Nursing and Midwifery Council Fitness to Practise Committee

Substantive Order Review Hearing Tuesday, 8 July 2025

Virtual Hearing

Name of Registrant: Natasha Maria Chipindiko

NMC PIN: 18A0015E

Part(s) of the register: Registered Nurse – Sub Part 1

Adult Nursing – January 2018

Relevant Location: Wolverhampton

Type of case: Lack of competence

Panel members: Caroline Jones (Chair, Registrant member)

Corinne Foy (Registrant member) Sophia Clarke (Lay member)

Legal Assessor: Graeme Dalgleish

Hearings Coordinator: Sara Glen

Nursing and Midwifery

Council:

Represented by Isabella Kirwan, Case Presenter

Mrs Chipindiko: Not present and unrepresented

Order being reviewed: Conditions of practice order (24 months)

Fitness to practise: Impaired

Outcome: Conditions of practice order (12 months) with a

review

Decision and reasons on service of Notice of Hearing

The panel was informed at the start of this hearing that Mrs Chipindiko was not in attendance and that the Notice of Hearing had been sent to Mrs Chipindiko's registered email address by secure email on 9 June 2025.

Further, the panel noted that the Notice of Hearing was also sent to Mrs Chipindiko's representative at the Royal College of Nursing (RCN) on 9 June 2025.

Ms Kirwan, 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 Mrs Chipindiko's right to attend, be represented and call evidence, as well as the panel's power to proceed in her absence.

In the light of all of the information available, the panel was satisfied that Mrs Chipindiko 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 Mrs Chipindiko

The panel next considered whether it should proceed in the absence of Mrs Chipindiko. The panel had regard to Rule 21 and heard the submissions of Ms Kirwan who invited the panel to continue in the absence of Mrs Chipindiko. She submitted that Mrs Chipindiko had voluntarily absented herself.

Ms Kirwan referred the panel to the case law of *GMC v Adeogba* [2016] EWCA Civ 162 and *R. v Jones* (No.2) [2002] UKHL 5.

Ms Kirwan submitted that the notice of hearing has been properly served, there has been no application of adjournment from Mrs Chipindiko. She further submitted that there is no reason to suppose that an adjournment would secure Mrs Chipindiko's attendance at a future date.

Ms Kirwan referred the panel to the documentation from Ms Freeman (RCN) which included an email, dated 2 July 2025, stating that Mrs Chipindiko would not be attending today's hearing but was content for the hearing to proceed in her absence:

'Our member will not be attending the hearing, nor will they be represented. No disrespect is intended by their non-attendance. Our member has received the notice of hearing and is happy for the hearing to proceed in their absence. They are keen to engage with the proceedings.'

The panel accepted the advice of the legal assessor who referred the panel to NMC Guidance CMT-8 namely 'Proceeding with hearings when the nurse, midwife or nursing associate is absent' and the case of Adeogba.

The panel has decided to proceed in the absence of Mrs Chipindiko. In reaching this decision, the panel has considered the submissions of Ms Kirwan, the representations made on Mrs Chipindiko's behalf, and the advice of the legal assessor. It has had particular regard to any relevant case law and to the overall interests of justice and fairness to all parties. It noted that:

- No application for an adjournment has been made by Mrs Chipindiko;
- Mrs Chipindiko has informed the NMC that she has received the Notice of Hearing and confirmed she is content for the hearing to proceed in her absence:
- There is no reason to suppose that adjourning would secure her attendance at some future date; and
- There is a strong public interest in the expeditious review of the case.

In these circumstances, the panel has decided that it is fair to proceed in the absence of Mrs Chipindiko.

Decision and reasons on review of the substantive order

The panel decided to confirm the current conditions of practice order.

This order will come into effect at the end of 16 August 2025 in accordance with Article 30(1) of the 'Nursing and Midwifery Order 2001' (the Order).

This is the first review of a substantive conditions of practice order originally imposed for a period of 24 months by a Fitness to Practise Committee panel on 19 July 2023.

The current order is due to expire at the end of 16 August 2025.

