

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

**Substantive Hearing
Thursday, 13 November – Monday 17, November 2025**

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

Name of Registrant:	Phyllis Mwangi	
NMC PIN:	14H0787E	
Part(s) of the register:	Nurses part of the register Sub part 1 RNMH, Registered Nurse - Mental Health 04 December 2015	
Relevant Location:	London	
Type of case:	Misconduct and Conviction	
Panel members:	Susan Ball	(Chair, registrant member)
	Mary Karasu	(Registrant member)
	Mary Golden	(Lay member)
Legal Assessor:	Jeremy Barnett	(13 November 2025)
	Michael Levy	(14-17 November 2025)
Hearings Coordinator:	Peaches Osibamowo	
Nursing and Midwifery Council:	Represented by Megan Verity, Case Presenter	
Mrs Mwangi:	Present and unrepresented	
Facts proved by a way of admission:	Charges 1a, 2, 3, 4a, 4b, 5, 6, 7a and 7b.	
Facts not proved:	N/A	
Fitness to practise:	Impaired	
Sanction:	Suspension order (9 months)	
Interim order:	Interim suspension order (18 months)	

Decision and reasons on application to amend the charge

The panel heard an application made by Ms Verity, on behalf of the Nursing and Midwifery Council (NMC), to amend the wording of Charge 4.

The proposed amendment was to remove the wording '*to and from home visits*' from the stem of the charge. It was submitted by Ms Verity that the proposed amendment would provide clarity and more accurately reflect the evidence.

4) On one or more occasion transported professional healthcare and/or nursing colleagues ~~to and from home visits~~, without being in possession of:

a) A full and valid driving licence in the U.K.

b) A valid certificate of insurance.

And in light of the above, your fitness to practise is impaired by reason of your misconduct.”

You did not object to this amendment.

The panel accepted the advice of the legal assessor and had regard to Rule 28 of 'Nursing and Midwifery Council (Fitness to Practise) Rules 2004', as amended (the Rules).

The panel was of the view that such an amendment, as applied for, was in the interest of justice. The panel was satisfied that there would be no prejudice to you and no injustice would be caused to either party by the proposed amendment being allowed. It was therefore appropriate to allow the amendment, as applied for, to ensure clarity and accuracy.

Details of charge

That you a registered nurse whilst applying for and/or working for the Central & North West London NHS Foundation Trust:

1) On an unknown date provided inaccurate information in response to a screening question on an application, in that you:

a) Inaccurately answered 'yes' to the question '*Do you have a full and valid driving licence and access to a car for work?*'

2) On 19 April 2022 during an interview, inaccurately stated that you held a full and valid driving licence in the U.K.

3) On 25 April 2023 inaccurately informed your manager that you had been disqualified from driving & were required to re-sit your test and/or for a failure to pay a speeding fine.

4) On one or more occasion transported professional healthcare and/or nursing colleagues to and from home visits, without being in possession of:

a) A full and valid driving licence in the U.K.

b) A valid certificate of insurance.

5) Your actions in charge 1) a) & 2) above were dishonest, in that you misrepresented that you held a full and valid driving licence during your application and/or recruitment process.

6) Your actions in charge 3 above were dishonest in that you sought to misrepresent that you previously held a full and valid licence to drive in the U.K whilst working at the Trust.

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

You admitted all of the charges.

Background

On 8 November 2023 the NMC received a referral from Central and North West London NHS Foundation Trust about you whilst you were employed as a registered nurse.

The referral raised a concern that you made a false declaration on your employment application for an Essential Car User Position within the Trust to the effect that you held a full UK driving licence, when in fact you did not. You also made a false declaration at interview to the same effect.

After you commenced the role as a Band 6 Mental Health nurse, you drove for work purposes without a licence for what appears to have been a significant amount of time. The concern did not involve patients or service users.

On 25 April 2023, you falsely informed your manager that you had been disqualified from driving for six months as you had failed to pay a speeding fine and would not be able to perform your current duties. You were unable to provide evidence for the driving ban and later admitted to the manager, after he had asked you to reconsider what you had said, that you had never held a full UK driving licence as you had repeatedly failed your driving test. You resigned prior to the Trust's disciplinary proceedings.

You were stopped by the police while driving in Hounslow, London, in relation to the potential offence of driving without a licence or valid insurance. You were subsequently convicted on 27 October 2023.

Decision and reasons on facts

At the outset of the hearing, the panel heard from you and you made full admissions to charges 1a, 2, 3, 4a, 4b, 5, 6, 7a and 7b.

