

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

**Substantive Meeting  
Friday, 25 July 2025**

Virtual Meeting

<b>Name of Registrant:</b>	<b>Lamie Nzembe Bekantoy</b>
<b>NMC PIN:</b>	08A2037E
<b>Part(s) of the register:</b>	Nursing – Sub part 1 RNA – Registered Nurse – Adult (1 July 2008)
<b>Relevant Location:</b>	London
<b>Type of case:</b>	Conviction
<b>Panel members:</b>	Des McMorrow (Chair, Registrant member) Julia Briscoe (Registrant member) Margaret Jolley (Lay member)
<b>Legal Assessor:</b>	Ashraf Khan
<b>Hearings Coordinator:</b>	Bethany Seed
<b>Facts proved:</b>	Charges 1a, 1b, 1c, 1d, 1e
<b>Fitness to practise:</b>	Impaired
<b>Sanction:</b>	<b>Striking-off order</b>
<b>Interim order:</b>	<b>Interim suspension order (18 months)</b>

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

The panel was informed at the start of this meeting that that the Notice of Meeting had been sent to Ms Bekantoy's registered email address by secure email on 22 May 2025.

Further, the panel noted that the Notice of Meeting was also sent to Ms Bekantoy's representative at Sequentus on 22 May 2025.

The panel accepted the advice of the legal assessor.

The panel took into account that the Notice of Meeting provided details of the allegation, the time and potential dates for this matter to be heard.

In light of all of the information available, the panel was satisfied that Ms Bekantoy 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).

## **Details of charge**

That you, a registered nurse:

1. On 08 April 2024, at Westminster Magistrates Court, were convicted of five offences of fraud by false representation, contrary to the Fraud Act 2006 in that you:
  - a. On or before 23 April 2021 at London committed fraud in that you dishonestly made a false representation, namely you informed your employer, King's College Hospital NHS Foundation Trust, that you were unable to attend your workplace due to sickness or ill health, intending to make a gain, namely sick pay, for yourself.

- b. On or before 20 July 2022 at London committed fraud in that you dishonestly made a false representation, namely you informed your employer, King's College Hospital NHS Foundation Trust, that you were unable to attend your workplace due to sickness or ill health, intending to make a gain, namely sick pay, for yourself.
- c. On or before 30 January 2023 at London committed fraud in that you dishonestly made a false representation, namely you informed your employer, King's College Hospital NHS Foundation Trust, that you were unable to attend your workplace due to sickness or ill health, intending to make a gain, namely sick pay, for yourself.
- d. On or before 14 January 2023 at London committed fraud in that you dishonestly made a false representation, namely you informed your employer, King's Cross Hospital NHS Foundation Trust, that you were unable to attend your workplace due to sickness or ill health, intending to make a gain, namely sick pay, for yourself.
- e. On or before 04 December 2022 at London committed fraud in that you dishonestly made a false representation, namely you informed your employer, King's College Hospital NHS Foundation Trust, that you were unable to attend your workplace due to sickness or ill health, intending to make a gain, namely sick pay, for yourself.

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

## **Background**

The NMC received an employer referral from King's College Hospital NHS Foundation Trust (the Trust) on 17 July 2023 informing the NMC that Ms Bekantoy was under investigation by the Trust's Counter Fraud Team into an alleged fraud by false representation.

The fraud investigation was completed and on 08 April 2024 Ms Bekantoy pleaded guilty to five counts of fraud at Westminster Magistrates Court.

On 08 May 2024 Ms Bekantoy was convicted of fraud by false representation. Ms Bekantoy was sentenced for five counts of fraud and a Community Service order and compensation order of £2,400.00 were both made.

This offence happened between the periods of 23 April 2021 to 30 January 2023 where Ms Bekantoy informed the Trust that she was unable to attend her workplace due to sickness or ill health, intending to make a gain for herself. The total cost to the NHS was £18,174.

### **Decision and reasons on facts**

In reaching its decisions on the facts, the panel took into account all the documentary evidence in this case together with the representations made by the NMC. It noted Mrs Bekantoy's previous representations to the NMC but noted that Ms Bekantoy has not provided recent representations in relation to this meeting. The panel accepted the advice of the legal assessor.

The panel was aware that the burden of proof rests on the NMC, and that the standard of proof is the civil standard, namely the balance of probabilities. This means that a fact will be proved if a panel is satisfied that it is more likely than not that the incident occurred as alleged.

