

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

**Substantive Order Review Meeting  
Friday 10 January 2025**

**Virtual Meeting**

**Name of Registrant:** Anne Elizabeth Winstanley

**NMC PIN** 8114135E

**Part(s) of the register:** Registered Nurse – Sub Part 1  
Learning Disabilities Nursing – (November 1985)

**Relevant Location:** Cheshire East and Gwynedd

**Type of case:** Misconduct

**Panel members:** Judith Webb (Chair, lay member)  
Helen Reddy (Registrant member)  
Anne Phillimore (Lay member)

**Legal Assessor:** Martin Goudie KC

**Hearings Coordinator:** Emma Norbury-Perrott

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

**Fitness to practise:** Impaired

**Outcome:** **Order to lapse upon expiry (end of 19 February 2025), with finding of impairment, 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 Ms Winstanley's registered email address by secure email on 25 November 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 30 December 2024 and inviting Ms Winstanley 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 Ms Winstanley 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 allow the order to lapse with a finding of impairment. This order will come into effect at the end of 19 February 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 six months by a Fitness to Practise Committee panel on 19 July 2024.

The current order is due to expire at the end of 19 February 2025.

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

The charge found proved which resulted in the imposition of the substantive order was as follows:

*'That you, a registered nurse,*

1. *While employed as registered manager at Greengables Nursing Home, did not properly record and/ or report a safeguarding incident for Resident IH.      **Found Proved***
  
2. ...'

The original panel determined the following with regard to impairment:

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

*In coming to its decision, the panel had regard to the Fitness to Practise Library on impairment, updated on 27 February 2024, 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 kindly, safely and professionally?"*

*If the answer to this question is yes, then the likelihood is that the professional's fitness to practise is not 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 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/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) ...'*

*The panel was satisfied that limbs a), b) and c) were engaged in this case. It found that a resident was put at risk of harm as a result of Ms Winstanley's misconduct in failing to record and/or report the safeguarding incident. Ms Winstanley's misconduct breached fundamental tenets of the nursing profession and therefore brought its reputation into disrepute.*

*Regarding insight, the panel noted Ms Winstanley's reflection dated 26 September 2021, where she accepted her omission at charge 1, provided an explanation for the omission, demonstrated remorse and stated how she would handle the situation differently in the future. However, the panel*

*was of the view that this reflection was limited and it was not satisfied that Ms Winstanley had demonstrated full insight. Despite Ms Winstanley's admissions and remorse, the panel considered that she had not demonstrated an understanding of how her actions put Resident IH at a risk of harm, why what she did was wrong and how this impacted negatively on the reputation of the nursing profession. In addition, the panel noted that Ms Winstanley had chosen not to engage with the NMC (which she had communicated to the NMC via her former RCN representative on 27 March 2024) and the panel had not seen any further reflection from her.*

*The panel was satisfied that the misconduct in this case is potentially capable of being addressed. Therefore, the panel carefully considered the evidence before it in determining whether or not Ms Winstanley has taken steps to strengthen her practice. The panel took into account that after leaving Greengables Nursing Home, Ms Winstanley subsequently worked at Bay Nursing Home. It noted that Ms Winstanley's misconduct related to her work as a Home Manager, rather than her nursing practice. However, given Ms Winstanley's lack of engagement with the NMC, the panel had no information about whether Ms Winstanley had addressed the concern around recording/reporting safeguarding incidents.*

*The panel was therefore not satisfied that Ms Winstanley can currently practise safely, kindly and professionally.*

*In light of the limited information before it, the panel found that there is a risk of repetition and that a finding of current impairment of fitness to practise is necessary on the grounds of public protection.*

*The panel bore in mind 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.*

*In addition, the panel concluded that public confidence in the profession would be undermined if a finding of impairment were not made in this case which concerned Ms Winstanley not recording and/or reporting a safeguarding incident involving an elderly and at risk resident. It therefore also found Ms Winstanley's fitness to practise impaired on the grounds of public interest.*

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

The original panel determined the following with regard to sanction:

*'Having found Ms Winstanley'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:*

- *Ms Winstanley's misconduct related to an elderly at risk service user.*
- *Ms Winstanley has demonstrated limited insight into her misconduct.*

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

- *Ms Winstanley made an early admission to her omission at charge 1.*

*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 Ms Winstanley'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 Ms Winstanley'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 Ms Winstanley'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;*
- 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 was satisfied that conditions of practice could be put in place to robustly manage the concern relating to safeguarding recording and/or reporting. However, it had no evidence that Ms Winstanley is willing to*

*engage with conditions of practice in any meaningful way. The panel therefore found that there were no practical or workable conditions that could be formulated.*