The panel accepted the advice of the legal assessor.

Charges 7a and 7b concern your conviction and, having been provided with a copy of the memorandum of conviction, the panel finds that the facts are found proved in accordance with Rule 31 (2) and (3).

The panel therefore finds charges 1a, 2, 3, 4a, 4b, 5, 6, 7a and 7b proved in their entirety, by way of your admissions.

Fitness to practise

Having announced its findings on the facts of this case, the panel then moved on to consider, whether the facts found proved amount to misconduct and whether your fitness to practise is currently impaired by reason of your admissions and your convictions. There is no statutory definition of fitness to practise. However, the NMC has defined fitness to practise as a registrant's ability to practise kindly, safely and professionally.

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.

The panel adopted a two-stage process in its consideration. First, the panel must determine whether the facts found proved amount to misconduct. Secondly, only if the facts found proved amount to misconduct, the panel must decide whether, in all the circumstances, your fitness to practise is currently impaired as a result of that misconduct.

Submissions on misconduct

In coming to its decision, the panel had regard to the case of *Roylance v General Medical Council (No. 2)* [2000] 1 AC 311 which defines misconduct as a 'word of

general effect, involving some act or omission which falls short of what would be proper in the circumstances.'

Ms Verity invited the panel to take the view that the facts found proved amount to misconduct. The panel had regard to the terms of 'The Code: Professional standards of practice and behaviour for nurses and midwives 2015' (the Code) in making its decision.

Ms Verity identified the specific, relevant standards where your actions amounted to misconduct.

Ms Verity submitted that the misconduct refers to charges 1-6 and that you have admitted all charges. She made reference to the cases of *Roylance* and *Nandi v General Medical Council* [2004] EWHC 2317 (Admin) which states that misconduct indicates a serious breach and is conduct that would be regarded as deplorable by a fellow practitioner.

Ms Verity submitted that you deliberately misled your employers and colleagues that you had a driving licence and insurance. This put colleagues directly at risk and falls short of what would be expected of a practitioner. She submitted that there were multiple instances of dishonesty, starting from your dishonesty on the employment application form, during your employment interview and in continuing to drive and transporting colleagues on more than one occasion.

Ms Verity submitted that you breached a number of standards outlined in the code, namely 7.1, 7.4, 8.2, 8.3, 16.2, 16.3, 19.1, 19.4, 20.1, 20.2, 20.3, 20.5, 20.8.

Ms Verity submitted that your actions and omissions amount to serious misconduct.

You gave evidence on oath and submitted that you apologised to your colleague and you did not transport patients in your car. You drove a colleague to a supermarket on one occasion, but this was not work related.

You stated that you were a carer for 13 years and you have been a registered nurse since 2016. You have never had a complaint made against you during your career and in your nursing practice. You said you were never rude to patients and your character references demonstrate that you are a caring and competent nurse. You referred to the Code and stated that your clinical skills are good, and you will never repeat the mistake again.

You stated that you have trained nurses about the importance of being honest. You asked the panel to forgive you and you realise the importance of keeping to the laws of the country. You stated that you will never make this mistake again and that you are ready to learn and ready to go for training.

You stated that, in your role in the [PRIVATE], you were seeing patients in hospital and at their homes. As such, you did not put any patient at risk as you did not transport any patients in your car.

You stated that you would like to keep your job as a nurse and hope to be given the opportunity to continue pursuing the career you love. You [PRIVATE] and you are working to give your children a better life.

You acknowledged that your actions resulted in these regulatory proceedings, but you maintained that your character and professionalism has never been questioned. Patients and families trust you.

You informed the panel that you now have a valid driving licence and you will never put anyone at risk in future.

You stated that you have had [PRIVATE] as a result of the criminal proceedings.

Submissions on impairment

Ms Verity moved on to the issue of impairment and addressed the panel on the need to have regard to protecting 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. This included reference to the cases of *Council for Healthcare Regulatory Excellence v (1) Nursing and Midwifery Council (2) and Grant* [2011] EWHC 927 (Admin).

Ms Verity submitted that the panel must consider if you are currently impaired
She submitted that your clinical competencies are not in question today and the character references are limited because your competency is not being questioned, rather your dishonesty.

Ms Verity submitted that the panel should consider the nature of the concern and the public interest.

Ms Verity submitted that your conduct put the public and patients at a risk of harm. You repeated instances of dishonesty including gaining employment by dishonest means and misleading your colleagues by driving without a licence. There was a real risk of harm to the public and the fact that this did not occur is purely down to chance.