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

The charges found proved by way of admission which resulted in the imposition of the substantive order were as follows:

'That you a registered nurse between 8 December 2019 and the 28 October 2021 failed to demonstrate the standards of knowledge, skill, and judgement required to practise as a band 5 nurse in that:

- 1. On 9 December 2019 incorrectly administered 35 units of Novorapid to Resident A instead of the prescribed dosage of 6 units.
- 2. On 25 June 2020 failed to administer a 100mg Gabapentin tablet to Patient A, the prescribed dosage being two 100mg tablets.
- 3. On 25 June 2020 incorrectly documented on Patient A's MAR chart that you had administered two 100mg Gabapentin to them.
- 4. On or before 20 July 2020:
- (a) Left the medication trolley unattended with the keys in the lock.
- (b) Administered Digoxin to a patient before checking their pulse.

- (c) Administered all the patient's medication in one go, via PEG, rather than individually with a water flush in between.
- (d) Failed to correctly administer Fortisip to a patient.
- (e) Failed to complete a patient's resident of the day form.
- (f) Needed reminding to complete wound charts and care plans after dressings had been changed.
- (g) Failed to check a patient's care plan before applying a dressing.
- (h) Failed to adequately complete a care plan for a patient who suffered a skin tear.
- 5. On 31 July 2020 incorrectly administered 60mg of Isosorbide Mononitrate to Patient B instead of the prescribed dosage of 30mg.
- 6. On 31 July 2020 incorrectly documented on Patient B's MAR chart that you had administered 30mg of Isosorbide Mononitrate to them.
- 7. On 1 August 2020 increased Patient C's oxygen levels before:
- (a) Seeking the advice from a senior nurse and/or
- (b) Seeking the advice of a GP.
- 8. Between the 23 April 2021 and 27 October 2021 failed to;
- (a) Document drugs that had been administered to patients on 24 September 2021.
- (b) Document drugs that had been administered to patients on 30 September 2021
- (c) Document drugs that had been administered to a patient on 27 October 2021
- (d) Document patient observations in a timely manner on 23 April 2021.
- (e) Communicate handovers effectively on 23 April 2021 and/or 22 June 2021.

And in light of the above your fitness to practise is impaired by reason of your lack of competence.'

The original panel determined the following with regard to impairment:

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

In respect of lack of competence the panel determined that Mrs Chipindiko's fitness to practise is currently impaired on the ground of public protection and is also otherwise in the wider public interest.'

The original panel determined the following with regard to sanction:

'The panel next considered whether placing conditions of practice on Mrs Chipindiko'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 determined that it would be possible to formulate appropriate and practical conditions which would address the failings highlighted in this case. The panel accepted that Mrs Chipindiko would be willing to comply with conditions of practice.

The panel noted that the incidents are remediable and Mrs Chipindiko has developed insight into her lack of competence, has provided reflection, is currently on a personal development plan (PDP) and her current manager has provided testimonial regarding her progress in the role. The panel noted that there has been no concerns since the incidents in question. The panel was of the view that it was in the public interest that, with appropriate safeguards, Mrs Chipindiko should remain practising as a nurse.

Balancing all of these factors, the panel agreed with the CPD that the appropriate and proportionate sanction is that of a conditions of practice order.

The panel was of the view that to impose a suspension order would be wholly disproportionate and would not be a reasonable response in the circumstances of Mrs Chipindiko's case because she has been engaging with the process, has demonstrated remorse and developed insight. The panel also noted that Mrs Chipindiko is currently working as a nurse and her manager stated that she is progressing in the role whilst having the support she needs by way of a PDP.

Having regard to the matters it has identified, the panel has concluded that a conditions of practice order will mark the importance of maintaining public confidence in the profession, and will send to the public and the profession a clear message about the standards of practice required of a registered nurse.

The panel agreed with the CPD that the following conditions are appropriate and proportionate in this case:

'For the purposes of these conditions, 'employment' and 'work' mean any paid or unpaid post in a nursing, midwifery or nursing associate role. Also,

'course of study' and 'course' mean any course of educational study connected to nursing, midwifery or nursing associates.'

- You must limit your nursing practice to one substantive employer. This
 must not be an agency.
- 2. You must not be the sole nurse in charge of any shift.
- You must not administer medication unless directly supervised by another registered nurse; until you have been assessed as competent to do so by another registered nurse.
- 4. You must ensure that you are supervised by another registered nurse any time you are working.

