

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

**Substantive Order Review Meeting
Tuesday, 24 June 2025**

Nursing and Midwifery Council
2 Stratford Place, Montfichet Road, London, E20 1EJ

Name of Registrant:	Shauna Randeniya
NMC PIN:	21L0014W
Part(s) of the register:	Registered Nurse – Sub Part 1 Adult Nursing – February 2022
Relevant Location:	Wales
Type of case:	Misconduct
Panel members:	Mark Gower (Chair, lay member) Fay Jackson (Lay member) Lesley Foulkes (Registrant member)
Legal Assessor:	Nina Ellin KC
Hearings Coordinator:	Samara Baboolal
Order being reviewed:	Conditions of practice order (12 months)
Fitness to practise:	Impaired
Outcome:	Order to lapse upon expiry in accordance with Article 30 (1), namely 8 August 2025, with a finding of impairment

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 Miss Randeniya's registered email address by secure email on 20 May 2025.

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 23 June 2025 and inviting Miss Randeniya to provide any written evidence seven days before this date.

The panel accepted the advice of the legal assessor.

In light of all of the information available, the panel was satisfied that Miss Randeniya 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 upon expiry with a finding of impairment. This order will lapse at the end of 8 August 2025 in accordance with Article 30(1) of the Nursing and Midwifery Order 2001 (as amended) (the Order).

This is the second review of a substantive conditions of practice order originally imposed for a period of 12 months by a Fitness to Practise Committee panel on 7 July 2023. This was reviewed on 24 June 2024, where the reviewing panel imposed a further conditions of practice order for 12 months.

The current order is due to expire at the end of 8 August 2025.

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

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

‘That you, whilst employed at Colwyn Bay Community Hospital, on 29 January 2022;

- 1) Did not attend/undertake observations for a patient complaining about chest pains, in a timely manner or at all **[PROVED BY ADMISSION]***
 - 2) Between 12:15 and 14:15, on one or more occasions as listed in Schedule 1, failed to check Patient A. **[PROVED BY ADMISSION]***
 - 3) Incorrectly recorded on Patient A’s 15 Minute Check form that you had undertaken one or more of the checks listed in Schedule 1. **[PROVED BY ADMISSION]***
 - 4) Incorrectly recorded on Patient A’s Behaviour chart that you had checked Patient A at: **[PROVED BY ADMISSION]***
 - a. 13.00;*
 - b. 14.00.*
 - 5) ...*
 - 6) At around 19.15 incorrectly recorded on Patient B’s 15 Minute check form that you had undertaken checks at:*
 - a. ...*
 - b. 20.00. **[PROVED BY ADMISSION]***
 - 7) ...*
- 1*
- 2 AND in light of the above, your fitness to practise is impaired by reason of your*
- 3 misconduct.’*

The first reviewing panel determined the following with regard to impairment:

‘The panel considered whether Miss Randeniya’s fitness to practise remains impaired.

The panel noted that the original panel found that Miss Randeniya had developing insight.

In its consideration of whether Miss Randeniya has taken steps to strengthen her practice, the panel took account of Miss Randeniya's written response dated 17 June 2024 in which she outlines that she has been attempting to secure training but has not been successful. Apart from this, there was limited further information to show progress was being made towards meeting the conditions of practice order. The panel considered that Miss Randeniya is newly qualified as a registered nurse and has not had any opportunities to secure further training, therefore, she has not had the opportunity to further strengthen or maintain her skills.

In light of this, the panel determined that Miss Randeniya 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.

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

The first reviewing panel determined the following with regard to sanction:

'Having found Miss Randeniya 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 Miss Randeniya'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 Miss Randeniya'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 imposing a further conditions of practice order on Miss Randeniya'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 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 misconduct related to poor judgement rather than clinical competence. In this case, there are conditions could be formulated which would protect patients during the period they are in force. The panel noted that despite the difficulties in acquiring training, Miss Randeniya could explore if there are other options available to her to still make progress towards meeting the conditions of practice order.

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 the circumstances of Miss Randeniya's case.

Accordingly, the panel determined, pursuant to Article 30(1)(c) to make a conditions of practice order for a period of 12 months, which will come into effect on the expiry of the current order, namely at the end of 8 August 2024. It decided to confirm and continue the following conditions which it considered 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.

1. You must limit your nursing practice to one substantive employer, which must be either an NHS Health Board or NHS Trust and which has a preceptorship programme in which you must enrol and engage fully with its requirements.
2. You must ensure that you are supervised by a 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 a registered nurse.
3. You must keep a reflective practice log. The log will facilitate you to record your learning from general work and specific incidents. It should include your reflections on your practice in the following areas:
 - a. Communication and team working
 - b. The effectiveness and consequences of accurate record keeping and how misunderstandings can occur if records are not accurate

- c. *Patient safety particularly when patients have altered cognition*
 - d. *Your strategies to coordinate, organise and prioritise care for patients, particularly at times of increased workload or staff shortages*
4. *You must take your reflective practice log with you to your meetings with your mentor/preceptor, to discuss and reflect on your progress with the conditions.*
5. *You must work with your line manager to create a personal development plan (PDP). Your PDP must address the following concerns:*
- i. *Communication and team working*
 - ii. *Record Keeping*
 - iii. *Patient safety particularly when patients have altered cognition*
 - iv. *Organisation, planning and prioritisation of workload*
- You must:*
- *Send your NMC case officer a copy of your PDP within seven days of its creation.*
 - *Send your NMC case officer a report from your Mentor seven days in advance of your next NMC hearing or meeting. This report must show your progress towards achieving the aims set out in your PDP.*
6. *You must engage with your mentor/preceptor on a frequent basis to ensure you are making progress towards the aims set in your PDP. Such engagement must be weekly for the first month of your employment and continue weekly thereafter until your*

mentor/preceptor is satisfied that the frequency can be reduced to a minimum of monthly.