*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.*

*The panel considered that this was a single instance of misconduct where a lesser sanction would not be sufficient. There was no evidence before the panel of a harmful deep-seated personality or attitudinal problem with Ms Winstanley, nor was there any evidence of repetition since the incident. The panel was satisfied that Ms Winstanley had only demonstrated limited insight.*

*In light of Ms Winstanley's limited insight, the panel considered that there was a continued risk to patient safety. It determined that this was a serious case that warranted her temporary suspension from nursing practice.*

*The panel noted that a suspension order would temporarily prevent Ms Winstanley from working as a registered nurse. It was satisfied that such an order would give Ms Winstanley time to re-engage with the NMC; reflect on her misconduct; strengthen her practice; and provide developed insight into the impact of her misconduct on patients, colleagues and the wider profession; and to decide on her future intentions as to her nursing career.*



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

*The panel did go on to consider whether a striking-off order would be proportionate. It noted that the NMC was seeking a striking-off order in this case on the basis of all of the charges being found proved. However, taking into account its findings on the charges and on misconduct and impairment in respect of charge 1 only, the panel concluded that such an order would be disproportionate. Whilst the panel acknowledged that a suspension order may have a punitive effect, it would be unduly punitive in Ms Winstanley'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 determined such an order would suitably protect the public and meet the wider public interest.*

*The panel noted the hardship such an order may cause Ms Winstanley. 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 standards of behaviour required of a registered nurse.*

*The panel determined that a suspension order for a period of six months was appropriate in this case to mark the seriousness of the misconduct and provide Ms Winstanley the opportunity to reflect on the future of her nursing registration and communicate her intention to the NMC and a future reviewing panel.*

*At the end of the period of suspension, another panel will review the order. At the review hearing the panel may revoke the order, it may allow the*

*order to lapse upon expiry, it may extend the order, or it may replace the order with another order.*

*Any future panel reviewing this case would be assisted by:*

- *Ms Winstanley's engagement and attendance at the substantive order review hearing.*
- *A detailed written reflective account which addresses the concerns found proved and demonstrates how Ms Winstanley has developed her insight into her misconduct, how she has reflected on that and how she would act in the future in a similar situation.*
- *Any evidence of training and/or strengthened practice.*
- *Clear evidence/information from Ms Winstanley as to her future intentions regarding her nursing registration.*

*This will be confirmed to Ms Winstanley in writing.'*

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

The panel has considered carefully whether Ms Winstanley'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 ability to practice 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 and an email from Ms Winstanley on 27 November 2024;

*'I am writing this email in response to the question regarding my retiring from the nursing profession . I have written numerous of times that I would like to be taken of [sic] the register and have actually applied at least twice to do so but because of the ongoing hearing I'm not allowed to, I have not*

*worked as a nurse since sept2021 when I first applied to come of [sic] the register and I don't intend to work as a nurse ever again , this I have stipulated again on numerous occasions and if you check the register you will see that I never attempted to work as nurse since 2021 . I was told previously that if I had pleaded guilty on all complaints this would have been over and done with instead it is now in its third year ,but I won't plead guilty for something that didn't happen .*

*All parties privy to this complaint have been approached and asked if any of them have an issue with me coming of the register and all have said no they don't. yet still this goes on . I have again been sent the documents regarding the case which I have read every six months when I have received them , nothing has changed , I have always answered any questions asked of me and submitted paperwork , I really don't know what else I can do , I appreciate that council have to do their due diligence regarding inappropriate behaviour from nurses but this is not me .if you knew me you would know I dedicated over 30 years of my life being a nurse and being a very good one and for it to end like this makes me sad and I would just like for it to end*

*Kind regards*

*Anne Winstanley'*

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 Ms Winstanley's fitness to practise remains impaired.

The panel noted that the original panel found that Ms Winstanley had not demonstrated sufficient insight into matters found proved, that her reflective piece was noted to be limited and Ms Winstanley had demonstrated limited accountability and remorse for her actions.

At this meeting, the panel firstly considered what evidence had been provided by Ms Winstanley to demonstrate her ability to practise as a safe, kind and professional nurse. With no new information of this nature provided by Ms Winstanley. The panel determined that Ms Winstanley has not demonstrated evidence of developing insight into matters found proved previously, or evidence of actions intended to strengthen her practice. The panel has been provided with no evidence of relevant activities or training which may address the concerns which were identified at the substantive meeting.