Your supervision must consist of:

- Working at all times on the same shift as, but not always directly observed by another registered nurse.
- 5. You must work with your supervisor to create a personal development plan (PDP). Your PDP must address the concerns about
 - medication administration;
 - record keeping; and,
 - communication and management in emergency situations.

You must:

- a. Send your case officer a copy of your PDP before the next NMC review.
- b. Meet with your supervisor at least every month to discuss your progress towards achieving the aims set out in your PDP.
- c. Send your case officer a report from your supervisor before the next NMC review. This report must show your progress towards achieving the aims set out in your PDP.
- 6. You must keep the NMC informed about anywhere you are working by:
- a. Telling your case officer within seven days of accepting or leaving any employment.

- b. Giving your case officer your employer's contact details.
- 7. You must keep the NMC informed about anywhere you are studying by:
- a. Telling your case officer within seven days of accepting any course of study.
- b. Giving your case officer the name and contact details of the organisation offering that course of study.
- 8. You must immediately give a copy of these conditions to:
- a. Any organisation or person you work for.
- b. Any employers you apply to for work (at the time of application).
- c. Any establishment you apply to (at the time of application), or with which you are already enrolled, for a course of study.
- 9. You must tell your case officer, within seven days of your becoming aware of:
- a. Any clinical incident you are involved in.
- b. Any investigation started against you.
- c. Any disciplinary proceedings taken against you.
- 10. You must allow your case officer to share, as necessary, details about your performance, your compliance with and/or progress under these conditions with:
- a. current or future employer.
- b. Any educational establishment.
- c. Any other person(s) involved in your retraining and/or supervision required by these conditions.

[...]

Any future panel reviewing this case would be assisted by:

 Mrs Chipindiko's attendance at the review hearing, or if held as a meeting a reflective piece demonstrating your learning and progress

- A record of your continued engagement with the NMC
- Any relevant testimonials
- Evidence of any training undertaken and competencies achieved'

Decision and reasons on current impairment

The panel has considered carefully whether Mrs Chipindiko'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 practise kindly, safely 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 the written responses from the RCN on Mrs Chipindiko's behalf. It has taken account of the submissions made by Ms Kirwan on behalf of the NMC. She provided a background to the case and referred the panel to the case of *R (Ibrahim) V Nursing and Midwifery Council* [2024] EWHC 2991 (Admin), NMC guidance DMA-1 '*Impairment*' and REV-2 'Substantive order Reviews'.

Ms Kirwan submitted that it does not appear that Mrs Chipindiko has been able to demonstrate remediation of the charges found proved, as she has only been able to work for a brief period of time since the substantive order was made.

Ms Kirwan submitted that Mrs Chipindiko has continued to engage with NMC proceedings, and since the substantive order was made, Mrs Chipindiko has been [PRIVATE] and a period of suspension from her workplace. Ms Kirwan submitted that due to this, Mrs Chipindiko has been unable to comply fully with the conditions of practice order and show evidence of insight and strengthening of practice. As such, Ms Kirwan submitted that Mrs Chipindiko is still liable to put patients at risk of harm and a risk of repetition remains.

Further, Ms Kirwan submitted that a finding of current impairment is also necessary on public interest grounds and in order to maintain public confidence in the nursing profession.

Ms Kirwan submitted that Mrs Chipindiko's fitness to practice remains impaired and that the substantive order remains necessary. She submitted that the RCN has requested for the conditions of practice order to be extended for a period of 12 months to allow Mrs Chipindiko to return to nursing practice and demonstrate compliance with the conditions of practice order.

Ms Kirwan submitted that the NMC is in agreement with the RCN's position and that a 12-month extension would be an appropriate amount of time to allow Mrs Chipindiko to show evidence of remediation after [PRIVATE], and after a period of suspension from her workplace.

The panel also had regard to written representations from the RCN on Mrs Chipindiko's behalf, dated 2 July 2025.

'Firstly, we would like to inform the panel that the registrant has engaged with these proceedings throughout, and will continue to engage as required, complying with any order applicable.

