

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

**Restoration Hearing
Wednesday 29 October 2025 – Thursday 30 October 2025**

Physical Hearing
10 George Street, Edinburgh, EH2 2PF

Name of Applicant: Mmalesfsane Sarah Molubi

NMC PIN: 98Y01900

Part(s) of the register: Registered Nurse – RN1 – Adult
01 March 2001

Relevant Location: Edinburgh

Panel members: Jonathan Storey (Chair, Lay member)
Steven Brennan-Collis (Registrant member)
Norah Christie (Lay member)

Legal Assessor: Graeme Dalglish

Hearings Coordinator: Emma Norbury-Perrott

Nursing and Midwifery Council: Represented by Emilio Pagliocchini, Case
Presenter

Ms Molubi: Present and unrepresented

Outcome: **Application granted subject to completion of
a return to practice course and payment of
the prescribed fee**

Determination of application for Restoration to the Register:

This is a hearing of your first application for restoration to the Nursing and Midwifery Council ("NMC") Register. A panel of the Conduct and Competence Committee directed on 8 June 2016 that your name be removed from the register based on its findings with regard to the facts of your case and your impairment. This application is made by you in accordance with Article 33 of the Nursing and Midwifery Order 2001 ("the Order"), as at least five years have now elapsed since the date of the striking-off order.

At this hearing the panel may reject your application or it may grant your application unconditionally. It may grant your application subject to your satisfying the requirements of Article 19(3) and it may make a conditions of practice order.

The panel has considered your application for restoration to the Council's Register.

Background

You were referred to the NMC in 2011 by NHS Lothian where you were employed as a Registered Nurse. On 29/30 March 2011 an incident occurred in which a patient fell and sustained a serious head injury. NHS Lothian undertook an investigation into your conduct on the night in question. As a consequence, you were issued with a first and final written warning and demoted. You were also required to undertake further training. However, you accepted redundancy before this could take place.

A suspension order for a period of 6 months was originally imposed by a panel of the Conduct and Competence Committee at a substantive hearing which concluded on 7 August 2014. The facts which were found proved at the substantive hearing are as follows:

'1. In relation to patient A:

1.1. failed to complete hourly checks of patient A's pump infusion

1.2. did not record hourly observations of patient A's:

1.2.1. temperature

1.2.2. blood pressure

- 1.2.3. heart rate
- 1.2.4. pain level
- 1.2.5. SEW score
- 1.2.6. respiration rate
- 1.2.7. eye opening
- 1.2.8. verbal and motor responses
- 1.3. failed to make a sufficient entry in patient A's progress notes
- 1.4. failed to complete a Datix form to record that patient A had fallen
- 1.5. did not inform the Hospital at Night team ("HaN") that patient A had fallen when they attended his bedside at around 06.00.'

On 9 February 2015, a panel of the Conduct and Competence Committee replaced the suspension order with a conditions of practice order for a period of four months. On 8 June 2015, a further reviewing panel of the Conduct and Competence Committee extended and varied the conditions of practice order for a period of 6 months. On 5 November 2015, the conditions of practice order was again varied and extended for a further period of six months. You attended the substantive order review which concluded on 31 May 2016 but you were not represented.

On 31 May 2016, the substantive order review panel determined the following with regard to impairment:

'The panel considered the determination made by the panel on the last occasion that this order was reviewed (5 November 2015). The panel notes that you have engaged with the NMC and have been present both at the substantive hearing and at subsequent review hearings. The panel [PRIVATE] has taken into account the numerous training courses that you have undertaken. However, this panel observed that your main focus has been to attribute blame for your shortcomings to others and the environment in which you work.

You have placed before this panel, information which demonstrates serious risks and concerns with regard to patients at the Home.

However, you appear to be taking a step backwards in regard to your demonstration of insight into the importance of escalation and the requirement to involve others regarding patient care. The panel determined that in the light of the charges found proved by the substantive panel and the determinations made by the subsequent reviewing panels, you continue to demonstrate a lack of recognition or insight into the risk of harm you caused to Patient A or the effect of your actions on the reputation of the nursing profession.

The panel took into account the letter from the manager at the Home dated 19 May 2016. In that letter, she states, that your communication, both oral and documentary is unnecessarily detailed and time wasting. The letter also contradicts your position for the reason of your supervisor not providing a report on your performance. With this in mind, it concluded that you continue to pose a risk to patient safety and that your fitness to practise remains impaired by reason of your misconduct. Indeed, the panel reflected on the fact that although the substantive panel and previous reviewing panels considered that you remained committed to complying with the conditions of practice order and to remediating the deficiencies in your practice, you have been unable to fully do so. This heightens the panel's concern regarding the risk of repetition and your level of insight.

