Nursing and Midwifery Council Fitness to Practise Committee

Substantive Order Review Hearing Friday 17 October 2025

Virtual Hearing

Name of Registrant: Cheryl Ann Powell

NMC PIN: 75C0943E

Part(s) of the register: Nurses part of the register Sub part 1 RN1: Adult nurse,

level 1 (06 October 2003)

Nurses part of the register Sub part 2 RN2: Adult nurse,

level 2 (30 June 1977)

Relevant Location: Liverpool

Type of case: Misconduct

Panel members: Nicola Dale (Chair, Lay member)

Anne Giles (Registrant member)
Margaret Stoddart (Lay member)

Legal Assessor: Graeme Dalgleish

Hearings Coordinator: Rebecka Selva

Nursing and Midwifery

Council:

Represented by Omar Soliman, Case Presenter

Miss Powell: Not present and not represented at this hearing

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 18 November 2025

Decision and reasons on service of Notice of Hearing

The panel was informed at the start of this hearing that Miss Powell was not in attendance and that the Notice of Hearing had been sent to Miss Powell's registered address by recorded delivery and by first class post on 16 September 2025.

The panel had regard to the Royal Mail 'track and trace' printout which showed the Notice of Hearing was delivered to Miss Powell's registered address on 16 September 2025. It was signed for against the printed name of 'Cheryl Ann Powell'.

Mr Soliman, 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 Miss Powell'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 Miss Powell 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 Miss Powell

The panel next considered whether it should proceed in the absence of Miss Powell. The panel had regard to Rule 21 and heard the submissions of Mr Soliman who invited the panel to continue in the absence of Miss Powell. He submitted that Miss Powell had voluntarily absented herself.

Mr Soliman submitted that there had been no engagement at all by Miss Powell with the NMC in relation to today's review hearing and, as a consequence, there was no reason to believe that an adjournment would secure her attendance on some future occasion.

The panel accepted the advice of the legal assessor.

The panel decided to proceed in the absence of Miss Powell. In reaching this decision, the panel considered the submissions of Mr Soliman, and the advice of the legal assessor. It had particular regard to 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 Miss Powell;
- Miss Powell has not engaged with the NMC and has not responded to any
 of the letters sent to her about this hearing;
- On 2 November 2024 Miss Powell wrote to the NMC asking that she is no longer contacted as she has retired and no longer practises or intends to practise as a registered nurse in the future;
- 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 disposal of the case.

In these circumstances, the panel decided that it is fair to proceed in the absence of Miss Powell.

Decision and reasons on review of the substantive order

The panel decided to allow the current conditions of practice order to lapse with impairment.

This will come into effect at the end of 18 November 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 12 months by a Fitness to Practise Committee panel on 18 October 2024.

The current order is due to expire at the end of 18 November 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 a Registered Nurse:

- 1. On 20 August 2019 commenced intravenous administration of Tazocin (PIPERACILLIN WITH TAZOBACTAM) to Patient C:
 - a) When the Tazocin was no longer prescribed to Patient C. [PROVED]
 - b) Without a 2nd checker present at the point of administration. [PROVED]

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

The original panel determined the following with regard to impairment:

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

In coming to its decision, the panel had regard to the Fitness to Practise Library, updated on 27 March 2023, which states:

'The question that will help decide whether a professional's fitness to practise is impaired is:

"Can the nurse, midwife or nursing associate practise kindly, safely and professionally?"

If the answer to this question is yes, then the likelihood is that the professional's fitness to practise is not impaired.'

Nurses occupy a position of privilege and trust in society and are expected at all times to be professional. Patients and their families must be able to trust nurses with their lives and the lives of their loved ones. They must make sure that their conduct at all times justifies both their patients' and the public's trust in the profession.

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

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

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

'Do our findings of fact in respect of the doctor's misconduct, deficient professional performance, adverse health, conviction, caution or determination show that his/her/their fitness to practise is impaired in the sense that S/He/They:

- a) has in the past acted and/or is liable in the future to act so as to put a patient or patients at unwarranted risk of harm; and/or
- b) has in the past brought and/or is liable in the future to bring the medical profession into disrepute; and/or

 c) has in the past breached and/or is liable in the future to breach one of the fundamental tenets of the medical profession;

The panel finds that Patient C was put at risk of harm as a result of Miss Powell's misconduct. Miss Powell's misconduct had breached the fundamental tenets of the nursing profession and therefore brought its reputation into disrepute. Members of the public informed of the circumstances would be concerned about a nurse who had made a number of medication administration errors.