By way of an update, we confirm that the registrant remains employed at Walsall Healthcare Trust. She went on [PRIVATE] in September 2023 and was due to return to work in July 2024. The registrant was suspended from work following her [PRIVATE], pending an investigation into an incident which took place prior [PRIVATE] commencing. The NMC have been kept updated in relation to this matter throughout.

We confirm that the registrant is now due to return to work following conclusion of the investigation and disciplinary proceedings, where allegations made against her were not upheld. The panel will note the enclosed letter from the registrant's employer, a copy of which has already been provided to the NMC, which confirms the outcome.

The registrant is keen to return to her nursing role. She will be returning to Elderly Care Ward which is a less intense working environment than

where she has previously worked. She recently met with her new manager, and now has a confirmed return to work date of 9 July.

[PRIVATE] The registrant remains committed to demonstrating her learning and development in relation to the areas of concerns within her practice, and is committed to working towards a return to unrestricted practice.

In the circumstances, as the registrant only worked for a brief period since the imposition of the conditions of practice as set out above, she has been unable to demonstrate remediation of the charges found proven at the substantive hearing, and therefore the registrant accepts that her current fitness to practice remains impaired.

We submit that the conditions of practice order remains appropriate in relation to the circumstances of the matter, and we respectfully request that the conditions of practice order be continued for a period of 12 months to allow the registrant to return to nursing practice, work in compliance with the conditions of practice, and provide evidence of remediation to a future reviewing panel.'

The panel heard and accepted the advice of the legal assessor.

In reaching its decision, the panel was mindful of the need to protect the public, maintain public confidence in the profession and to declare and uphold proper standards of conduct and performance.

The panel considered whether Mrs Chipindiko's fitness to practise remains impaired.

The panel noted that the original panel found that Mrs Chipindiko had developing, but not full, insight. At this hearing, the panel had not received any additional reflection or evidence of further developed insight from Mrs Chipindiko.

In addition, it noted that Mrs Chipindiko has not been able to engage with the current conditions of practice, to follow any recommendations made by the original panel, or address the concerns identified.

The original panel determined that Mrs Chipindiko was liable to repeat matters of the kind found proved. The only information before today's panel was that Mrs Chipindiko has not been able to address the concerns due to a period of suspension from work and [PRIVATE]. Mrs Chipindiko has not provided any evidence of developed insight, testimonials or relevant training. In light of this, this panel determined that Mrs Chipindiko is still 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. It considered that a well-informed member of the public and fellow practitioners would be concerned if a finding of impairment were not made in this case as Mrs Chipindiko has not provided any evidence of further insight or evidence of strengthened practice at this stage. The panel found that public confidence in the nursing profession would be undermined if no finding of current impairment were made.

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

Decision and reasons on sanction

Having found Mrs Chipindiko'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 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 Mrs Chipindiko's practice would not be appropriate in the circumstances. The SG states that a caution order may be appropriate where 'the case is at the lower end of the spectrum of impaired fitness to practise and the panel wishes to mark that the behaviour was unacceptable and must not happen again.' The panel considered that Mrs Chipindiko's lack of competence 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 imposing a further conditions of practice order on Mrs Chipindiko's registration would still be a sufficient and appropriate response. The panel is mindful that any conditions imposed must be proportionate, measurable and workable.

The panel determined that it would be possible to formulate appropriate and practical conditions which would address the failings highlighted in this case. The panel accepted that Mrs Chipindiko has been unable to comply with conditions of practice due to her current employment status and [PRIVATE], but is engaging with the NMC and is willing to comply with any conditions imposed.

The panel was of the view that a further conditions of practice order is sufficient to protect patients and the wider public interest, noting as the original panel did that the failings identified can be addressed and there was no deep-seated attitudinal problems. It found that in this case, a conditions of practice order would be workable, measurable and appropriate, and there are conditions which could be formulated which would protect patients and address the wider public interest during the period they are in force.

The panel was of the view that to impose a suspension order or a striking-off order would be wholly disproportionate and would not be a reasonable response in this case as Mrs Chipindiko has not had the opportunity to engage fully with the conditions as set out in the substantive conditions of practice order.