The panel were further concerned that given the time that has elapsed since the incident in 2011, you have made little progress to demonstrate your compliance with the conditions of practice order. The panel consider this to be evidence of a deep seated attitudinal issue.'

On 31 May 2016, the substantive order review panel went on to determine the following with regard to sanction:

'The panel has taken into account the ISG in addressing what order, if any, to impose. The panel considered allowing the conditions of

practice order to lapse and to take no further action. In light of its conclusion that you continue to present a risk to the public, it decided that this would be wholly inappropriate.

The panel next considered replacing the current conditions of practice order with a caution order. The panel concluded that you would present a continuing risk to the public if you were allowed to practise unrestricted. It bore in mind that a caution order would not restrict your practice rights. Consequently, the panel concluded that a caution order was not sufficient to protect the public.

The panel next considered continuing or varying the current conditions of practice order. Whilst you have demonstrated a willingness to engage with the current order, you have been unable, for a number of reasons, to demonstrate full compliance with the order.

Your consistent breaches of several conditions of the order had the potential to put patients at risk of harm. The panel has determined that you continue to demonstrate limited insight into your failings. It could therefore not be satisfied that you would take up the opportunities for remediation which a further period of a conditions of practice order would present and hence such a sanction is unworkable and therefore inappropriate.

The panel next considered replacing the current conditions of practice order with a suspension order. It referred itself to the relevant factors identified in the ISG.

Despite being given the opportunity to fully demonstrate compliance with the conditions of practice order and to remediate your actions, you have failed to do so. Instead, your continued stance has been to remain in the employment of the Home and to place blame on the organisation and the environment in which you work. The information available to the panel suggest that you would be highly unlikely to utilise a period of

suspension in a way which may remediate your misconduct and would therefore not be an appropriate or proportionate sanction. Having determined that a suspension order is not sufficient or appropriate to protect patients and the public or to uphold standards and maintain public confidence in the nursing profession, the panel then went on to consider a striking off order.

In light of all of the above factors and in particular your continued assertions since the incident, the substantive hearing and subsequent review hearings, the panel determined that you have demonstrated a deep seated attitudinal issue towards remedying your failures, insight and complying with a conditions of practice order which is fundamentally incompatible with continuing registration. In all the circumstances, the panel has concluded that a striking off order is the only proportionate and appropriate sanction necessary to ensure public protection and to maintain confidence in the nursing profession and in the NMC as its regulator.

The panel noted that you have been working as a registered nurse since the current substantive order was imposed in February 2015. It has limited evidence regarding your current financial circumstances. The panel has applied the principle of proportionality weighing your interest and the public interest. The panel has taken into account the gravity of a striking off order and the fact that it will prevent you from practising as a nurse for the foreseeable future. However, the panel considered the protection of the public by an adequate sanction supercedes your interests.

The striking off order will come into effect at the end of 7 June 2016 upon the expiration of the existing order pursuant to Article 30(1) of the NMC Order 2001.

The panel determined to impose a striking-off order, to take effect on the expiry of the existing conditions of practice order.

Please note that the order will take effect on 8 June 2016, not 7 June 2016 as stated in the reasons above. Your entry will not show in the register and we will not confirm your registration.

You will be liable to proceedings under Article 44 of the Nursing and Midwifery Order 2001 if you do any of the following:

- Falsely represent yourself to be a registrant.*
- Use a registered nursing or midwifery title.*
- Allow anyone else to refer to you as a registrant.*

You may not apply for restoration until five years after the date that this decision takes effect.'

Submissions and evidence presented at this restoration hearing

The panel took into account all of the documentary evidence, which included the contents of your application for restoration which you submitted to the NMC, three written references and an on table bundle provided by you on 29 October 2025. The panel also had regard to oral evidence from two of your referees under affirmation and your oral evidence under oath.

The panel had regard to the submissions of Mr Pagliocchini, on behalf of the NMC. Mr Pagliocchini outlined the background of the case and the facts that led to the striking-off order in 2016. Mr Pagliocchini referred the panel to the test set out in Article 33(5) of the Order. He submitted that the NMC's position on this application is that you would be a good candidate for restoration to the register. However, he told the panel that this decision is a matter of professional judgment for the panel and it should have careful regard to the NMC's overarching objective of protecting the public and the relevant guidance in making its decision.

You provided evidence under oath. You told the panel that you truly love being a nurse and although you cannot work as a nurse currently, you consider yourself to be a *'nurse at heart'*. You explained to the panel how you have extensively reflected on the incident in 2011 and that you now see how the incident could have risked patient safety and negatively affected the nursing profession as a whole. You also said that you fully understand that you should have escalated the incident to other colleagues as a matter of urgency and you have reflected on the importance of following escalation policy, accurate documentation and clear communication in terms of patient care and outcomes.

