

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

**Substantive Order Review Hearing
Tuesday 21 October 2025**

Virtual Hearing

Name of Registrant:	Samantha Jane Dixon
NMC PIN:	08A2250E
Part(s) of the register:	Registered Nurse – Adult Nursing RNA – (24 October 2008)
Relevant Location:	Sunderland
Type of case:	Misconduct
Panel members:	Phil Lowe (Chair, Lay member) Sally Hatt (Registrant member) Carson Black (Lay member)
Legal Assessor:	Paul Hester
Hearings Coordinator:	Emma Norbury-Perrott
Nursing and Midwifery Council:	Represented by Harry Piercy, Case Presenter
Ms Dixon:	Present and represented by Benjamin Bardell, on behalf of Sequentus
Order being reviewed:	Suspension order (3 months)
Fitness to practise:	Impaired
Outcome:	Suspension order (6 months) to come into effect on 27 November 2025 in accordance with Article 30 (1)

Decision and reasons on review of the substantive order

The panel decided to extend the current suspension order for a further period of six months.

This order will come into effect at the end of 27 November 2025 in accordance with Article 30(1) of the 'Nursing and Midwifery Order 2001' (the Order).

This is the second review of a substantive suspension order imposed for a period of 12 months by a Fitness to Practise Committee panel on 25 July 2024. This was reviewed on 11 August 2025 where the panel imposed a suspension order for a period of 3 months.

The current order is due to expire at the end of 27 November 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 are as follows:

'That you, a registered nurse:

- 1. Whilst employed by South Tyneside and Sunderland NHS Trust ('the Trust'), worked for ProHealth Care Agency and/or University Hospital of North Tees whilst on sick leave from the Trust, on one or more of the dates, on one or more occasion, set out in Schedule 1.*
- 2. Your conduct as alleged in charge 1 was dishonest in that you knew that you should not work elsewhere whilst on sick leave from the Trust.*
- 3. Between 1 January 2019 and 31 December 2020, did not inform ProHealth Care Agency and/or University Hospital of North Tees Trust that you were subject to restrictions placed on you by the Trust.*

4. *Your conduct as alleged in charge 3 was dishonest in that you represented to your employment agency and/or University Hospital of North Tees that your registration was not subject to restrictions when you knew it was.*
5. *Whilst employed by the Trust, made the following medication errors:*
 - a) *On 29 July 2017, gave Gentamicin to the wrong patient.*
 - b) *On 1 February 2018, failed to document that you had disposed of bottles of Oramorph.*
 - c) *On 29 April 2018, administered 1gm of Paracetamol when 500mg was prescribed to an unknown patient.*
 - d) *On 8 May 2018, administered a 1 litre bag of saline without a prescription to an unknown patient.*
 - e) *On 30 July 2018, administered intravenous antibiotics to the wrong patient.*
 - f) *On 23 October 2018, administered Gentamicin intramuscularly when it had been prescribed to an unknown patient to be given intravenously.*
 - g) *On 31 May 2019, administered a PEJ feed at the incorrect dose volume of 100ml per hour rather than 45ml per hour to an unknown patient.*
6. *Whilst working for University Hospital of North Tees, on or before 16 September 2019, incorrectly told an unknown patient that Morphine was no longer prescribed for them, even though it was on the patient's chart.*
7. *Whilst employed by Spire Healthcare, made the following errors:*
 - a) *On 19 April 2023, failed to identify that medication needed to be administered by IV and not orally for an unknown patient.*
 - b) *On an unknown date between April and May 2023, asked a band 5 nurse to sign off a control drug when you knew you needed to ask a more senior colleague.*
 - c) *On 12 May 2023, admitted an unknown patient to the ward with an incorrect name on their wrist band.*

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

Schedule 1

*17 July 2019
23 July 2019
24 July 2019
25 July 2019
30 July 2019
01 August 2019
10 April 2020
11 April 2020
12 April 2020
13 April 2020
14 April 2020
19 April 2020
20 April 2020
21 April 2020
22 April 2020'*

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

'The panel considered whether your fitness to practise remains impaired.

