

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

**Substantive Meeting
Tuesday, 29 July 2025**

Virtual Meeting

Name of Registrant:	Kenneth Michael Chell
NMC PIN:	97A0165E
Part(s) of the register:	Nursing, Sub part 1 RNA, Registered Nurse - Adult (31 March 2000)
Relevant Location:	Staffordshire
Type of case:	Conviction
Panel members:	Judith Webb (Chair, lay member) Deborah Ann Bennion (Registrant member) James Kellock (Lay member)
Legal Assessor:	Nigel Mitchell
Hearings Coordinator:	Ibe Amogbe
Consensual Panel Determination:	Accepted
Facts proved:	Charge 1 in its entirety
Facts not proved:	N/A
Fitness to practise:	Impaired
Sanction:	Striking-off order
Interim order:	Interim suspension order (18 months)

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 Mr Chell's registered email address by secure email on 24 July 2025.

The panel also noted an email from Mr Chell dated 23 July 2025, in which he had waived his right to the 28 days' notice period of the meeting.

The panel accepted the advice of the legal assessor.

The panel took into account that the Notice of Meeting provided details of the allegation, and that the meeting was to be held virtually.

In the light of all of the information available, the panel was satisfied that Mr Chell 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 21 May 2024 at North Staffordshire Magistrates Court were convicted of the following offences:*
 - a) *Three counts of making indecent photograph/pseudo-photograph of a child Contrary to sections 1 (1) (a) and 6 of the Protection of Children Act 1978*
 - b) *Two counts of distributing an indecent photograph/pseudo-photograph of a child. Contrary to sections 1 (1) (b) and 6 of the Protection of Children Act 1978*
 - c) *One count of possess extreme pornographic images/images portraying*

an act of intercourse/oral sex with a dead/alive animal. Contrary to sections 63 (1), (7) (d) and 67 (3) of the Criminal Justice and Immigration Act 2008.

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

Consensual Panel Determination

At the outset of this meeting, the panel was made aware that a provisional agreement of a Consensual Panel Determination (CPD) had been reached with regard to this case between the Nursing and Midwifery Council (NMC) and Mr Chell.

The agreement, which was put before the panel, sets out Mr Chell's full admissions to the facts alleged in the charges, that his actions led to a conviction, and that his fitness to practise is currently impaired by reason of that conviction. It is further stated in the agreement that the appropriate sanction in this case would be a striking-off order.

The panel has considered the provisional CPD agreement reached by the parties.

That provisional CPD agreement reads as follows:

'The Nursing & Midwifery Council ("the NMC") and Kenneth Michael Chell ('Mr Chell hereafter'), PIN 97A0165E ("the Parties") agree as follows:

- 1. Mr Chell is content for his case to be dealt with by way of a CPD meeting.*

The charge

- 2. Mr Chell admits the following charges:*

3. *That you, a registered nurse*

1) *On 21 May 2024 at North Staffordshire Magistrates Court were convicted of the following offences:*

- a) *Three counts of making indecent photograph/pseudo-photograph of a child Contrary to sections 1 (1) (a) and 6 of the Protection of Children Act 1978*
- b) *Two counts of distributing an indecent photograph/pseudo-photograph of a child. Contrary to sections 1 (1) (b) and 6 of the Protection of Children Act 1978*
- c) *One count of possess extreme pornographic images/images portraying an act of intercourse/oral sex with a dead/alive animal. Contrary to sections 63 (1), (7) (d) and 67 (3) of the Criminal Justice and Immigration Act 2008.*

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

The facts

- 4. *Mr Chell appears on the register of nurses, midwives and nursing associates maintained by the NMC as a Registered Nurse Adult (RNA), sub part 1 and has been on the NMC register since 31 March 2000.*
- 5. *On 31 January 2024, the NMC received a self-referral from Mr Chell. The information provided to the NMC by Mr Chell was that the Police had attend his home address and seized items as he was being investigated for being in possession of indecent images. At the time of Mr Chell's self-referral he had not been arrested or charged with any offences.*
- 6. *At the material time of the concerns Mr Chell was employed by Maria Mallaband Care Group ("MMCG") as the Head of Governance and Health and Safety until his employment was terminated on 24 January 2024.*