The panel acknowledged the fact that during the time since Mrs Chipindiko's substantive meeting and this hearing, Mrs Chipindiko was [PRIVATE] and under suspension from work due to a disciplinary investigation. The panel further noted the disciplinary outcome letter dated 28 May 2025, which stated that all allegations against Mrs Chipindiko were not upheld. Therefore, the panel was of the view that a suspension order would not be fair or appropriate in order to allow Mrs Chipindiko the opportunity to fully reflect on her lack of competence and strengthen her practice.

The panel was satisfied that Mrs Chipindiko's lack of competence is capable of being addressed and it acknowledged that Mrs Chipindiko is beginning a new job on 9 July 2025. Therefore, the panel was of the view that due to Mrs Chipindiko's current employment status, she would be able to gain the support and training that she requires in order to comply with her conditions of practice order.

Further, through her continued engagement with the NMC and in the written representations from the RCN, Mrs Chipindiko has demonstrated willingness to return to safe, kind and professional practice without restriction. The panel determined that a suspension order would be unduly punitive in this case.

The panel was satisfied that it could formulate practicable and workable conditions that, if complied with, would serve to protect the public and may lead to your unrestricted return to practice.

The panel decided that the public would remain suitably protected by the continuation of the following conditions of practice:

'For the purposes of these conditions, 'employment' and 'work' mean any paid or unpaid post in a nursing, midwifery or nursing associate role. Also, 'course of study' and 'course' mean any course of educational study connected to nursing, midwifery or nursing associates.'

- 1. You must limit your nursing practice to one substantive employer. This must not be an agency.
- 2. You must not be the sole nurse in charge of any shift.
- You must not administer medication unless directly supervised by another registered nurse; until you have been assessed as competent to do so by another registered nurse.
- 4. You must ensure that you are supervised by another registered nurse any time you are working.

Your supervision must consist of:

- Working at all times on the same shift as, but not always directly observed by another registered nurse.
- 5. You must work with your supervisor to create a personal development plan (PDP). Your PDP must address the concerns about
 - medication administration;
 - record keeping; and,
 - communication and management in emergency situations.

You must:

- a. Send your case officer a copy of your PDP before the next NMC review.
- b. Meet with your supervisor at least every month to discuss your progress towards achieving the aims set out in your PDP.
- c. Send your case officer a report from your supervisor before the next NMC review. This report must show your progress towards achieving the aims set out in your PDP.
- 6. You must keep the NMC informed about anywhere you are working by:
 - a. Telling your case officer within seven days of accepting or leaving any employment.
 - b. Giving your case officer your employer's contact details.

- 7. You must keep the NMC informed about anywhere you are studying by:
 - a. Telling your case officer within seven days of accepting any course of study.
 - b. Giving your case officer the name and contact details of the organisation offering that course of study.
- 8. You must immediately give a copy of these conditions to:
 - a. Any organisation or person you work for.
 - b. Any employers you apply to for work (at the time of application).
 - c. Any establishment you apply to (at the time of application), or with which you are already enrolled, for a course of study.
- 9. You must tell your case officer, within seven days of your becoming aware of:
 - a. Any clinical incident you are involved in.
 - b. Any investigation started against you.
 - c. Any disciplinary proceedings taken against you.
- 10. You must allow your case officer to share, as necessary, details about your performance, your compliance with and/or progress under these conditions with:
 - a. current or future employer.
 - b. Any educational establishment.
 - c. Any other person(s) involved in your retraining and/or supervision required by these conditions.

The period of this order is for 12 months with a review.

The panel considered that a period of 12 months would be sufficient to protect the public and allow Mrs Chipindiko time to fully reflect and demonstrate insight and strengthening of practice in accordance with the conditions of practice order.

Before the end of the period of the order, a panel will hold a review hearing to see how well Mrs Chipindiko has complied with the order. At the review hearing the panel may revoke the order or any condition of it, it may confirm the order or vary any condition of it, or it may replace the order for another order.

Any future panel reviewing this case would be assisted by:

- Evidence of any training undertaken and competencies achieved
- Any relevant testimonials
- Mrs Chipindiko's future attendance at the review hearing
- A reflective piece demonstrating your learning and progress

This will be confirmed to Mrs Chipindiko in writing.

That concludes this determination.