

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

**Substantive Order Review Hearing  
Friday, 15 August 2025**

Virtual Hearing

<b>Name of Registrant:</b>	Ian O'Connor
<b>NMC PIN:</b>	99I0580S
<b>Part(s) of the register:</b>	Registered Nurse Sub part 1 RNA: Adult nurse, level 1 (7 September 2003)
<b>Relevant Location:</b>	Penarth
<b>Type of case:</b>	Misconduct
<b>Panel members:</b>	Dale Simon (Chair, lay member) Rachel Cerfontyne (Lay member) Amanda Revill (Registrant member)
<b>Legal Assessor:</b>	Richard Ferry-Swainson
<b>Hearings Coordinator:</b>	Emma Hotston
<b>Nursing and Midwifery Council:</b>	Represented by Yaa Dankwa Ampadu-Sackey, Case Presenter
<b>Mr O'Connor:</b>	Not Present and unrepresented
<b>Order being reviewed:</b>	Suspension order (12 months)
<b>Fitness to practise:</b>	Impaired
<b>Outcome:</b>	<b>Suspension order (9 months) to come into effect on 2 September 2025 in accordance with Article 30 (1)</b>

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

The panel was informed at the start of this hearing that Mr O'Connor was not in attendance and that the Notice of Hearing had been sent to Mr O'Connor's registered email address by secure email on 16 July 2025.

Ms Ampadu-Sackey, on behalf of the Nursing and Midwifery Council (NMC), submitted that it had complied with the requirements of Rules 11 and 34 of the 'Nursing and Midwifery Council (Fitness to Practise) Rules 2004', as amended (the Rules).

The panel accepted the advice of the legal assessor.

The panel took into account that the Notice of Hearing provided details of the substantive order being reviewed, the time, date and that the hearing was to be held virtually, including instructions on how to join and, amongst other things, information about Mr O'Connor's right to attend, be represented and call evidence, as well as the panel's power to proceed in his absence.

In the light of all of the information available, the panel was satisfied that Mr O'Connor has been served with notice of this hearing in accordance with the requirements of Rules 11 and 34.

## **Decision and reasons on proceeding in the absence of Mr O'Connor**

The panel next considered whether it should proceed in the absence of Mr O'Connor. The panel had regard to Rule 21 and heard the submissions of Ms Ampadu-Sackey who invited the panel to continue in the absence of Mr O'Connor. She submitted that Mr O'Connor had voluntarily absented himself.

Ms Ampadu-Sackey submitted that all reasonable efforts had been made by the NMC to secure Mr O'Connor's attendance, but there had been no engagement at all by him regarding this review hearing. She submitted that, as a consequence, there was no reason to believe that an adjournment would secure his attendance on some future occasion. She further submitted that there is a public interest in the expeditious review of this case.

The panel accepted the advice of the legal assessor.

The panel decided to proceed in the absence of Mr O'Connor. In reaching this decision, the panel considered the submissions of Ms Ampadu-Sackey and the advice of the legal assessor. It has had regard to the relevant case law and to the overall interests of justice and fairness to all parties. It noted that:

- Mr O'Connor has not engaged with the NMC since March 2025 and has not responded to any of the letters sent to him about this hearing;
- No application for an adjournment has been made by Mr O'Connor;
- There is no reason to suppose that adjourning would secure his attendance at some future date; and
- There is a strong public interest in the expeditious review of the case, which has to take place before its expiry on 2 September 2025.

In these circumstances, the panel has decided that it is fair and in the interests of justice to proceed in the absence of Mr O'Connor.

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

The panel imposed a suspension order for a period of 9 months.

This order will come into effect at the end of 2 September 2025 in accordance with Article 30(1) of the 'Nursing and Midwifery Order 2001' (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 1 August 2024.

The current order is due to expire at the end of 2 September 2025.

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

The charges which resulted in the imposition of the substantive order were as follows:

*'That you, a registered nurse:*

*1) On 18 August 2020:*

*a) In relation to Patient A:*

- i. Changed their NEWS score from an 8 to a 6. **[PROVED]***
- ii. ...*
- iii. Failed to record your conduct at 1a) i). **[PROVED]***
- iv. Failed to assess and / or undertake your own observations. **[PROVED]***
- v. Failed to escalate their condition to senior management and / or a doctor. **[PROVED]***

*b) In relation to Patient B:*

- i. Changed their NEWS score from a 7 to a 5. **[PROVED]***
- ii. ...*
- iii. Failed to record your conduct at 1b) i). **[PROVED]***
- iv. Failed to assess and / or undertake your own observations. **[PROVED]***
- v. Failed to escalate their condition to senior management and / or a doctor. **[PROVED]***

*c) Carried a hospital bleep on your own, despite a requirement to be in the company of another nurse at all times. **[PROVED]***

*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 next went on to decide if as a result of the misconduct, Mr O'Connor's fitness to practise is currently impaired.*

*....*

*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/their fitness to practise is impaired in the sense that S/He/They:*

