

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

**Substantive Hearing
Tuesday 14 October 2025 – Wednesday 22 October 2025**

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

Name of Registrant:	Washington Kudzai Mukombegumi
NMC PIN:	16D0551E
Part(s) of the register:	Registered Nurse – Adult Nurse – sub part 1
Relevant Location:	Bedfordshire
Type of case:	Misconduct
Panel members:	Bryan Hume (Chair, lay member) Deborah Bennion (Registrant member) Shelley Hemsley (Lay member)
Legal Assessor:	Andrew Lewis
Hearings Coordinator:	Ekaette Uwa
Nursing and Midwifery Council:	Represented by James Cox, Case Presenter
Mr Mukombegumi:	Not present and unrepresented
Special Counsel for the purpose of cross-examining Colleagues A and B:	Mr Chris Martin, instructed by the NMC (14 October 2025 -15 October 2025)
Facts proved:	Charges 1, 2a, 2b, 2c, 2d, 2e, 2f, 2g, 2h, 3, 4a, 4b, 4c, 4d, 4e, 4f, 4g i),4g ii), 4g ii), 4h, 5a, 5b, 6, 7a, 7b,7d
Facts not proved:	Charge 7c
Fitness to practise:	Impaired
Sanction:	Striking-off order

Interim order:

Interim suspension order (18 months)

Decision and reasons on service of Notice of Hearing

The panel was informed at the start of this hearing that Mr Mukombegumi was not in attendance and that the Notice of Hearing letter had been sent to Mr Mukombegumi's registered email address by secure email on 8 September 2025.

Mr Cox, 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 allegation, the time, dates and venue of the hearing, instructions on how to join, information about Mr Mukombegumi's right to attend, be represented and call evidence, as well as the panel's power to proceed in his absence.

In the light of all of the information available, the panel was satisfied that Mr Mukombegumi has been served with the Notice of Hearing in accordance with the requirements of Rules 11 and 34.

Decision and reasons on proceeding in the absence of Mr Mukombegumi

The panel next considered whether it should proceed in the absence of Mr Mukombegumi. It had regard to Rule 21 and heard the submissions of Mr Cox who invited the panel to continue in the absence of Mr Mukombegumi. He submitted that Mr Mukombegumi had voluntarily absented himself.

Mr Cox submitted that there had been little engagement at all by Mr Mukombegumi with the NMC in relation to these proceedings and, as a consequence, there was no reason to believe that an adjournment would secure his attendance on some future occasion.

The panel accepted the advice of the legal assessor.

The panel noted that its discretionary power to proceed in the absence of a registrant under the provisions of Rule 21 is not absolute and is one that should be exercised '*with the utmost care and caution*'

The panel has decided to proceed in the absence of Mr Mukombegumi. In reaching this decision, the panel has considered the submissions of Mr Cox and the advice of the legal assessor. It has had particular regard to the factors set out in the decision of *R v Jones (Anthony William)* (No.2) [2002] UKHL 5 and *General Medical Council v Adeogba* [2016] EWCA Civ 162 and had regard to the overall interests of justice and fairness to all parties. It noted that:

- No application for an adjournment has been made by Mr Mukombegumi;
- Although Mr Mukombegumi has engaged with the NMC in the past he has not responded to any of the attempts to contact him to join the hearing today;
- The panel saw an email for Mr Mukombegumi dated 13 October 2025 saying he would like to attend remotely. However, he did not respond to two further emails from the hearings coordinator with links to join the hearing;
- There is no reason to suppose that adjourning would secure his attendance at some future date;
- Not proceeding may inconvenience the witnesses, and their employer(s);
- Further delay may have an adverse effect on the ability of witnesses to recall events accurately; and
- There is a strong public interest in the expeditious disposal of the case.

There is some disadvantage to Mr Mukombegumi in proceeding in his absence. Although the evidence upon which the NMC relies has been sent to him and he has made a written response to the allegations. He will not be able to challenge the evidence relied upon by the NMC in person and will not be able to give evidence on his own behalf. However, in the panel's judgement, this can be mitigated. The panel can make allowance for the fact that some of the NMC's evidence will not be tested by

cross-examination and, of its own volition, can explore any inconsistencies in the evidence which it identifies, also Colleagues A and B will be cross-examined by Mr Martin the Special Counsel. Furthermore, the limited disadvantage is the consequence of Mr Mukombegumi's decision to absent himself from the hearing, waive his rights to attend, and/or be represented, and to not provide evidence or make submissions on his own behalf.

In these circumstances, the panel has decided that it is fair to proceed in the absence of Mr Mukombegumi. The panel will draw no adverse inference from Mr Mukombegumi's absence in its findings of fact.