You told the panel that you have been working as a Healthcare Assistant (HCA) at a care home since the striking off order took effect in 2016. You explained that you have strived to continue to learn from registered nurses who you have worked alongside during this time. You also explained that you have endeavoured to complete CPD to enhance your skills and knowledge. However, you stated that due to not being a registered nurse the courses available to you have been limited to those deemed appropriate for HCA's.

You told the panel that your job as a HCA within the care home ended in March 2025 due to your health. You stated these health concerns are now being managed and you intend to seek employment within healthcare. You told the panel that you are focussing on the future and intend to use your extensive reflection to be a better nurse.

You explained to the panel that you have [PRIVATE]. However, you explained that this is not the sole reason for wanting to be restored to the register as a nurse.

In conclusion, you told the panel that you have worked very hard on reflection and improving your understanding of escalation, documentation and communication and you would love the opportunity to prove yourself again as a registered nurse.

The panel also had regard to oral evidence provided by two of your referees under affirmation.

The panel accepted the advice of the legal assessor.

The legal assessor referred the panel to the test provided in Article 33(5) of the Order. Firstly, you must satisfy the panel that you satisfy the requirements of Article 9(2)(a) (approved qualification and prescribed education, training and experience) and Article 9(2)(b) (capable of safe practice). Secondly, you must satisfy the panel whether, having regard in particular to the circumstances which led to the making of the striking-off order in 2016, you are a “fit and proper person to practise as a registered nurse”. The legal assessor advised the panel that it is for you to satisfy the panel of these matters and it is for the panel to use its own independent judgment as to whether it is so satisfied.

Decision on the application for restoration

The panel has considered your application for restoration to the NMC register very carefully. It has decided to allow the application subject to your successful completion of a return to practice course.

In reaching its decision the panel recognised its statutory duty to protect the public as well as maintain public confidence in the reputation of the profession, which includes the declaring and upholding of proper professional standards. The panel bore in mind that the burden was upon you to satisfy it that you are a fit and proper person who is able to practise safely and effectively as a nurse. The panel considered the NMC Guidance entitled ‘*Deciding on applications for restoration*’ (APP-2a).

When deciding on your insight as well as your strengthened practice since your striking-off order, the panel considered both the written evidence you have provided as well as your oral evidence under oath. The panel was satisfied that you understood the broader impact of the incident on members of the public and the profession, and you have demonstrated significant remorse and extensive reflection. The panel also considered that you understood the importance of escalating the concerns surrounding the deterioration of patients, effective communication and documentation which you spoke about during your oral evidence. The panel noted your openness regarding your striking-off order with those you have worked with since the order came into effect, and the fact that you openly disclosed this to the SSSC when applying to be on their register

as a HCA. Your candid and open approach was also confirmed by two of your referees in their oral evidence.

The panel considered the CPD which you have completed as a HCA. It acknowledged that although there are limitations to the types of courses you can undertake in the role of a HCA, it was satisfied that your completion of the courses available to you demonstrates your commitment to continuous learning and strengthening your practice.

The panel also considered your oral submissions in respect of your extensive reflection. The panel determined that your submissions were compelling and you indicated good insight into your failings, the most appropriate way to remedy those failings, and prevent them occurring in the future. The panel was satisfied that you have continued to gain relevant experience in providing front line care to vulnerable adults. Further, through your training and the self-directed courses you have engaged in, as well as your inquisitive nature with other registered nurses, you have made considerable efforts to keep up to date with your professional practice.

The panel then considered whether you are able to practise safely in the future. The panel determined that you provided cogent, frank and reasonable declarations as to why you were removed from the register in 2016 and that you have taken ownership of your previous failings alongside extensive reflection. The panel determined that, in light of the time which has passed, your extensive reflection, the very positive oral evidence provided by two of your referees, and the training you have completed as well as your dedication to the nursing profession, you are able to practise safely in the future.

The panel concluded that the public would be satisfied that you are safe to return to nursing and in light of your strengthened practice and good insight, the panel determined that you are able to return to safe practice.

In determining to grant your application for restoration the panel bore in mind that you have not practised as a registered nurse since 8 June 2016 and that you no longer meet the requirements for registration with the NMC on this basis. However, the panel determined to allow your application for restoration subject to your completion of a

Return to Practice course and paying the prescribed fee which satisfies the requirements of Article 19(3) and Article 33(7)(a). This article states:

“The Council may by rules require persons who have not practised or who have not practised for or during a prescribed period, to undertake such education or training or to gain such experience as it shall specify in standards.”

“(7) On granting an application for restoration, the Committee—

(a) shall direct the Registrar to register the applicant in the relevant part of the register on his satisfying any requirements imposed under paragraph (6) and on payment of the prescribed fee; and”

That concludes this determination.

This decision will be confirmed to you in writing.