- 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 determined that only the first three limbs of Grant were engaged. Having not found dishonesty in its earlier decisions on facts, the panel did not find that the last limb was applicable in this case.*

*The panel finds that patients were put at risk of harm by lowering the NEWS score of two patients without clinical justification, failing to undertake assessments on them and failing to escalate the concerns regarding their condition to a doctor. Mr O'Connor's misconduct had breached the fundamental tenets of the nursing profession and therefore brought its reputation into disrepute.*

*Regarding insight, the panel considered that Mr O'Connor showed developing insight during the local investigation and made admissions in 2020. The panel acknowledged his reflections on the incident but noted they were primarily focused on [PRIVATE].*

*While Mr O'Connor has acknowledged his failings, the panel identified that he has yet to demonstrate an understanding of how his actions put patients at risk of harm, negatively impacted the reputation of the nursing profession, and how he would handle similar situations differently in the future. The panel noted that Mr O'Connor disengaged from these proceedings in 2022, leaving no evidence of further development in his insight since then.*

*The panel was satisfied that the misconduct in this case could be addressed. Therefore, it carefully considered the evidence before it to determine whether Mr O'Connor has taken steps to improve his practice. The panel took into account Mr O'Connor's reflective accounts; however, the panel had limited information regarding any efforts he has made to enhance his practice. Due to the lack of recent engagement and insufficient evidence of practical improvement, the panel was unable to discern if Mr O'Connor had taken steps to strengthen his practice.*

*Consequently, the panel determined that there is a risk of repetition based on the absence of any evidence, at this time, which shows Mr O'Connor has developed his insight or strengthened his practice. Therefore, the panel decided that a finding of impairment is necessary on the grounds of public protection.*

*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 a finding of impairment on public interest grounds is required because a reasonable and will-informed member of the public would be concerned about a nurse that did not undertake the*

*necessary clinical examinations prior to making decisions about a patient's care.*

*Having regard to all of the above, the panel was satisfied that Mr O'Connor's fitness to practise is currently impaired.'*

The original panel determined the following with regard to sanction:

*'The panel next considered whether placing conditions of practice on Mr O'Connor'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 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 there are practical and workable conditions that could be formulated, given that the concerns it identified were clinical and it did not find dishonesty or deep-seated attitudinal concerns in this case. The panel considered that the misconduct identified in this case was something that can be addressed through retraining. However, the panel*

*was not convinced that there was a potential and willingness to respond positively to retraining at this time considering Mr O'Connor's disengagement since 2022. The panel would require re-engagement from Mr O'Connor in order to produce workable conditions of practice which mitigate the risks identified and 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;*
- 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 charges in this case arose from a single shift and there is no evidence of any repetition. Mr O'Connor has shown some insight and made earlier admissions. The panel did not find any evidence of deep-seated personality or attitudinal problems. The panel was therefore satisfied that in all the circumstances of 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 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 Mr O'Connor'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 may cause Mr O'Connor. 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 also considered that Mr O'Connor had a nursing career of 18 years prior to this incident and occupied a Band 7 role. It would be in the public interest if he were to re-engage with proceedings to enable him to return to safe practice.*

*The panel determined that a suspension order for a period of 12 months was appropriate in this case to mark the seriousness of the misconduct and to allow Mr O'Connor some time to reflect and re-engage if he decides that he wishes to return to nursing.'*

## **Decision and reasons on current impairment**

The panel has considered whether Mr O'Connor's fitness to practise remains impaired.

The panel had regard to the NMC guidance which states, *'the question that will help decide whether a professional's fitness to practise is impaired is: Can the nurse, midwife, or nursing associate practise safely, kindly and professionally'*. 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 Ms Ampadu-Sackey on behalf of the NMC. She reminded the panel that the persuasive burden is on Mr O'Connor to demonstrate that he is no longer impaired. She submitted that Mr O'Connor has not discharged this burden.

Ms Ampadu-Sackey submitted that, since the previous order, there has been no new evidence received from Mr O'Connor to demonstrate strengthening of his practice, including the undertaking of any appropriate training or development. She submitted that the only engagement that Mr O'Connor has had with the NMC, since the order was imposed, was by email in March 2025, where he was requested by the NMC case officer to reflect on his previous failings. However, Ms Ampadu-Sackey submitted that Mr O'Connor's emails to the NMC in March 2025 demonstrate insufficient insight and [PRIVATE]. Therefore, Ms Ampadu-Sackey submitted that Mr O'Connor has shown limited evidence that he has developed sufficient insight since the order was imposed.

Ms Ampadu-Sackey submitted that, in the absence of any new evidence from Mr O'Connor and a continuing lack of insight and understanding into the concerns raised, the panel should find his fitness to practise currently impaired on both public protection grounds and in the wider public interest.

Ms Ampadu-Sackey invited the panel to extend the current suspension order.