In its consideration of whether Ms Winstanley has taken steps to strengthen her practice, the panel took into account the email received by the NMC from Ms Winstanley, dated 27 November 2024, stating;

*'... I have not worked as a nurse since sept2021 when I first applied to come of the register and I don't intend to work as a nurse ever again.*

*...'*

With no new evidence as to insight or remediation before it to consider, the panel determined that Ms Winstanley has not acknowledged and/or accepted her previous misconduct and that she is not safe to practise unrestricted at this time. The panel determined that Ms Winstanley's insight remains insufficient. Further, the panel determined that the risk of repetition remains and 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 considered that a reasonable, well informed member of the public would be concerned if Ms Winstanley was able to practise without restriction until she has demonstrated she can practise safely, kindly and professionally. Accordingly, the panel determined that, in this case for the reasons given above, a finding of current impairment on public interest grounds is also required.

For these reasons, the panel finds that Ms Winstanley's fitness to practise remains impaired on both public protection and public interest grounds.

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

Having found Ms Winstanley fitness to practise currently impaired, the panel then considered what, if any, sanction it should impose in this case. The panel noted that its powers are set out in Article 30 of the Order. The panel has also taken into account the 'NMC's Sanctions Guidance' (SG) and has borne in mind that the purpose of a sanction is not to be punitive, though any sanction imposed may have a punitive effect.

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

It then considered the imposition of a caution order but again determined that, due to the seriousness of the case, and the public protection issues identified, an order that does not restrict Ms Winstanley practice would not be appropriate in the circumstances. The Sanction Guidance (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 Ms Winstanley 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 Ms Winstanley'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 has received information that Ms Winstanley has not worked as registered nurse since 2021 and does not intend to return to practise as a nurse. In view of Ms Winstanley's clear settled intention not to return to nursing, 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. The panel noted that Ms Winstanley has not shown remorse for her misconduct. Further, Ms Winstanley has not demonstrated sufficient insight into her previous failings. The panel determined that considerable evidence would be required to show that Ms Winstanley no longer posed a risk to the public. The panel determined that a further period of suspension would not serve any useful purpose in all of the circumstances.

The panel had regard to its findings on impairment in coming to this decision. It bore in mind that its primary purpose is to protect the public and maintain public confidence in the nursing profession and the NMC as its regulator. In this case, the panel referred to the Ftp guidance REV-3H, in particular point 2:

***‘Lapse with impairment***

*Where the professional would no longer be on the register but for the order in place, a reviewing panel can allow the order to expire or, at an early review, revoke the order. Professionals in these circumstances will automatically be removed from the register, or lapse, upon expiry or revocation of the order. The panel will record that the professional remains impaired.*

*A panel will allow a professional to lapse with impairment where:*

- the professional would no longer be on the register but for the order in place ;*
- the panel can no longer conclude that the professional is likely to return to safe unrestricted practice within a reasonable period of time;*
- a striking off order isn’t appropriate.*

*Whilst the intentions or wishes of the professional do not determine whether they should be allowed to lapse, a professional who would no longer be on the register but for the order in place can themselves request an early review to ask that the order is removed.*

*Panels should be considering lapse with impairment even where the reason for a professional's lack of progress is outside their control. What matters is whether such issues are likely to be resolved in a reasonable period of time.*

*Circumstances where lapse with impairment is likely to be appropriate include where*

- *a professional has shown limited engagement and/or insight, but this is reasonably attributable to a health condition; or*
- *there has been insufficient progress*
  - *in cases involving health or English language; or*
  - *in other cases, where the lack of progress is attributable wholly or in significant part to matters outside the professional's control (e.g. health, immigration status, the ability to find work or other personal circumstances).*

The panel considered allowing the order to lapse with a finding of impairment which would see the removal of Ms Winstanley from the register. It took into consideration the email sent by Ms Winstanley on 27 November 2024 to the NMC, where she states;

*' ...*

*I have written numerous of times that I would like to be taken of the register and have actually applied at least twice to do so but because of the ongoing hearing I'm not allowed to, I have not worked as a nurse since sept2021 when I first applied to come of the register and I don't intend to work as a nurse ever again , this I have stipulated again on numerous occasions and if you check the register you will see that I never attempted to work as nurse since 2021 .*

*...'*

The panel determined that it would be disproportionate to strike off the registrant, and this sanction is not the only sanction which is sufficient to protect the public and meet the public interest.

Having considered its findings on impairment, and Ms Winstanley's wish to be removed from the register, the panel was satisfied that allowing the current order to lapse with a finding of impairment is proportionate and would protect the public and address public interest. In any application for readmission to the register the decision maker will be aware of the concerns that led to the original substantive finding of impairment, and that the professional left the register while impaired.

The substantive suspension order will be allowed to lapse, with a finding of impairment, at the end of the current period of imposition, namely the end of 19 February 2025 in accordance with Article 30(1).

This decision will be confirmed to Ms Winstanley in writing.

That concludes this determination.