The panel noted that the original substantive panel found that you had insufficient insight. At this hearing, the panel considered that you have demonstrated sufficient insight. It acknowledged your early admissions to the charges at the original substantive hearing. The panel also took into account your oral evidence today in which you explained why it is important not to repeat your past actions in the future.

However, the panel considered that there remains a risk of harm to the public in relation to the medication errors as you have not been able to

work as a registered nurse, or manage and administer medications. The panel noted that in your current role as a senior carer, you will be allowed to manage and administer medication.

The panel further considered that in the absence of a management reference confirming your honesty and openness during the most recent application process, there still remains a risk, albeit low, to the public in terms of your dishonesty. The panel would like to have seen such information from your current employer.

The panel determined that you remain liable to repeat matters of the kind found proved. As such, the panel determined that your fitness to practise remains impaired on the ground of public protection only.

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 no longer required and that the public interest has been met by the 12-month suspension order imposed on 25 July 2024.

For these reasons, the panel finds that your fitness to practise remains impaired.'

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

'The panel first considered whether to take no action but concluded that this would be inappropriate given the finding of current impairment. 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 a 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 bore in mind the seriousness of the facts found proved at the original substantive hearing and concluded that a conditions of practice order would not adequately protect the public given the existing concerns relating to your dishonesty. If it were not for the dishonesty element of this case, the panel would have considered a conditions of practice order in relation to the medication errors alone.

The panel considered the imposition of a further period of suspension. It was of the view that a suspension order would allow you time to adjust to your new role as a senior carer where you would be allowed to manage and administer medications. The panel considered that this further period of suspension will also allow you an opportunity to provide some references from your current employer discussing your transparency in the application process of your current role. The panel determined therefore that a suspension order is the appropriate sanction which would continue to protect the public. It considered this to be the most appropriate and proportionate sanction available.

This suspension order will take effect upon the expiry of the current suspension order, namely at the end of 27 August 2025 in accordance with Article 30(1).

Before 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:

- *References from your current employer, including discussing your transparency during the application process relating to your referral, and the concerns of dishonesty and medicine administration errors.*
- *Evidence from your current employer discussing your safe management and administration of medications.*
- *Any evidence of continued professional development.'*

Decision and reasons on current impairment

The panel has considered carefully whether your 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 practice safely, kindly 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 your registrant bundle. It has taken account of the submissions made by Mr Piercy on behalf of the NMC and the submissions made by Mr Bardell on your behalf.

Mr Piercy outlined the background of your case and told the panel that you had made full admissions to the charges, which related to dishonesty and medication errors.

Mr Piercy directed the panel to your registrant bundle. He referred to the reference provided by your current manager in which it states that at interview you were honest and transparent about being under investigation for medication errors but you did not go into further detail. Mr Piercy reminded the panel that the charges which you made full

admissions to relate to medication errors and also dishonesty. Again, Mr Piercy directed the panel to the reference provided by your manager in which she outlines that you were involved in a drug administration error on 19 August 2025 shortly after commencing your role and this was dealt with appropriately. Further, she states that no further drug errors have occurred.

Mr Piercy submitted that whether your fitness to practise is currently impaired is a matter for the panel and the NMC is largely neutral on this. He submitted that the panel may consider imposing a further short period of suspension to allow you time to develop your practice in your current role and demonstrate safe administration of medication.

In relation to dishonesty matters, Mr Piercy submitted that the previous reviewing panel determined that the risk of repetition was low, but not eliminated. He told the panel that the reference from your manager states that you were honest and transparent at interview but this reference only mentions drug errors and not the additional dishonesty charges also. Therefore, he invited the panel to consider that a risk of repetition remains regarding your previous dishonesty. In conclusion, Mr Piercy submitted that a further period of suspension would allow you time to demonstrate your development and that this risk is not material.

Mr Bardell directed the panel to your registrant bundle and outlined that it contains several references from colleagues, a reference from your manager and multiple training certificates. He submitted that a suspension order is no longer required on the grounds of public protection and public interest.