Ms Verity submitted that you have displayed limited remediation and limited insight in relation to dishonesty.

Ms Verity submitted nurses have a position of trust in society and the public must trust nurses with their lives, therefore, they must be honest.

Ms Verity submitted that section 20.4 of the Code goes to your impairment. And a finding of impairment is necessary given the serious nature of the facts found proved.

Ms Verity submitted that there is no reasonable excuse to explain your actions especially as the dishonesty occurred on number of occasions and was maintained over a considerable period of time. There is no contextual issue to excuse the dishonesty and you had ample opportunities to discuss the issue with your manager.

Ms Verity submitted that the dishonesty is proven in the accepted charges. She submitted that you are liable to repeat the conduct as, although you have expressed remorse in your actions, you still lack insight into your conduct. As a result of this, there is a risk of repetition.

Ms Verity submitted that the training courses you have undertaken seem to be mandatory training required by your employer. There is no evidence of a course related to professional ethics or standards.

Ms Verity submitted that the multiple instances of misconduct and the associated convictions mean that a finding of impairment is necessary to uphold proper standards and maintain public confidence. Your actions clearly breached standards and a reasonable member of the public would be shocked if you were allowed to practise unrestricted.

Ms Verity submitted that you are impaired by reason of your misconduct and convictions.

You stated that you can practise safely, and no one has ever complained about your nursing skills. You admitted that you are currently impaired, and you stated that if the panel see it necessary to impose restrictions, you will abide by them.

You stated that you made a mistake, but you were not a risk to the public as you never transported patients or colleagues in the course of work.

The panel accepted the advice of the legal assessor which included reference to a number of relevant judgments. These included: *Roylance v General Medical Council* (No 2) [2000] 1 A.C. 311, *Nandi v General Medical Council* [2004] EWHC 2317 (Admin), *Fatnani & Raschid v General Medical Council* [2007] EWCA Civ 46

Decision and reasons on misconduct

When determining whether the facts found proved amount to misconduct, the panel had regard to the terms of the Code.

The panel was of the view that your actions did fall significantly short of the standards expected of a registered nurse, and that your actions amounted to a breach of the Code. Specifically:

8 Work cooperatively

To achieve this, you must:

8.6 share information to identify and reduce risk

19 Be aware of, and reduce as far as possible, any potential for harm associated with your practice

To achieve this, you must:

19.4 take all reasonable personal precautions necessary to avoid any potential health risks to colleagues, people receiving care and the public

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 – not this part.

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

23 Cooperate with all investigations and audits

This includes investigations or audits either against you or relating to others, whether individuals or organisations. It also includes cooperating with requests to act as a witness in any hearing that forms part of an investigation, even after you have left the register.

To achieve this, you must:

23.2 tell both us and any employers as soon as you can about any caution or charge against you, or if you have received a conditional discharge in relation to, or have been found guilty of, a criminal offence (other than a protected caution or conviction)

The panel appreciated that breaches of the Code do not automatically result in a finding of misconduct. The panel considered its findings in charges 1-6. However, the panel was of the view that you lied and in charge 3 you compounded the lie and maintained the lie for approximately a year. This falls well below the standards expected of a registered nurse and you breached fundamental tenets of the nursing profession.

The panel considered charges 1-6 together as they are related and all admitted by you.

The panel considered that there were multiple incidents of dishonesty in relation to your employment application, your employment interview, your conversation with your manager and driving as part of your job role. It noted that when you did have an opportunity to be honest you compounded the original dishonesty, as admitted in Charge 3.

The panel found that your actions did fall seriously short of the conduct and standards expected of a nurse and amounted to serious misconduct.

Decision and reasons on impairment

The panel next went on to decide if as a result of the misconduct, your fitness to practise is currently impaired.

In coming to its decision, the panel had regard to the NMC Guidance on '*Impairment*' (Reference: DMA-1 Last Updated: 03/03/2025) in which the following is stated:

'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* 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/ 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) has in the past acted dishonestly and/or is liable to act dishonestly in the future.'*

The panel considered that limbs b, c and d are engaged.

The panel finds that patients and the public were put at risk of physical harm as a result of your misconduct. The panel accepted that you were not driving patients but there was a risk of harm to the public in your driving without a valid driving licence or insurance. There was also a potential risk of harm to the public in you gaining employment by dishonest means. Your misconduct had breached the fundamental tenets of the nursing profession and therefore brought its reputation into disrepute. It was satisfied that confidence in the nursing profession would be undermined if its regulator did not find charges relating to dishonesty extremely serious.