7. *It is reported by the Police that intelligence was received that a user of a Snapchat account associated with username who the daddy78 was suspected of uploading 1 x category A indecent video of a child to the internet via snapchat. On 29 March 2023, officers attended Mr Chell's home address and conducted a voluntary search in relation to the indecent images being accessed from his address. As a result, a number of Mr Chell's electronics were seized to assist in the Police investigation.*
8. *On 7 September 2023, Mr Chell was interviewed under caution by the Police and made full admissions to the Police confirming that he had viewed Indecent Images of Children ('IIOC'), distributed IIOC to various people and received IIOC from various people including extreme porn and that he was responsible for all the contents found on his devices.*
9. *On 2 February 2024, Mr Chell was subsequently charged with the following criminal offences:*
 1. *Make indecent photograph / pseudo-photograph of a child*
 2. *Make indecent photograph / pseudo-photograph of a child*
 3. *Make indecent photograph / pseudo-photograph of a child*
 4. *Distribute an indecent photograph / pseudo-photograph of a child.*
 5. *Distribute an indecent photograph / pseudo-photograph of a child.*
 6. *Possess extreme pornographic image / images portraying an act of intercourse / oral sex with a dead / alive animal.*
10. *On 21 May 2024 Mr Chell entered a guilty plea to the charges. On 4 September 2024 at the Crown Court of Stoke on Trent Mr Chell's was sentenced to:*
 1. *8 months imprisonment suspended 2 years*
 2. *4 months imprisonment suspended 2 years*
 3. *1 Month imprisonment suspended 2 years*
 4. *2 years imprisonment suspended 2 years*

5. 8 months imprisonment suspended 2 years
6. 1 month imprisonment suspended 2 years concurrent AND
7. 30 days RAR Rehabilitation activity
8. Sexual harm prevention order for 10 years
9. Sexual offenders register 10 years and pay a victim surcharge £187.00 fine of £250 and costs for £150.00.

Impairment

11. *Mr Chell's fitness to practise is currently impaired by reason of his conviction on public protection and public interest grounds. In agreeing this the parties have had regard to the questions posed by Mrs Justice Cox adopting the approach of Dame Janet Smith in the 5th Shipman Report in Council for Healthcare Regulatory Excellence v (1) NMC (2) Grant [2011] EWHC 927 (Admin): which are whether Mr Chell:-*

- a) *Has in the past, 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, and/or is he liable in the future to bring the professions into disrepute;*
- c) *Has in the past, and/or is he liable in the future to breach one of the fundamental tenets of the professions;*
- d) *Has in the past, and/or is he liable in the future to act dishonestly."*

12. *Limbs a, b and c are engaged in this case.*

13. *In regard to limb a) although Mr Chell's did not cause any harm to patients directly it can be said that his conduct which led to his conviction raises serious concerns about the potential risk he poses to others as a result of his behaviour in making and possessing indecent images of children and*

photographs of extreme image/images of an act of intercourse/oral sex with a dead/alive animal.

14. In regard to limb b) Mr Chell's conduct in making and processing the indecent images of children and a person performing a sexual act on a dead/alive animal would be considered to be deplorable by his fellow practitioners and members of the public. NMC guidance on 'Cases involving sexual misconduct states': Sexual misconduct will be particularly serious if the nurse, midwife or nursing associate has abused a special position of trust they hold as a registered caring professional. It will also be particularly serious if they have to register as a sex offender. The level of risk to patients will be an important factor, but the panel should also consider that generally, sexual misconduct will be likely to seriously undermine public trust in nurses, midwives and nursing associates'. It is clear that Mr Chell's conduct brings the profession into disrepute in that the public's trust in the nursing profession has been seriously undermined.