The charges concern Ms Bekantoy's conviction and, having been provided with a copy of the certificate of conviction dated 9 July 2024, the panel finds that the facts are found proved in accordance with Rule 31 (2) and (3). These state:

- '31.—** (2) *Where a registrant has been convicted of a criminal offence—*
- (a) *a copy of the certificate of conviction, certified by a competent officer of a Court in the United Kingdom*

- (or, in Scotland, an extract conviction) shall be conclusive proof of the conviction; and*
- (b) the findings of fact upon which the conviction is based shall be admissible as proof of those facts.*
- (3) The only evidence which may be adduced by the registrant in rebuttal of a conviction certified or extracted in accordance with paragraph (2)(a) is evidence for the purpose of proving that she is not the person referred to in the certificate or extract.'*

In light of the certificate of conviction where the contents mirror the charges in this case, the panel determined that the charge 1a -1e are found proved.

### **Fitness to practise**

Having announced its findings on the facts, the panel then considered whether, on the basis of the facts found proved, Ms Bekantoy's fitness to practise is currently impaired by reason of Ms Bekantoy's conviction. There is no statutory definition of fitness to practise. However, the NMC has defined fitness to practise as a registrant's suitability to remain on the register unrestricted.

The panel, in reaching its decision, has recognised its statutory duty to protect the public and maintain public confidence in the profession. Further, it bore in mind that there is no burden or standard of proof at this stage and it has therefore exercised its own professional judgement.

### **Representations on impairment**

The NMC requires the panel to bear in mind its overarching objective to protect the public and the wider public interest. This included the need to declare and maintain proper standards and maintain public confidence in the profession and in the NMC as a regulatory body. The panel has referred to the case of *Council for Healthcare Regulatory Excellence v (1) Nursing and Midwifery Council (2) Grant* [2011] EWHC 927 (Admin).

The NMC submitted that Ms Bekantoy acted in a manner which demonstrates a deep-seated attitudinal issue, in that she repeatedly prioritised her own financial gain above patient safety for a prolonged period of almost two years, which could have put patients at unwarranted risk of harm. The NMC submitted that Ms Bekantoy has displayed extremely limited insight as she has not provided sufficient evidence that she has addressed the concerns raised by her actions in any meaningful way. For these reasons, the NMC submitted that there is a remaining risk of repetition and liability to place patients at risk of harm in the future.

The NMC further submitted that Ms Bekantoy's actions brought the profession into disrepute as she jeopardised and undermined public trust and confidence in the profession for personal financial benefit. As above, the NMC submitted that there is a remaining risk of repetition and liability to bring the profession into disrepute.

The NMC submitted that Ms Bekantoy breached a fundamental tenet of the nursing profession, in that she breached Article 20 of the Code which states:

***'20 Uphold the reputation of your profession at all times***

*To achieve this, you must:*

*20.1 keep to and uphold the standards and values set out in the Code.*

*20.2 act with honesty and integrity at all times, treating people fairly and without discrimination, bullying or harassment.*

*20.4 keep to the laws of the country in which you are practising.*

*20.8 act as a role model of professional behaviour for students and newly qualified nurses, midwives and nursing associates to aspire to.'*

It is submitted that Ms Bekantoy did not act with honesty and integrity, and that she did not adhere to the law in that she has been convicted in relation to five offences of fraud by false representation. It is further submitted that Ms Bekantoy was employed as a Band 6 Anaesthetic Nurse Team Leader, and she has not acted as a role model of professional behaviour for students and newly qualified professionals. In light of the lack of insight and remediation, it is submitted that there remains a risk that Ms Bekantoy is liable to breach fundamental tenets of the profession.

The NMC submitted Ms Bekantoy's actions demonstrate a serious departure from the NMC professional standards and call into question her ability to uphold fundamental tenets of the profession. The NMC submitted that this behaviour is indicative of deep-rooted attitudinal issues, and that due to the ongoing risk of repetition, Ms Bekantoy is liable to act dishonestly again in future. In light of the above reasoning, the NMC submitted that a finding of impairment is necessary on the grounds of public protection.

In respect of public interest, the NMC submitted that there is a high level of public interest in this case because of the seriousness of the allegations, the lack of engagement with the NMC and the lack of evidence of insight, reflection or remediation. The NMC submitted that to ensure that standards of professionalism are maintained, and public confidence in the profession is upheld, a finding of impairment is necessary on the ground of public interest.

The panel accepted the advice of the legal assessor which included reference to a number of relevant judgments.

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

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

In coming to its decision, the panel had regard to the Fitness to Practise Library, updated on 27 March 2023, 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 be honest and open and act with integrity. They must make sure that their conduct at all times justifies both their patients' and the public's trust in the profession.

