

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

**Substantive Order Review Meeting
Monday, 11 August 2025**

Virtual Meeting

Name of Registrant:	Tasleem Akhtar
NMC PIN:	87C0838E
Part(s) of the register:	Registered Nurse – Sub Part 1 Adult Nursing (Level 1) – 23 May 1990
Relevant Location:	West Midlands
Type of case:	Misconduct
Panel members:	Janine Ellul (Chair, registrant member) Olan Jenkins (Lay member) Anne Considine (Registrant member)
Legal Assessor:	Simon Walsh
Hearings Coordinator:	Samara Baboolal
Order being reviewed:	Suspension order (9 months)
Fitness to practise:	Impaired
Outcome:	Suspension order (6 months) to come into effect on 6 October 2025 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 Akhtar's registered email address by secure email on 9 July 2025.

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 11 August 2025, and inviting Mrs Akhtar 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 Akhtar 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 suspension order for a period of six months. This order will come into effect at the end of 6 October 2025 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 9 months by a Fitness to Practise Committee panel on 6 December 2024.

The current order is due to expire at the end of 6 October 2025.

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. *Around February 2019 grabbed patient A's testicles without clinical justification.*

2. ...

a. ...

b. ...

3. *On 29 November 2019:*

a. ...

b. *said to patient C words to the effect of "oh it's fine you touched my boobs I will be touching yours later."*

4. *On 7 November 2019:*

a. ...

b. *said to patient D words to the effect of "oh you've got stretch marks."*

5. *Your action(s) at any of:*

a. ...

b. ...

c. ...

d. ...

6. Departed from accepted practice when carrying out general medical assessments in that you asked each of the following patients to partially undress:

- a. Patient A around February 2019.*
- b. Patient B on 26 November 2019.*
- c. Patient C on 29 November 2019.*
- d. Patient D on 7 November 2019.*

7. Failed to treat each of the following patients with dignity when carrying out their general medical assessments:

- a. Patient A around February 2019.*
- b. Patient B on 26 November 2019.*
- c. Patient C on 29 November 2019.*
- d. Patient D on 7 November 2019.'*

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

The original panel determined the following with regard to impairment:

'The panel was mindful that each of Patients A to D individually expressed the distress that Mrs Akhtar's actions caused including anxiety and feeling uncomfortable during the medical examinations. As such, the panel finds that patients were put at unwarranted risk of harm and suffered emotional harm as a result of Mrs Akhtar's misconduct. Further, Mrs Akhtar's misconduct had breached the fundamental tenets of the nursing profession and therefore brought its reputation into disrepute.

Regarding insight, the panel had no information before it to suggest that Mrs Akhtar has demonstrated an understanding of or reflected on how her actions put patients at a risk of harm, nor whether Mrs Akhtar has demonstrated an understanding of why what she did was wrong and how this impacted negatively on the reputation of the nursing profession. Further, the panel has no information to suggest how Mrs Akhtar would handle the situation differently in the future.

The panel was satisfied that the misconduct in this case is capable of being addressed. However, the panel had no information before it to suggest that Mrs Akhtar has taken steps to strengthen her practice, nor is it aware of Mrs Akhtar's current whereabouts due to lack of engagement.

The panel is of the view that there is a risk of repetition due to the lack of any insight, strengthened practice, and similar conduct having occurred on four occasions with separate patients. The panel therefore determined that a finding of impairment is necessary on the ground of public protection.

The panel was mindful that Patients A to D felt vulnerable and exposed during their medical examinations and that the experience of Patient D had led her to question whether Mrs Akhtar was a nurse.

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 determined that public confidence in the profession would be undermined if a finding of impairment were not made in this case and therefore also finds Mrs Akhtar's fitness to practise impaired on the grounds of public interest.

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

The original panel determined the following with regard to sanction:

'Having found Mrs Akhtar'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 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:

- *A pattern of misconduct over a period of time that involved a number of patients.*
- *Conduct that placed patients at risk of suffering harm.*
- *Lack of insight into failings and lack of remorse.*
- *Lack of engagement in relation to these proceedings.*

The panel took into account the following mitigating feature – Mrs Akhtar has been described as a 'good nurse' by her colleagues, namely:

- *Witness 1 said of Mrs Akhtar: 'brilliant nurse. I remember looking at her notes and they were always thorough. As far as I am aware there had never been any complaints about her practice before 2019'.*
- *Witness 2 said of Mrs Akhtar: 'during all the years I worked along [sic] the registrant I never had any concerns about her practice. She could be harsh in her manner and could come across as very sergeant manner [sic] but she was a good nurse'.*

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.