15. In addition, Mr Chell has been convicted of a serious criminal offence which has caused significant damage to the reputation of the nursing profession, and the nature of the offending is a gross breach of the trust that members of the public place in registered and regulated professionals, in this case a nurse.

16. In regard to limb c) Mr Chell's criminal conviction for serious sexual offences has breached a fundamental tenet of the nursing profession in that he has failed to keep to the laws of the country.

17. Mr Chell has also breached the following standards of The Code (2018):-

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.*

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

18. *For the reasons set out in paragraphs 5 - 14, above, Mr Chell's accepts that at the time of committing the offence, his fitness to practise as a nurse was impaired.*

Remediation, reflection, training, insight, remorse

19. *In considering the question of whether Mr Chell's fitness to practise is currently impaired, the Parties have considered Cohen v General Medical Council [2008] EWHC 581 (Admin) in which the court set out three matters which it described as being 'highly relevant' to the determination of the question of current impairment;*

- a) Whether the conduct that led to the charge(s) is easily remediable.*
- b) Whether it has been remedied.*
- c) Whether it is highly unlikely to be repeated.*

20. *The conduct that led to Mr Chell's conviction for serious sexual offences involving children and animals could be said to be extremely difficult to remediate, both in terms of public protection and the wider public interest.*

21. *Mr Chell's in his completed Case Management form (CMF) undated and an email dated 25 June 2025, accepts the charges, and does express an acceptance of current impairment. However, at this stage, it is accepted that the possibility of future offending cannot be ruled out.*

22. *Whilst Mr Chell's remains the subject of criminal orders imposed, in part at least, to address his risk of reoffending, it would be premature to conclude he no longer poses a risk to the public. As such, and as accepted by Mr Chell's, his fitness to practice is currently impaired on public protection grounds.*

Public interest impairment

23. *A finding of impairment is necessary on public interest grounds.*

24. *In Council for Healthcare Regulatory Excellence v (1) Nursing and Midwifery Council (2) Grant [2011] EWHC 927 (Admin) at paragraph 74 Cox J commented that:*

“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.”

25. *The conduct of Mr Chell has fallen far short of the standards the public would expect of professionals caring for them, public confidence in the professions has been seriously undermined. A finding of impairment is therefore required to maintain public confidence in the profession and professional standards by marking Mr Chell's conduct as wholly unacceptable offending behaviour for a registered nurse.*

26. *Mr Chell's accepts that his fitness to practice is currently impaired on public interest grounds.*

Sanction

27. *Mr Chell's accepts that the appropriate sanction in this case is a Striking Off Order.*

28. *The parties have considered the NMC's Sanction Guidance, bearing in mind that it provides guidance, not firm rules. The purpose of sanction is not to be*

punitive; however, in order to address the public interest including protecting the public, maintaining confidence in the profession, and upholding proper standards of conduct and behaviour, sanctions may have a punitive effect.

29. The aggravating factors in this case are as follows:

a) Mr Chell's has a conviction for serious criminal sexual offences.

30. Mr Chell is subject to a 30 days RAR Rehabilitation Activity, and he is subject to a Sexual harm prevention order for 10 years, expected to expire in 2034 and has had to sign the sex offenders register for 10 years. Further his suspended sentences will not fall away until 4 September 2026.

31. The mitigating feature in this case is as follows:

a) Mr Chell's has admitted the charges and that his fitness to practice is impaired by reason of his conviction.

32. NMC guidance on considering sanctions for serious cases gives specific guidance on sanctions for sexual offences and criminal convictions. Sexual offending, particularly against children, is identified as likely to seriously undermine confidence in the profession and involves a serious and fundamental breach of public trust in nurses, midwives and nursing associates. As a general rule a registered professional should not be permitted to start practising again, if at all, until they have completed a sentence for a serious offence (Council for the Regulation of Health Care Professionals v [1] General Dental Council and [2] Fleischmann [2005] EWHC 87 [QB]).