In this regard the panel considered the judgment of Mrs Justice Cox in the case of *CHRE v NMC and Grant* in reaching its decision. In paragraph 74, she said:

*'In determining whether a practitioner's fitness to practise is impaired by reason of misconduct, the relevant panel should generally consider not only whether the practitioner continues to present a risk to members of the public in his or her current role, but also whether the need to uphold proper professional standards and public confidence in the profession would be undermined if a finding of impairment were not made in the particular circumstances.'*

In paragraph 76, Mrs Justice Cox referred to Dame Janet Smith's "test" which reads as follows:

*'Do our findings of fact in respect of the doctor's misconduct, deficient professional performance, adverse health, conviction, caution or determination show that his/her/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 finds that patients were put at potential unwarranted risk of harm as a result of Ms Bekantoy's conduct. It accepted the NMC's submission that whilst there was no direct harm caused by Ms Bekantoy's conduct, it had the potential to put undue stress on the Trust and on her colleagues to cover her shifts when she was dishonestly claiming to be sick. The panel noted that besides her initial acceptance of the charges at a local level, Ms Bekantoy has not provided any further reflections, insight or evidence of strengthened practice that would satisfy the panel that she would act differently in the future. The panel noted that Ms Bekantoy has not engaged with the NMC, and so it had no current information about the ongoing risk of harm to the public and therefore limb a) of the *Grant* test is engaged.

In considering the seriousness of the charges, the panel accepted the NMC submissions that Ms Bekantoy's conduct was serious and it brought the profession into disrepute. It noted that Ms Bekantoy's conduct fell seriously short of the standards expected of nurses, in that she acted dishonestly in a premeditated, systematic way for her own financial gain. The panel considered that Ms Bekantoy abused her position of trust as a nurse for her own benefit. It was satisfied that confidence in the nursing profession would be undermined if its regulator did not find charges relating to dishonesty extremely serious. The panel therefore concluded that limb b) is engaged.

Ms Bekantoy's conduct had breached the fundamental tenets of the nursing profession and therefore brought its reputation into disrepute. The panel accepted the NMC's submission that Ms Bekantoy did not act with honesty or integrity. In the absence of any new information regarding Ms Bekantoy's insight or remediation, the panel concluded that she is liable to breach fundamental tenets of the profession in the future and therefore limb c) of the test is engaged.

The panel noted that there are several convictions for fraud by false representation, spanning several years and the panel considered that this demonstrates a risk of repetition. The panel concluded, in the absence of any new evidence to the contrary, that Ms Bekantoy is liable to act dishonestly in the future and therefore limb d) of the test is engaged.

In light of the above, the panel concluded that a finding of impairment is necessary on the ground 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 considered that Ms Bekantoy had exploited her position as a nurse for personal financial gain, and had breached fundamental tenets of the nursing profession, namely honesty and integrity. The panel considered the difficult personal circumstances that Ms Bekantoy described which led to her misconduct, but it determined that the public interest outweighs her interests in this case.

Therefore, the panel determined that a finding of impairment on public interest grounds is required because of the seriousness of the charges, the repeated and scale of the dishonesty and the lack of information provided by Ms Bekantoy. 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 and therefore also finds Ms Bekantoy's fitness to practise impaired on the grounds of public interest.

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

## **Sanction**

The panel has considered this case very carefully and has decided to make a striking-off order. It directs the registrar to strike Ms Bekantoy off the register. The effect of this order is that the NMC register will show that Ms Bekantoy has been struck-off the register.

In reaching this decision, the panel has had regard to all the evidence that has been adduced in this case and had careful regard to the Sanctions Guidance (SG) published by the NMC. The panel accepted the advice of the legal assessor.

## **Representations on sanction**

The panel noted that in the Notice of Meeting, dated 22 May 2025, the NMC had advised Ms Bekantoy that it would seek the imposition of a striking-off order if it was found that Ms Bekantoy's fitness to practise is currently impaired.

The NMC submitted that taking no further action, or imposing a caution order would be inappropriate given the seriousness of the charges and ongoing public protection concerns. The NMC submitted that there are no workable, practicable conditions that could be formulated because the concerns relate to deep-seated attitudinal issues which cannot be addressed by conditions.

The NMC submitted that a suspension order would not be an appropriate or proportionate sanction because the charges relate to high-level dishonesty, which was premeditated, systematic and long-standing. The NMC submitted that a suspension order would not reflect the nature and seriousness of Ms Bekantoy's convictions and that temporary suspension from the NMC register would not be sufficient to protect the public or to maintain public confidence in the profession.

The NMC submitted that a striking-off order is the appropriate and proportionate sanction in the circumstances of the case, given the public protection and public interest concerns.

## **Decision and reasons on sanction**

Having found Ms Bekantoy'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 behaviour over a period of time;
- Multiple incidents of a similar nature;
- No evidence of remediation;
- Lack of insight into actions;
- Abused her position of trust as a nurse;
- Actions that placed patients, colleagues at an unwarranted risk of harm; and
- Actions that were damaging to the reputation of the nursing profession.