The panel considered that Miss Powell has previously made multiple medication administration errors which, while no actual harm was caused to patients, there was a risk of harm. It took into account that Miss Powell has provided a reflection but was of the view that this did not sufficiently reduce the risk of harm.

The panel found that the risk of harm has the potential to be remedied. Miss Powell did try to remedy the error as it occurred and did make attempts to minimise risk to the patient once she was aware of the error. Further, Miss Powell had undertaken some training in 2020.

However, the panel is of the view that there is a risk of repetition as there is no information before the panel to suggest that Miss Powell has been practising as a nurse since the incidents, and there is no further evidence of training in medicines management and administration since February 2020. The panel further noted that Miss Powell is retired. The panel therefore decided that a finding of impairment is necessary on the grounds of public protection.

The panel bore in mind 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.

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

The original panel determined the following with regard to sanction:

'Having found Miss Powell'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:

- Miss Powell had made previous medication errors before this incident.
- Conduct which put patients at risk of suffering harm.

The panel also took into account the following mitigating features:

- Miss Powell has demonstrated insight and some reflection.
- Miss Powell was on an unfamiliar and busy ward.
- Miss Powell immediately took steps to address the concerns and admitted that she had made an error at the time.

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 Powell'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 Powell'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 placing conditions of practice on Miss Powell'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, where some or all of the following factors are present:

- 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 was of the view that it was in the public interest that, with appropriate safeguards, Miss Powell should be able to return to practise as a nurse.

Balancing all of these factors, the panel determined 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 or a striking-off order would be wholly disproportionate and would not be a reasonable response in the

circumstances of this case. There is no evidence of any deep seated and harmful attitudinal problems, and while the charges are serious and are compounded by previous instances of medication errors, the risk of repetition and harm can be mitigated by conditions of practice.

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 determined 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.

- 1. You must only work for substantive employers. This must not be an agency.
- 2. You must undergo regular biweekly supervision with your line manager regarding your medication management.
- You must ensure that you are directly supervised by a registered nurse anytime you are administering medication until you are signed off as competent.
- 4. You must work with your line manager to create a personal development plan (PDP). Your PDP must address the concerns about your medication management and administration.

- 5. 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.
- 6. 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.
- 7. 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.
- 8. 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.
- 9. 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.

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

- Miss Powell's engagement with the NMC at any future review hearings
- Evidence of compliance with these conditions
- PDP provided 14 days prior to the hearing
- Medicines administration competency forms
- Evidence of up-to-date training, including in medicines management
- An indication of Miss Powell's intentions regarding her nursing career'

Decision and reasons on current impairment

The panel has considered carefully whether Miss Powell's fitness to practise remains impaired, and referred to the NMC guidance, namely REV-2a. 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 original 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. It took account of the submissions made by Mr Soliman on behalf of the NMC. He referred

the panel to the background of the case. He submitted that since the imposition of the conditions of practice order at the original hearing, Miss Powell has not remedied the concerns that were found proved. He submitted that Miss Powell has not been practising as a registered nurse, so has not had the opportunity to demonstrate any progress.

Mr Soliman outlined that Miss Powell has not provided any evidence of compliance with the conditions of practice order, any PDPs, any medicines administration competency forms or evidence of up-to-date training. However, he referred the panel to the letter received by the NMC from Miss Powell dated 2 November 2025:

'Why are you writing to me? I have informed the NMC. I have let my pin lapse with no intention of renewing. The union Rep I was given was also informed 2019/2021. I've also told the NMC that I have retired ...I was given employment as a carer role only; I would be grateful if you could stop making contact with me. My days working as a registered nurse are truly behind me and fully over.'

Mr Soliman submitted that today, there is nothing before this panel to indicate any strengthening in practice, insight or training and that Miss Powell has since disengaged with the NMC and its proceedings. He submitted that there is nothing to suggest any progress has been made by Miss Powell regarding nursing practice, and so her fitness to practise remains impaired at this time.

Mr Soliman submitted that Miss Powell's registration lapsed in July 2022, and the sole factor tying Miss Powell to the NMC register is the conditions of practice order currently imposed.

Mr Soliman submitted there remains a risk of repetition as Miss Powell's insight remains limited. He invited the panel to find Miss Powell's practice impaired on public protection grounds.

