise.

In its consideration of whether you have taken steps to strengthen your practice, the panel took into account the training certificates, courses, engaging with your healthcare professionals and with your employer, by way of your line manager. The panel took into account your reflective piece dated 17 March 2024 where you state:

*'Beyond theoretical knowledge, the training emphasized the importance of a holistic approach. This includes assessing a CYP's mental health status alongside their physical needs and providing support to families navigating challenging situations. Additionally, it underscored the crucial responsibility of healthcare professionals in recognizing and escalating safeguarding concerns.*

*However, my commitment to continuous learning extends beyond this initial training. Understanding the lived experiences of individuals with neurodiversity's remains paramount. This includes actively seeking out resources from autistic individuals themselves and organizations dedicated to supporting them.*

*My particular interest lies in supporting CYP with complex needs, especially those who may be non-verbal. This requires a deep understanding of various communication styles and the flexibility to adapt my approach to meet everyone's needs. Whether it's utilizing visual aids, employing alternative communication methods, or simply creating a calm and patient environment, I strive to ensure clear communication and build trusting relationships with all CYP under my care.'*

This panel also took into account a further reflective piece related to dishonesty dated 17 March 2024, where you state:

*'Three years ago, I made a grave mistake by acting dishonestly. This eroded the very foundation of trust that nursing is built upon, and I deeply regret the harm I caused. While there are no excuses for my actions...This experience, though painful, has been a valuable lesson...*

*...I am now a more reflective practitioner who understands the importance of prioritizing my well-being while fulfilling my professional duties. The core values of nursing – equity, diligence, and perseverance – are at the heart of everything I do. By consistently applying these values and upholding the nursing code of conduct, I can ensure such an incident never happens again....*

*...Being a nurse is more than just a job; it's a vocation built on trust and compassion. Bringing smiles to patients' faces and fostering unconditional trust is a privilege I take very seriously. Taking care of others has always been a core part of my identity, and it is a privilege I continue to embrace with renewed commitment. Finally, I am grateful for the opportunity to reflect on this experience and learn from my mistakes. I sincerely apologize to my patients, my regulator, and everyone affected by my actions. Moving forward, I am dedicated to being a safe, ethical, and compassionate nurse who embodies the true spirit of the nursing profession.'*

Having carefully considered your written evidence, the panel also considered your oral evidence at this hearing.

The panel noted the substantive panel's decision in respect of your dishonesty:

*'However, the panel determined that this mitigation provided by you does not outweigh the evidence which has satisfied the panel that you did have clear knowledge/belief that you had worked for First Options (the Agency) on two occasions when you should have been working for Homerton Healthcare NHS Foundation Trust (the Trust).'*

The panel noted that in response to Ms Welsh's questions on your dishonesty, you appeared to couch your answers in very general terms and placed reliance upon your medical conditions, which were not raised as a defence or mitigation to the dishonesty charges at the substantive hearing. This panel asked you several questions in relation to your dishonesty. Your response was that you 'now' understand that fraud is a criminal offence. The panel was concerned that no reason was given during this hearing as to why you did not realise that fraud was a criminal offence at the time of your misconduct. Further, your response did not contextualise your actions when you worked simultaneously for First Options and Homerton Healthcare NHS Foundation Trust. Therefore, whilst the panel considered that you have shown some insight into your dishonesty in your written evidence, you did not show sufficient insight when giving oral evidence into your serious misconduct.

The original panel determined that you were liable to repeat conduct of the kind found proved. The panel considered whether there was new information that would change this position. They concluded that whilst you have provided a volume of further statements, testimonials and evidence, this demonstrated developing, but not fully developed insight. The panel noted in particular, [PRIVATE]. [PRIVATE], but that arising out of misconduct. There was limited insight that your actions compromised patient safety and therefore the panel concluded the finding of continued impairment on the ground of public protection.

The panel carefully considered your oral evidence which you gave during this hearing. It noted that in answering questions about your dishonesty, you focused on your medical conditions at the time and appeared reluctant to accept [PRIVATE]. The panel considered that your dishonesty compromised patient safety by claiming to work for two employers on the same shift, and receiving remuneration, you were denying the NHS of finances which could be properly applied by employing a clinician within the service to care for patients.

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 as no well-informed member of the public would be satisfied you could practice unrestricted at this time. The panel considered that the public would be concerned about your dishonesty and whilst there is developing insight, this falls short when remediating such serious misconduct.

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.

The panel first considered whether to take no action but concluded that this would be inappropriate in view of the seriousness of the case and the charges found proved. 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 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 your 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 on your 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 satisfy the public interest. The panel was not able to formulate conditions of practice that would adequately address the concerns relating to your misconduct, in particular your proven dishonesty.

The panel considered the imposition of a further period of suspension. It was of the view that a suspension order would allow you further time to fully reflect on your previous dishonesty and concerns. It considered that your need to gain a full understanding of how your dishonesty as a nurse can impact upon the nursing profession as a whole and not just the organisation that you are working for. The panel concluded that a further 6 month suspension order would be the appropriate and proportionate response and would afford you adequate time to further develop your insight and take steps to strengthen your practice. It would also give you an opportunity to approach past and current colleagues to attest to your honesty and integrity in your workplace assignments since the substantive hearing.

The panel determined therefore that a suspension order is the appropriate sanction which would continue to both protect the public and satisfy the wider public interest. Accordingly, the panel determined to impose a suspension order for a period of 6 months would provide you with an opportunity to provide further information relating to the impact of your dishonesty to yourself, to your colleagues and the wider public. The panel were not satisfied that you have sufficient insight into your dishonesty, by virtue of your oral evidence in this hearing, and so it determined that you could not practice either unrestricted or with a conditions of practice order at this time. The panel would have been assisted by an in-depth reflective piece relating to your dishonesty. The panel considered a suspension order to be the most appropriate and proportionate sanction available.

This suspension order will take effect upon the expiry of the current suspension order, namely the end of 14 June 2024 in accordance with Article 30(1).

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:

- Your continued engagement with the NMC and attendance at any review.
- Testimonials from your most recent employer, attesting to your honesty and integrity.
- An in-depth reflective piece addressing your dishonesty, using a recognised model.

This will be confirmed to you in writing.

That concludes this determination.