Details of charge

That you, a registered nurse:

- 1) Between March 2023 and November 2023 on one or more occasions, touched or attempted to touch Colleague B without their consent;
 - a) On their bottom;
 - b) On their hips;
 - c) On their breasts;
- 2) Between March 2023 and November 2023:
 - a) Said and/or suggested to Colleague B that Colleague B "*allowed men to spank them*" or words to that effect.
 - b) Made comments about you and Colleague B being married.
 - c) Said or suggested to Colleague B that they "*liked being spanked*", or words to that effect.

- d) Said to Colleague B *"Who's your lover? Do you do it with him?"* or words to that effect.
 - e) Said to Colleague B *"Do you suck dick?"* or words to that effect.
 - f) Said to Colleague B *"You're so pretty; I would do it with you"* or words to that effect.
 - g) Asked Colleague B if they were married and/or whether they had a man.
 - h) Said to Colleague B *"oh I would marry you"* or words to that effect.
- 3) Before 26 November 2023 made comments to Colleague A about having children with them and/or getting them pregnant.
- 4) On 26 November 2023 in relation to Colleague A:
- a) Responded to Colleague A's question as to where you wanted to allocate them by saying *"in my bed"* or words to that effect.
 - b) Looked Colleague A's body up and down.
 - c) Told Colleague A to make sure they wore *"tight, skimpy clothing"* to the Christmas party, or words to that effect.
 - d) Told Colleague A *"it would be funny to get Colleague C drunk and take her back to a hotel room as she would wake up not knowing what had happened and it would be awkward"*, or words to that effect.
 - e) Told Colleague A *"to shut the door and sit on [your] lap and that no one needed to know"*, or words to that effect.

f) Told Colleague A her pains were *“probably from being up all-night using dildos”* on herself, or words to that effect.

g) Took down a display photo of Colleague A and:

i) said you were *“glad the photo was laminated”*, or words to that effect

ii) said it was *“going to be a long night”*, or words to that effect;

iii) placed the display photo of Colleague A in your drawer.

h) Asked Colleague A to move from behind a computer so they were in your view;

5) Your actions at charge 1 were sexually motivated in that:

a) You were seeking to gain sexual gratification from touching Colleague B, and/or

b) You were seeking to pursue a future sexual relationship with Colleague B.

6) Your conduct at charge 2 and/or charge 3 and/or charge 4 was sexually motivated in that you were seeking to pursue a future sexual relationship with Colleague A and/or Colleague B.

7) Your conduct at charge 1 and/or charge 2 and/or charge 3 and/or charge 4:

a) Was unwanted by Colleague A and/or Colleague B;

b) Was of a sexual nature.

c) Was intended to violate Colleague A and/or Colleague Bs dignity and/or create an intimidating, hostile, degrading, humiliating or offensive environment for Colleague A and/or Colleague B.

or

- d) Had the effect of violating Colleague A's and/or Colleague B's dignity and/or creating an intimidating, hostile, degrading, humiliating or offensive environment for Colleague A and/or Colleague B.

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

Decision and reasons on application to admit hearsay evidence

The panel heard an application made by Mr Cox under Rule 31 to admit the notes from the Trust's disciplinary investigation process (investigation) (appendices 6 and 7) dated 24 January 2024 held with Colleague F and G into evidence. Colleagues F and G, gave an account of the first complaint made by Colleague A and B.

Mr Cox submitted that despite numerous attempts, the NMC had not been able to obtain signed, written statements from Colleague F and G. Mr Cox submitted that the evidence is relevant and was produced for the purpose of the investigation and shows how Colleagues A and B made their initial complaint in 2023. He submitted that it is not the sole and decisive evidence in this case and therefore it would not be unjust to admit them into evidence.

In the preparation of this hearing, the NMC had provided the case bundles including appendices 6 and 7 as part of the evidence in this case. Despite knowledge of the nature of the evidence before the panel, Mr Mukombegumi made the decision not to attend this hearing. On this basis Mr Cox advanced the argument that there was no lack of fairness to Mr Mukombegumi in allowing appendices 6 and 7 into evidence.

The panel heard and accepted the legal assessor's advice on the issues it should take into consideration in respect of this application. This included that Rule 31 provides that, so far as it is 'fair and relevant', a panel may accept evidence in a range of forms and circumstances, whether or not it is admissible in civil proceedings. He advised the panel that the question of fairness should be considered carefully when deciding whether to

admit the evidence and could not always be resolved by the weight the panel gave to the evidence.

The panel gave the application in regard to appendices 6 and 7 serious consideration. The panel noted that the investigation notes were part of formal investigations at the local level and were recorded. It also noted that these notes would have been sent to Colleague F and G who had an opportunity to reply if their contents were inaccurate.