He submitted that Miss Powell's practice is also impaired on public interest grounds as Miss Powell's actions breached fundamental tenets of the nursing profession and continued to pose an ongoing risk to patient safety. He submitted that Miss Powell's actions would be deemed concerning by members of the public who were fully appraised

of the case. He submitted that public confidence in the profession would be undermined if a finding of continued impairment were not made.

Mr Soliman referred the panel to the aggravating and mitigating factors identified by the original panel.

Mr Soliman submitted that imposing no order or a caution order would not be appropriate in this case as the misconduct identified was not at the 'lower end of the spectrum'

Mr Soliman invited the panel to allow the current conditions of practice order to lapse with impairment upon expiry of the order.

Mr Soliman submitted that a striking off order would be disproportionate in this case.

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 Powell's fitness to practise remains impaired.

The panel noted that the original panel found that Miss Powell had insufficient insight. At this hearing, the panel had nothing before it to suggest that Miss Powell has strengthened her practice or demonstrated insight. It concluded that due to the lack of material change in circumstances, there remains a need to ensure the public are suitably protected.

The original panel determined that Miss Powell was liable to repeat matters of the kind found proved. Today's panel has received no new information to suggest the risk of repetition has been mitigated or addressed. In light of this, this panel determined that Miss Powell continues to remain liable to repeat matters of the kind found proved and therefore concluded 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 were of the view that the public and fellow practitioners, fully aware of the details of the case, would be concerned to find a nurse's fitness to practice was not found to be impaired. 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 Powell's fitness to practise remains impaired.

Decision and reasons on sanction

Having found Miss Powell's fitness to practise currently impaired, the panel then considered what, if any, sanction should be imposed 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 as the concerns identified in relation to Miss Powell need to be addressed before she can safely return to practise. 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 this 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 a caution order would be inappropriate in view of the findings on the charges. The panel decided that it would be neither proportionate nor in the public interest to impose a caution order.

The panel next considered imposing a further current conditions of practice order on Miss Powell's registration. The panel is mindful that any conditions must be proportionate, measurable and workable. The panel bore in mind the public protection issues identified

and concluded that whilst a further conditions of practice order would protect the public, given her assertion that she has retired and that there is therefore no likelihood of her practising again as a nurse, the panel considered that it would not serve any meaningful purpose to impose a further conditions of practice order.

The panel considered that a suspension order would be disproportionate in this case.

The panel took into account the NMC sanction guidance when making its decision, namely NMC guidance REV-2h which states:

'Where the professional would no longer be on the register but for the order in place, a reviewing panel can allow the order to expire or, at an early review, revoke the order. Professionals in these circumstances will automatically be removed from the register, or lapse, upon expiry or revocation of the order. The panel will record that the professional remains impaired.

A panel will allow a professional to lapse with impairment where:

- the professional would no longer be on the register but for the order in place;
- the panel can no longer conclude that the professional is likely to return to safe unrestricted practice within a reasonable period of time;
- a striking off order isn't appropriate.

Whilst the intentions or wishes of the professional do not determine whether they should be allowed to lapse, a professional who would no longer be on the register but for the order in place can themselves request an early review to ask that the order is removed.'

The panel carefully considered Miss Powell's letter sent to the NMC on 2 November 2024. The panel concluded that the letter from Miss Powell suggests that she believes her nursing career is over and has no current intention to return to nursing practice.

When considering fairness to Miss Powell, the panel was of the view that prolonging these proceedings with another conditions of practice order would not result in a change of circumstances and would only cause further distress to Miss Powell. It balanced this with

public protection and the public interest and was of the view that allowing the order to lapse with a finding of impairment will meet the public interest and sufficiently protect the public. It noted that if Miss Powell wished to re-join the NMC register, she would have to provide the Registrar with evidence that her fitness to practise is no longer impaired. The panel recognised Miss Powell's long-standing career as a nurse and her choice to no longer practice.

Further, the panel took into account that this is the least restrictive sanction it could impose, given Miss Powell' disengagement, lack of insight and strengthening of practice. The panel was assured that this will not put the public at risk of harm or affect the public's confidence in the nursing profession.

In accordance with Article 30(1), the substantive suspension order will lapse upon expiry, namely the end of 18 November 2025.

This will be confirmed to Miss Powell in writing.

That concludes this determination.