33. Mr Chell's will not have completed his sentence until 2026 at the earliest and will be subject to the reporting requirements set out under the Sexual Offence Act 2003 for a period of 10 years, from 4 September 2024 and expected to end in September 2034.

34. *Taking no further action or imposing a caution order would be inappropriate as they would not address the public protection concerns identified in this document. These sanctions would not reflect the seriousness of the convictions and therefore public confidence in the professions and professional standards would not be maintained.*
35. *Imposing a Conditions of Practice Order would not be appropriate as there are no identified clinical concerns that could be addressed with conditions. This sanction would not reflect the seriousness of the convictions therefore public confidence in the professions and professional standards would not be maintained.*
36. *Imposing a suspension order would temporarily protect the public but would not be appropriate as Mr Cell would still be subject to a criminal sentence at the conclusion of a maximum period of suspension. This sanction would not reflect the seriousness of the convictions and therefore public confidence in the profession and professional standards would not be maintained.*
37. *In any event, a Striking Off Order is the appropriate sanction in this case.*
38. *MR Chell's criminal offending has seriously undermined the public's trust and confidence in him. His criminal offending and subsequent sentence is fundamentally incompatible with being a registered professional nurse. Only a Striking Off Order will be sufficient to protect patients, maintain public confidence in the profession and maintain professional standards.*

Interim order

An interim order is required in this case. The interim order is necessary for the protection of the public and otherwise in the public interest. This is because any sanction imposed by the panel will not come into immediate effect but only after the expiry of 28 days beginning with the date on which the notice of the order is

sent to the registrant or after any appeal is resolved. An interim order of 18 months is necessary to cover any possible appeal period. An interim suspension order is appropriate as this would be consistent with the sanction imposed by the panel and would address public protection and public interest concerns already identified in this document.

The parties understand that this provisional agreement cannot bind a panel, and that the final decision on findings, impairment and sanction is a matter for the panel. The parties understand that, in the event that a panel does not agree with this provisional agreement, the admissions to the charges and the agreed statement of facts set out above, may be placed before a differently constituted panel that is determining the allegation, provided that it would be relevant and fair to do so.'

Here ends the provisional CPD agreement between the NMC and Mr Chell. The provisional CPD agreement was signed by Mr Chell on 18 July 2025 and the NMC on 23 July 2025.

Decision and reasons on the CPD

The panel decided to accept the CPD. It considered the provisional CPD agreement as a well drafted and comprehensive document. The panel decided not to make any amendment to it.

The panel heard and accepted the legal assessor's advice. He referred the panel to the 'NMC Guidance on Decisions on Serious Misconduct DMA-7', 'NMC Sanctions Guidance' (SG) specifically SAN 2 and to the 'NMC's guidance on Consensual Panel Determinations DMA-2'. He reminded the panel that they could accept, amend, or outright reject the provisional CPD agreement reached between the NMC and Mr Chell. Further, the panel should consider whether the provisional CPD agreement would be in the public interest. This means that the outcome must ensure an appropriate level of public protection,

maintain public confidence in the professions and the regulatory body, and declare and uphold proper standards of conduct and behaviour.

The legal assessor also referred the panel to relevant case law; *Arunachalam v GMC* [2019] EWHC 758 (Admin), in which Mr Justice Kerr stated that “*sexual misconduct is self-evidently always serious and often likely to lead to erasure even of a first-time offender*”. He also referred to the case of *Giele v GMC* [2006] 1 WLR 942, in which Collins J emphasised that “*the severity of the sanction required to maintain and preserve public confidence in the profession must reflect the views of an informed and reasonable member of the public.*”

The panel noted that Mr Chell admitted the facts of the charges. Accordingly, the panel was satisfied that the charges found proved by way of Mr Chell's admissions as set out in the signed provisional CPD agreement.