The panel also took into account the following mitigating features:

- Personal mitigation put forward at a local level;
- Admissions of misconduct and remorse in the initial investigation.

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 Bekantoy'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 Bekantoy's misconduct was not at the lower end of the spectrum and that a caution order 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 impose a caution order.

The panel next considered whether placing conditions of practice on Ms Bekantoy's registration would be a sufficient and appropriate response. The panel is of the view that there are no practical or workable conditions that could be formulated, given the nature of the charges in this case. The panel noted that this is not a case regarding Ms Bekantoy's clinical practice. It considered that there are no conditions that could address the concerns

about her honesty and integrity. The misconduct identified in this case was not something that can be addressed through retraining. Furthermore, the panel concluded that the placing of conditions on Ms Bekantoy's registration would not adequately address the seriousness of this case and mark the public interest.

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 conduct, as highlighted by the facts found proved, was a significant departure from the standards expected of a registered nurse. The panel noted that the serious breach of the fundamental tenets of the profession evidenced by Ms Bekantoy's actions is fundamentally incompatible with Ms Bekantoy remaining on the register.

In this particular case, the panel determined that a suspension order would not be a sufficient, appropriate or proportionate sanction. The panel noted that the charges did not relate to a single instance of misconduct, but to a pattern of repeated dishonest behaviour. The panel considered that Ms Bekantoy's actions were premeditated, systematic and solely for personal financial gain. The panel considered that there is evidence of harmful deep-seated attitudinal issues. The panel also bore in mind that Ms Bekantoy has not provided any evidence throughout these proceedings of reflection, insight or remediation. In the absence of this information, the panel concluded that there is a significant risk of repeating behaviour. The panel concluded that in light of the above factors, a suspension order is not the appropriate or proportionate sanction in this case.

Finally, in looking at a striking-off order, the panel took note of the following paragraphs of the SG:

- *Do the regulatory concerns about the nurse or midwife raise fundamental questions about their professionalism?*
- *Can public confidence in nurses and midwives be maintained if the nurse or midwife is not removed from the register?*
- *Is striking-off the only sanction which will be sufficient to protect patients, members of the public, or maintain professional standards?*

Ms Bekantoy's actions were significant departures from the standards expected of a registered nurse, and are fundamentally incompatible with her remaining on the register. The panel was of the view that the findings in this particular case demonstrate that Ms Bekantoy's actions were serious and to allow her to continue practising would undermine public confidence in the profession and in the NMC as a regulatory body. The panel concluded that because of the seriousness of the charges, public confidence in the profession and the NMC as its regulator would be seriously undermined if Ms Bekantoy is not removed from the register. The panel was satisfied that a striking-off order is the only sanction that will protect the public or mark the public interest.

Balancing all of these factors and after taking into account all the evidence before it during this case, the panel determined that the appropriate and proportionate sanction is that of a striking-off order. Having regard to the matters it identified, in particular the effect of Ms Bekantoy's actions in bringing the profession into disrepute by adversely affecting the public's view of how a registered nurse should conduct herself, the panel has concluded that nothing short of this would be sufficient in this case.

The panel considered that this order was 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.

### **Interim order**

As the striking-off order cannot take effect until the end of the 28-day appeal period, the panel has considered whether an interim order is required in the specific circumstances of

this case. It may only make an interim order if it is satisfied that it is necessary for the protection of the public, is otherwise in the public interest or in Ms Bekantoy's own interests until the striking-off sanction takes effect. The panel heard and accepted the advice of the legal assessor.

### **Representations on interim order**

The panel took account of the representations made by the NMC that an interim order is necessary to meet the public interest factors. It is submitted that an interim order is necessary for 18 months to cover the initial appeal period of 28-days before the sanction comes into effect, and for any subsequent appeal that may be lodged.

### **Decision and reasons on interim order**

The panel was satisfied that an interim order is necessary for the protection of the public and is otherwise in the public interest. The panel had regard to the seriousness of the facts found proved and the reasons set out in its decision for the substantive order in reaching the decision to impose an interim order.

The panel concluded that an interim conditions of practice order would not be appropriate or proportionate in this case, due to the reasons already identified in the panel's determination for imposing the substantive order. The panel also considered that given Ms Bekantoy's lack of engagement and the panel's findings, an interim order is necessary to protect the public until the substantive striking-off order comes into effect. The panel therefore imposed an interim suspension order for a period of 18 months due to protect the public and meet the public interest in this case in any appeal period.

If no appeal is made, then the interim suspension order will be replaced by the substantive striking off order 28 days after Ms Bekantoy is sent the decision of this hearing in writing.

This will be confirmed to Ms Bekantoy in writing.

That concludes this determination.