Mr Bardell submitted that in light of the insight demonstrated by you into the regulatory concerns, the extensive training completed by you and the numerous testimonials obtained in your current role, this is the appropriate juncture to allow you to return to safe practice as a registered nurse without restriction. He directed the panel to the positive reference provided by your current manager and how you were open and candid at interview regarding your substantive order. He addressed the panel on the medication error that you were involved in, as described by your manager in the reference provided. He told the panel that you were open and candid and after a period of direct supervision there have been no further medication errors or incidents.

Mr Bardell submitted that if the panel is of the view that public protection is engaged, a conditions of practice order could be drafted to adequately address any risks and give you the opportunity to strengthen your practice while under direct supervision as a registered nurse.

In response, Mr Piercy submitted that if the panel is of view that dishonesty concerns remain a conditions of practice order may not be workable.

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 your fitness to practise remains impaired.

The panel had sight of your registrant bundle, which contained numerous references from colleagues at your current place of work and training certificates. The panel noted that the reference from your manager was largely positive. However, it outlined that you were involved in an incident regarding a drug administration error shortly after commencing your employment. It also outlined that although you were reportedly open and candid about being under investigation for a drug error at interview, your manager stated that you did not give any further detail beyond this. The panel noted that two of the charges at the substantive hearing specifically related to dishonesty and it appears that during the employment application process that you did not mention that you were subject to a suspension order as a registered nurse. The panel was concerned that it may be the case that you chose not to openly communicate the dishonesty findings to your manager at interview, beyond citing that the investigation related to medication errors.

The panel in considering whether you have addressed the charges of dishonesty did note to your credit that in your bundle of documentation you were open about a further medication error which the NMC was unaware of.

In its consideration of whether you have taken steps to strengthen your practice, the panel took into account the training certificates provided by you in your registrant's bundle. However, the panel noted that there was no targeted training specifically to address medications management and administration. The panel had no new reflective piece before it to consider today addressing either your dishonesty or medicine administration errors. Further, the panel did not hear directly from you today as to these regulatory findings and how you have mitigated them.

In light of the information before it, the panel determined that a real risk of repetition remains and you remain liable to repeat matters of the kind found proved which may lead to significant harm. As such, the panel therefore decided that a finding of current 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 your fitness to practise remains impaired.

Decision and reasons on sanction

Having found your 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 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 a 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 bore in mind the seriousness of the facts found proved at the original substantive hearing and concluded that a conditions of practice order would not adequately protect the public given the existing concerns relating to your recent involvement in a medication error incident and the existing risks regarding your dishonesty. The panel considered that conditions can often be formulated to address the risks associated with medication management and administration. However, there appears to be a pattern of repetition in regard to the medication errors that you have been involved in and coupled with the concerns regarding your apparent lack of frankness at interview regarding two dishonesty charges, the panel determined that conditions of practice cannot be formulated to address the risks at this time.

The panel considered the imposition of a further period of suspension. It was of the view that a suspension order would allow you further time to fully reflect on the matters found proved and to demonstrate a sustained period of time without any medication error incidents. The panel concluded that a further 6 month suspension order would be the appropriate and proportionate response and would afford you adequate time to further develop your insight and take steps to strengthen your practice. It would also give you an opportunity to approach past and current health professionals to attest to your honesty and integrity in your workplace assignments since the substantive hearing.

The panel determined therefore that a suspension order is the appropriate sanction which would continue to both protect the public and satisfy the wider public interest. Accordingly, the panel determined to impose a suspension order for the period of 6 months would

provide you with an opportunity to demonstrate consistency and stability in strengthening your practice, targeted CPD and reflection. It considered this to be the most appropriate and proportionate sanction available.

This suspension order will take effect upon the expiry of the current suspension order, namely the end of 27 November 2025 in accordance with Article 30(1).

Before 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 targeted CPD addressing the matters found proved
- Evidence of reflective insight into the cause of the medication errors and instances of dishonesty
- Evidence of medication administration without error

This will be confirmed to you in writing.

That concludes this determination.