Ms Ampadu-Sackey submitted that Mr O'Connor has had one year since the original order was imposed to re-engage with the NMC and demonstrate his continued commitment to the nursing profession but has had limited engagement since March 2025. She submitted that the burden is on Mr O'Connor to bring evidence to prove that he is no longer impaired, however due to his lack of engagement, there has been no progress made towards strengthening his practice and no new evidence to prove that he is no longer impaired. Therefore, due to the serious nature of the concerns, an extension of the current suspension order is now the most appropriate and proportionate sanction to protect the public and satisfy the wider public interest and public confidence in the profession. This would provide Mr O'Connor with adequate further time to engage with the NMC and

address the concerns with his fitness to practice, in order to return to safe and unrestricted practice.

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 Mr O'Connor's fitness to practise remains impaired.

The panel noted that the persuasive burden is on Mr O'Connor to demonstrate that he is no longer impaired and were of the view that Mr O'Connor has not discharged this burden.

The panel had no new information before it from Mr O'Connor to suggest that he had developed further insight or shown remorse for his actions. The panel was of the view that although it would take commitment, Mr O'Connor's behaviour appears to be remediable but there has been limited engagement from him since the order was imposed. The panel noted [PRIVATE]. There is, therefore, no new evidence to show that he has developed his practice by undertaking relevant training or sufficiently reflecting on the risks his misconduct caused to the protection of the public and to the public interest. In these circumstances there is no information before the panel which would undermine the previous finding of impairment.

The panel noted that due to Mr O'Connor's lack of engagement since March 2025, there is no evidence of further development in his insight. Today's panel has received no new information that showed that Mr O'Connor had taken steps to strengthen his practice and remediate the concerns found. He has also not worked in a nursing role since the original charges took place and has therefore not had the opportunity to demonstrate that he can practise safely, kindly and professionally. In light of this, this panel determined that Mr O'Connor 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. This is because members of the public would have their confidence in the profession and the NMC undermined in circumstances whereby a nurse who represented a risk of harm to the public were permitted to return to practice without restriction.

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

### **Decision and reasons on sanction**

Having found Mr O'Connor'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 noted that Mr O'Connor has not shown any evidence that he has addressed any of the fitness to practise concerns raised by the previous panel and has had limited engagement with the NMC since the order was imposed.

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

It then considered the imposition of a caution order but again determined that, due to the seriousness of the case, and the public protection issues identified, an order that does not restrict Mr O'Connor's practice would not be appropriate in the circumstances. The SG states that a caution order may be appropriate where *'the case is at the lower end of the spectrum of impaired fitness to practise and the panel wishes to mark that the behaviour was unacceptable and must not happen again.'* The panel considered that Mr O'Connor'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 Mr O'Connor'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 agreed with the original panel that the concerns identified in this case could be remedied and that conditions could be formulated to address them. However, to be effective, the panel would have to be satisfied that Mr O'Connor was committed to complying with them and could be trusted to do so. Unfortunately, because he had chosen not to engage with this review hearing, the panel could not be so satisfied and accordingly conditions at this stage are not workable. However, were Mr O'Connor to re-engage meaningfully with the NMC, demonstrate insight into his failings and show a willingness to strengthen his practice, then this could be an option for a future reviewing panel.

The panel next considered the imposition of a further period of suspension. The panel noted that Mr O'Connor has shown limited remorse for his misconduct, as [PRIVATE].

The panel was of the view that extending the suspension order would allow Mr O'Connor further time to fully reflect on his previous misconduct and to make a decision on whether he wants to return to nursing. The panel concluded that a further 9-month suspension order would be the appropriate and proportionate response and would afford Mr O'Connor adequate time to demonstrate meaningful engagement with the process and address the concerns raised by the previous panel regarding his fitness to practise. This includes taking steps to develop insight and demonstrate strengthening of his practice through providing written reflections and evidence of professional development or training.

The panel also noted that Mr O'Connor had a nursing career of 18 years prior to this incident and occupied a Band 7 role. It would be in the public interest if he were to reengage with proceedings to enable him to return to safe, unrestricted practice.

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. It considered this to be the most appropriate and proportionate sanction available.

The panel did consider whether to make a striking-off order but considered such a sanction to be disproportionate when focusing on the matters found proved at the original hearing. However, Mr O'Connor should be aware that if he chooses to not re-engage with these proceedings, then he risks such an outcome at any subsequent review. It would not be appropriate for panels to continuously extend their suspension orders in the hope that a registrant will eventually comply with its suggestions. Accordingly, the panel wishes to encourage Mr O'Connor to re-engage with his regulator, to follow the suggestion made below and to return to practising as a registered nurse.

This suspension order will take effect upon the expiry of the current suspension order, namely the end of 2 September 2025 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:

- Engagement from Mr O'Connor.
- Demonstration of developing insight and strengthening of practice through providing written reflections and evidence of professional development or training.
- Mr O'Connor's compliance with [PRIVATE].

This will be confirmed to Mr O'Connor in writing.

That concludes this determination.