7. *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.*
8. *You must keep 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.*
9. *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.*
10. *You must tell your case officer, within seven days of your becoming aware of:*

- a. *Any patient safety incident involving a patient whose care you have direct responsibility for.*
- b. *Any investigation started against you.*
- c. *Any disciplinary proceedings taken against you.*

11. *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. *Any 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.

This conditions of practice order will take effect upon the expiry of the current conditions of practice order, namely the end of 8 August 2024 in accordance with Article 30(1).

Before the end of the period of the order, a panel will hold a review hearing to see how well Miss Randeniya 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:

- *A reflective piece that provides evidence of your journey to becoming a competent registered nurse who meets the required standards and complies with the Code and how you have strengthened your practice as a result of these incidents.*

- *Testimonials from current colleagues, mentor/preceptor or line manager that detail your current work practices.*
- *Continued engagement with the NMC and attendance at hearings.'*

Decision and reasons on current impairment

The panel has considered carefully whether Miss Randeniya'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 suitability to remain on the register without restriction. 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 Miss Randeniya's application for removal from the NMC register.

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 Miss Randeniya's fitness to practise remains impaired.

The panel took into account that there has been no material change in risk since the last review hearing. Miss Randeniya has not provided any further reflections, other than her reasons for her application for removal, and was unable to provide any testimonials. As Miss Randeniya has been unable to secure employment, she has been unable to demonstrate any strengthening of practice and compliance with her conditions of practice order.

The panel also took into account that Miss Randeniya has asked to be removed from the register.

Given that there is no evidence before the panel to suggest that there has been a change in the risk of harm and repetition since the last review. It considered the test in Grant:

'In paragraph 76, Mrs Justice Cox referred to Dame Janet Smith's "test", in the fifth Shipman report 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/ fitness to practise is impaired in the sense that S/He:

- 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 concluded that the limbs of Grant continue to be engaged in this case.

In light of this the panel determined that Miss Randeniya is liable to repeat matters of the kind found proved, which relate to serious errors and competence concerns. 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 considered that Miss

Randeniya has made an application to be removed from the NMC register. It also considered that this case relates to clinical errors and failings, and that there is nothing to suggest that the concerns of this case cannot be addressed through retraining and strengthening of practice. The panel therefore determined that, in this case, a finding of continuing impairment on public interest grounds is not required.

For these reasons, the panel finds that Miss Randeniya's fitness to practise remains impaired on public protection grounds alone.

Decision and reasons on sanction

Having found Miss Randeniya 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 public protection issues identified, an order that does not restrict Miss Randeniya'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 Miss Randeniya'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 imposing a further conditions of practice order on Miss Randeniya'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 took into account that Miss Randeniya has been subject to conditions of practice for 24 months. Under these conditions, she has been unable to secure employment in a clinical role. She has been unable to progress, and has requested to be removed from the NMC register.

The panel acknowledged that Miss Randeniya has made an effort to apply for nursing roles, and has applied to retraining programmes and university courses without success. She has been unable to provide the information requested by the previous reviewing panel.

The panel then considered NMC guidance REV-2H on allowing the order to lapse with impairment:

‘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 application for removal from the NMC register made by Miss Randeniya states:

'I am formally requesting removal from the Nursing and Midwifery Council (NMC) register, my decision stems from several significant factors, most notably my continued inability to secure suitable employment. Despite persistent efforts, my attempts to find a position have been unsuccessful due to the constraints of the interim order currently imposed. Attending several review hearings has not resulted in any modification or removal of the conditions of this order. On numerous occasions, I have sought employment opportunities and have attended interviews. The primary reason for my unsuccessful applications has been due to the conditions held against me. Specifically, the requirement for 'constant supervision from a Band 6', which has significantly hindered my ability to secure employment. Furthermore, I have been rejected from various job applications directly because of this matter.

In an effort to enhance my competence within the role expected of me, I have explored further training opportunities. I have been in contact with both Bangor and Wrexham Universities regarding their Return to Practice Programmes; however, I have been unsuccessful in gaining acceptance onto either programmes. Given the passage of time and the ongoing restrictions in place, I now feel unable to confidently pursue nursing roles.'

Miss Randeniya also mentioned the adverse personal impact that the ongoing proceedings have had on her.

The panel was of the view that a suspension order would not be appropriate and proportionate in this case, as the concerns in this case can be addressed and remediated. For the same reasons, it concluded that a strike off would be disproportionate.

The panel determined to allow the order to lapse with impairment. This will allow Miss Randeniya to be removed from the NMC register and would protect the public as a finding of impairment has been made and would be considered by the Registrar if Miss Randeniya were to decide to return to nursing.

As such, the current conditions of practice order will lapse upon expiry at the end of 8 August 2025, with a finding of impairment.

This concludes the determination.