Decision and reasons on impairment

The panel then went on to consider whether Mr Chell's fitness to practise is currently impaired. Whilst acknowledging the agreement between the NMC and Mr Chell, the panel has exercised its own independent judgement in reaching its decision on impairment.

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 agreed with the CPD agreement that limbs a, b and c of the *Grant* test are engaged in this case, both as to the past and the future. It decided that Mr Chell's conduct which led to his conviction, presents an unwarranted risk of harm, brought the nursing profession into disrepute, and breached fundamental tenets of the nursing profession.

The panel also agreed with the CPD agreement and was of the view that Mr Chell's actions amounted to breaches of the Code. Specifically:

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

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

In respect of the convictions, the panel had regard to the nature and seriousness of the offences, which resulted in a sentence of imprisonment, suspended for two years as well as further restrictive orders for a period of up to 10 years. The panel considered these to be serious criminal offences, which are incompatible with the high standards expected of a registered nurse.

The panel had regard to all the material before it and noted the acceptance at paragraph 21 of the CPD agreement, which stated that the possibility of future offending cannot be ruled out. In light of this, the panel determined that there is a risk of repetition and there remains a risk of harm to the public. It therefore decided that a finding of impairment is necessary on the grounds of public protection.

The panel had regard to the serious nature of Mr Chell's conduct and his conviction. It determined, particularly as it involved offences of making and distributing indecent photograph/ pseudo-photograph involving children, and possessing extreme pornographic image(s) of an act involving an animal, that public confidence in the profession would be undermined if a finding of impairment were not made in this case. For this reason, the panel determined that a finding of current impairment on public interest grounds is also required. It was of the view that a fully informed member of the public, aware of the proven charge in this case, would be very concerned if Mr Chell were permitted to practise as a registered nurse without restrictions.

In this respect, the panel endorsed paragraphs 11 to 26 of the provisional CPD agreement.

Decision and reasons on sanction

Having found Mr Chell'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:

- Mr Chell's six convictions for serious criminal sexual offences
- The offences raise significant public protection and public interest concerns as they involve offences of a sexual nature towards children
- The panel has seen no evidence of insight beyond his admissions and agreement to the CPD

The panel also took into account the following mitigating features:

- Mr Chell has admitted the charges and that his fitness to practice is impaired by reason of his convictions
- Mr Chell self-referred to the NMC as soon as the police investigation began

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 Chell'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 Chell'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 Mr Chell's registration would be a sufficient and appropriate response. The panel was 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 was of the view that Mr Chell's conduct, and convictions were difficult to remediate. Furthermore, the panel concluded that the placing of conditions on Mr Chell'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 panel considered the guidance set out by SG detailing which factors make suspension orders appropriate.

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 Mr Chell's actions is fundamentally incompatible with Mr Chell remaining on the register.

In this case, the panel determined that a suspension order would not be a sufficient, appropriate, or proportionate sanction. It would not protect the public sufficiently nor satisfy the public interest considerations 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?'*

Mr Chell's actions were very significant departures from the standards expected of a registered nurse and are fundamentally incompatible with him remaining on the register. The panel was of the view that the findings in this case demonstrate that Mr Chell's actions were serious and to allow him to continue practising would undermine public confidence in the profession and in the NMC as a regulatory body.

The panel also noted that Mr Chell has expressed a wish for the proceedings to be concluded quickly, has agreed that striking-off is an appropriate order and has indicated that he does not intend to return to practise.

Balancing all these factors and after considering all the evidence before it during this case, the panel agreed with the CPD 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 Mr Chell's actions in bringing the profession into disrepute by adversely affecting the public's view of how a registered nurse should conduct himself, 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.

This will be confirmed to Mr Chell in writing.

Decision and reasons on interim order

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 Mr Chell's own interest. The panel heard and accepted the advice of the legal assessor.

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 agreed with the CPD 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 therefore imposed an interim suspension order for a period of 18 months in order to protect the public and otherwise in the public interest, during any potential appeal period.

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

This will be confirmed to Mr Chell in writing.

That concludes this determination.