Regarding insight, the panel considered that you acknowledged that you were dishonest on the employment form and you have shown remorse, but you have shown limited insight into your misconduct. You have shown genuine remorse but

struggled to understand that the serious nature of the allegation related to the dishonesty rather than the fact that you drove without a driving licence.

The panel considered that you made admissions before your employer and the NMC only when prompted. In your oral evidence you also admitted that your conduct was dishonest and that you were clearly '*wrong*'. You also stated that you apologised to your colleague and made an apology at this hearing. You stated that you will never make the same mistake again in the future. However, you were not able to articulate the precise reason why remorse was required.

The panel made reference to the NMC guidance and considered whether you can practise kindly, safely and professionally. It concluded that you can practise kindly and safely so far as being a nurse in a clinical environment, but not professionally in relation to your dishonesty.

The panel recognised that the misconduct in this case may have the potential to be addressed. Therefore, the panel carefully considered the evidence before it in determining whether or not you have taken steps to strengthen your practice. The panel took into account your training records and your character references. It noted the record of mandatory training that you have undertaken but that the training is not directly related to the misconduct in this case. There is no evidence of a reflective piece from you, although you told the panel that you have reflected on your conduct.

The panel is of the view that there may be a risk of repetition based on your limited insight in relation to your dishonesty. The panel therefore decided that a finding of impairment is necessary on the grounds 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 determined that a finding of impairment on public interest grounds is required because a well-informed member of the public would be shocked to hear about the convictions and dishonesty in this case.

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 your fitness to practise impaired on the grounds of public interest.

Having regard to all of the above, the panel was satisfied that your fitness to practise is currently impaired.

Sanction

The panel has considered this case very carefully and has decided to make a suspension order for a period of 9 months with review. The effect of this order is that the NMC register will show that your registration has been suspended.

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.

Submissions on sanction

Ms Verity informed the panel that in the Notice of Hearing, dated 10 October 2025 the NMC had advised you that it would seek the imposition of a striking-off order if it found your fitness to practise currently impaired.

Ms Verity submitted that the aggravating factors in this case are your repeated instances of dishonesty, limited insight and remediation, your conduct which put your colleagues at risk of harm and the risk of harm from your obtaining employment dishonestly.

Ms Verity submitted that mitigating features are genuine remorse for your actions and the character references around your clinical practices and competencies. However, the references do not fully address the behaviours the panel are concerned about.

Ms Verity made reference to NMC Guidance SAN-2 which refers to long standing deception and she submitted that this case falls into this category.

Ms Verity submitted that no action or a caution order would not be appropriate to address the public protection concerns or mark the seriousness of the impairment. She submitted that a conditions of practice order is not appropriate and that there are no workable conditions to address the dishonesty concerns.

Ms Verity submitted that a suspension order may be appropriate where the misconduct is not fundamentally incompatible with practice as a nurse. She submitted that, as the panel determined that you have limited insight and posed a wider risk in obtaining employment by dishonest means, a temporary removal from the register would not be sufficient. She submitted that your behaviour is fundamentally incompatible with remaining on the Register, so a striking-off order is being sought.

Ms verity submitted that as the panel has found that you are unable to currently practise professionally, public confidence cannot be maintained without your removal from the register due to your repeated dishonesty maintained over a prolonged period of time. She submitted that a striking off order is the only order that would be sufficient to protect the public.

Ms Verity made reference to the case of *Bolton v Law Society* [1994] 1 WLR 512 which indicates that the reputation of the profession is more important than the fortune of the individual. She submitted that although a striking-off order would have a personal impact on you, the principle established in Bolton provides that upholding the reputation of the profession is of paramount importance.

You stated that you realise it is a very serious offence and you have learnt from your mistakes. In the last 2 years you have been working as a nurse and there have been no incidents. This shows you have learnt from your mistakes.

You stated that you have [PRIVATE], a mortgage, bills and [PRIVATE]. It would affect your family and your [PRIVATE] if you were unable to work.

You stated that you are apologising and you understand that the misconduct was a very serious mistake. You accepted your mistake and that it was dishonest. You stated that dishonesty is a massive mistake. You were too embarrassed and frightened to tell your manager and you regret your actions.