The panel 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 Mrs Akhtar'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 Akhtar'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 Akhtar's registration would be a sufficient and appropriate response. The panel is mindful that any conditions imposed must be 'relevant, 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;*
- 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 there are no practical or workable conditions that could be formulated at this time, given the current lack of insight and that without Mrs Akhtar's engagement, it was not possible to decide whether conditions could be formulated which might enable her to address the identified failings of her practice.

Therefore, the panel concluded that the placing of conditions on Mrs Akhtar's registration would not adequately address the seriousness of this case and would not protect the public.

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

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

The panel seriously considered whether a striking-off order would be proportionate, taking account that its findings in this case principally related to Mrs Akhtar's failure to treat patients within her employer's guidelines and with dignity and respect over a period of time, whilst conducting pre-employment medical assessments. However, the panel was mindful that it had not found the more serious charges proved and therefore the misconduct found was of a different nature from the original allegations. The misconduct found, in the panel's view, was centred around Mrs

Akhtar's ability to practise kindly, within current policy parameters, and to show empathy in her communications with her patients. The panel previously noted that, in its view, Mrs Akhtar's conduct is potentially remediable with reflective practice. It also took into account that Mrs Akhtar's nursing colleagues stated that Mrs Akhtar had performed the role well for a number of years, and she was a 'good' and 'thorough' nurse, albeit abrupt.

The panel considered that a suspension order would provide Mrs Akhtar with an opportunity to reflect on the panel's findings, to consider whether she wishes to resume her career as a registered nurse and, if she does, to identify the issues which she would need to address and the steps she would need to take to be able to satisfy a future panel that she should be allowed to do so.

The panel therefore concluded that a striking-off order would be disproportionate at this stage as it wished to afford Mrs Akhtar the opportunity to consider the panel's actual findings and reflect and engage in the process. Whilst the panel acknowledges that a suspension may have a punitive effect, it would be unduly punitive in Mrs Akhtar's case to impose a striking-off order at this stage.

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

The panel noted the hardship such an order will inevitably cause Mrs Akhtar. 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 9 months, with a review, was appropriate in this case to mark the seriousness of the misconduct.

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, including a striking-off order.

Any future panel reviewing this case would be assisted by:

- Engagement with the NMC's proceedings.*
- Evidence of a written reflective piece taking into account the panel's findings and addressing the impact of her actions on the patients and the consequences in terms of the public's perception of the nursing profession.*
- Any evidence of strengthened practice including any relevant training and learning.*
- Details of any employment (paid or unpaid).*
- Character references and/or testimonials.'*

Decision and reasons on current impairment

The panel has considered carefully whether Mrs Akhtar'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.

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 Akhtar's fitness to practise remains impaired.

The panel noted that the conduct in the charges found proved are serious and resulted in emotional harm to patients, including distress and anxiety. The panel took into account that there is no new information before it today to suggest that Mrs Akhtar has developed her insight or reflection since the initial substantive hearing.

In its consideration of whether Mrs Akhtar has taken steps to strengthen her practice, there was no information before today's panel to suggest that Mrs Akhtar has strengthened her practice since the initial hearing.

The original panel determined that Mrs Akhtar was liable to repeat matters of the kind found proved. Today's panel has received no new information to suggest that Mrs Akhtar has remediated her practice and reduced the risk of repetition. In light of this the panel determined that Mrs Akhtar is liable to repeat matters of the kind found proved. The panel therefore decided that a finding of continuing impairment is 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 required.

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

Decision and reasons on sanction

Having found Mrs Akhtar 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 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 Mrs Akhtar'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 Akhtar'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 on Mrs Akhtar'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 protect the public or satisfy the public interest. The panel was not able to formulate conditions of practice that would adequately address the concerns relating to Mrs Akhtar's misconduct.

The panel considered the imposition of a further period of suspension. It was of the view that a suspension order would allow Mrs Akhtar further time to fully reflect on her previous failings and engage with the NMC. The panel concluded that a further six month suspension order would be the appropriate and proportionate response and would afford Mrs Akhtar adequate time to further develop her insight and take steps to strengthen their practice. It would also give Mrs Akhtar an opportunity to approach past and current health professionals to attest to her honesty and integrity in her 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 the period of six months would

provide Mrs Akhtar with an opportunity to engage with the NMC and develop reflection. It considered this 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 6 October 2025 in accordance with Article 30(1).

Any future panel reviewing this case would be assisted by:

- Engagement with the NMC's proceedings
- Evidence of a written reflective piece taking into account the panel's findings and addressing the impact of her actions on the patients and the consequences in terms of the public's perception of the nursing profession.
- Any evidence of strengthened practice including any relevant training and learning
- Details of any employment (paid or unpaid)
- Character references and/or testimonials
- Indication from Mrs Akhtar outlining her intentions in relation to her nursing career

This will be confirmed to Mrs Akhtar in writing.

That concludes this determination.