You stated that you have been a nurse for 8 years and you have never received a complaint. You have learnt a lot since the commencement of these proceedings. You acknowledged that you have only done mandatory training and you are willing to do further training. You stated that you will write a reflective piece.

You stated that you are not a risk to the public. You asked for a second chance and stated that you would be happy with a suspension order so that you could engage in further training.

You stated that as a nurse you have never had any complaints. You asked that you not be struck off as you are passionate about nursing and you are very competent. You have been a carer and a nurse for many years and asked for another chance to continue to pursue your long-standing career.

You stated that you have realised that dishonesty is a significant mistake, you have reflected, and you are willing to do any relevant training during a period of suspension so that you can continue looking after your patients, as that is what you love to do.

The panel accepted the advice of the legal assessor.

Decision and reasons on sanction

Having found your 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:

- Limited insight, particularly limited in relation to the impact of your dishonesty
- Limited remediation

The panel also took into account the following mitigating features:

- Evidence of genuine remorse
- Apologies in oral evidence
- Evidence of developing insight during the hearing
- Previous long standing unblemished nursing career
- Admissions to all charges

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 your 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 your misconduct was not at the lower end of the spectrum and that a caution

order would be inappropriate in view of the issues identified. The panel decided that it would be neither proportionate nor in the public interest to impose a caution order.

The panel next considered whether placing conditions of practice on your 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;*
- *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 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 misconduct identified in this case was not something that can be addressed through retraining.

Furthermore, the panel concluded that the placing of conditions on your 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 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 panel was satisfied that in this case, the misconduct was not fundamentally incompatible with remaining on the register.

The panel considered whether a striking-off order would be proportionate but, taking account of all the information before it, and of the mitigation provided, the panel concluded that it would be disproportionate. Whilst the panel acknowledges that a suspension may have a punitive effect, it would be unduly punitive in your case to impose a striking-off order.

Balancing all of these factors the panel has concluded that a suspension order would be the appropriate and proportionate sanction.

The panel noted the hardship such an order will inevitably cause you. However, this is outweighed by the public interest in this case.

The panel considered that this order is necessary to mark the importance of maintaining public confidence in the profession, and to send to the public and the profession a clear message about the standards of behaviour required of a registered nurse.

In making this decision, the panel carefully considered the submissions of Ms Verity in relation to the sanction that the NMC was seeking in this case.

However, the panel considered that you are genuinely remorseful and heard evidence of your developing insight during the course of the hearing. The panel heard no evidence of harmful deep-seated personality or attitudinal concerns.

The panel recognised that the repeated deception in this case was in relation to one distinct issue. Whilst the panel accepted that all dishonesty is of a serious nature it balanced this with the evidence that, although your dishonesty was maintained over

a period of time, the individual acts of dishonesty were all as a result of your inability to face up to your initial conduct.

The panel accepted that you are a good clinician and had no complaints made against you prior to this incident.

The panel considered that a striking-off order would be disproportionate in light of your genuine remorse and recognition that you have to do more to do to enable you to practise kindly, safely and professionally. It determined that a suspension order would mark that your misconduct falls below the standards expected of a registered nurse and afford you time to reflect and develop further insight, to enable you to demonstrate that you can practise unimpaired.

The panel considered decided that a nine-month suspension order would be sufficient to mark the seriousness of your misconduct and impairment.

At the end of the period of suspension, another panel will review the order. At the review hearing the panel may revoke the order, or it may confirm the order, or it may replace the order with another order.

Any future panel reviewing this case would be assisted by:

- Evidence of training you have undertaken linked to ethics, professional standards and the duty of candour
- A written reflection using a recognised reflective model that demonstrates:
 - The impact of your training and how you will put it into practice;
 - Your understanding of the impact of your behaviour on your colleagues, the reputation of the profession and the wider public; and
 - How you will behave differently in the future
- Your continued engagement with the regulatory process
- Your attendance at the next hearing

Interim order

As the suspension 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 your own interests until the suspension sanction takes effect.

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

Submissions on interim order

The panel took account of the submissions made by Ms Verity. She submitted that an interim suspension order is necessary on the grounds of public protection and in the wider public interest, based on panels findings at misconduct stage. She submitted that the serious allegations of dishonesty have been found proven and an 18 month interim suspension order is necessary to cover the appeal period.

The panel also took into account that you accepted the need for an interim order.

The panel accepted the advice of the legal assessor.

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 proven 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 therefore imposed an interim suspension order for a period of 18 months to cover the appeal period.

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

This will be confirmed to you in writing.

That concludes this determination.