The panel considered whether Mr Mukombegumi would be disadvantaged by allowing hearsay testimony into evidence. The panel considered that Mr Mukombegumi had been provided with a copy of appendices 6 and 7 and that they were not the sole and decisive evidence in this case. There was also public interest in the issues being explored fully which supported the admission of this evidence into the proceedings. The panel was satisfied that the documents are relevant to the matters in issue and has probative value.

In these circumstances, the panel came to the view that it would be fair and relevant to accept into evidence the hearsay evidence contained in appendix 6 and 7 but would give what it deemed appropriate weight once the panel had heard and evaluated all the evidence before it.

Background

The charges arose whilst Mr Mukombegumi was employed as a registered nurse by Bedford Hospital NHS Trust (the Trust). Mr Mukombegumi was employed as a

registered nurse by the Trust in 2013 and undertook a secondment on 3 October 2022 as a Band 6 Nurse [PRIVATE], where Mr Mukombegumi was working in Elderly Care.

The Trust identified the following allegations in relation to his behaviour:

- 1) Made inappropriate sexual comments to colleagues.
- 2) Tried to inappropriately touch colleagues.
- 3) Made a comment to a colleague about wanting them in his bed.
- 4) Made suggestive comments to colleagues about what they should wear to a Christmas party.
- 5) Made inappropriate comments about getting a colleague drunk.

Concerns were raised by two Healthcare Assistants (HCAs) regarding alleged explicit comments and behaviour. When these allegations were brought to the Trust's attention, Mr Mukombegumi was suspended with immediate effect on 8 December 2023 at a formal meeting in which Mr Mukombegumi denied all the allegations. A formal investigation was launched and Mr Mukombegumi was dismissed from his role.

Decision and reasons on facts

In reaching its decisions on the disputed facts, the panel took into account all the oral and documentary evidence in this case together with the submissions made by Mr Cox on behalf of the NMC.

The panel has drawn no adverse inference from the non-attendance of Mr Mukombegumi.

The panel was aware that the burden of proof rests on the NMC, and that the standard of proof is the civil standard, namely the balance of probabilities. This means that a fact will be proved if a panel is satisfied that it is more likely than not that the incident occurred as alleged.

The panel heard live evidence from the following witnesses called on behalf of the NMC:

- Colleague A: [PRIVATE]
- Colleague B: [PRIVATE]
- Colleague C: [PRIVATE]
- Colleague D: Matron for Critical Care at the Trust;
- Colleague E: Ward Manager at the Trust

Before making any findings on the facts, the panel heard and accepted the advice of the legal assessor. It considered the witness and documentary evidence provided by both the NMC and Mr Mukombegumi.

The panel then considered each of the disputed charges and made the following findings.

Charges 1a, 1b and 1c

That you, a registered nurse between March 2023 and November 2023 on one or more occasions, touched or attempted to touch Colleague B without their consent;

- a) On their bottom;
- b) On their hips;
- c) On their breasts

These charges are found proved in relation to attempted touching.

Given the similarity of the allegations, which arise out of the same conduct, the panel considered charges 1a, 1b and 1c together.

In reaching its decision, the panel considered all the evidence before it. It had regard to Colleague B's oral evidence at this hearing, her contemporaneous handwritten statement, and her statement at the investigation on 16 January 2024 where she stated:

'... he has tried to touch me on my boobs and things like that...'

'...he has been doing inappropriate things for example tries to touch me in inappropriate places...'

The panel first considered Colleague B's clear and consistent evidence, which is supported by a contemporaneous record. It found Colleague B to be a credible and reliable witness. While her recollection of precise dates and occasions varied slightly, the essence of her account was consistent from her initial handwritten statement through to her oral evidence.

The panel next considered whether Mr Mukombegumi did touch or attempted to touch Colleague B. The panel did not have enough evidence to be satisfied that Mr Mukombegumi actually touched Colleague B. On the allegation of attempted touching, the panel found Colleague B's evidence to be credible and consistent. She consistently described Mr Mukombegumi attempting to touch her inappropriately on several occasions, and the panel noted that her early written statement, made close in time to the incidents, recorded that he *'tried to touch her in inappropriate places'*.

The panel was satisfied that Colleague B's embarrassment and discomfort in discussing these matters explained the limited detail in some of her early accounts. Nonetheless, her oral evidence, supported by contemporaneous reporting to her line manager and corroboration from a colleague who witnessed her distress, lent credibility to her account. In her written evidence and her account to the investigation, Colleague B made explicit references to Mr Mukombegumi's attempts to touch her hips, bottom and breasts.

Mr Mukombegumi denied any attempt to touch Colleague B, but the panel found his denial to be lacking in plausibility when considered alongside the consistent nature of Colleague B's reports.

On the balance of probabilities, the panel was satisfied that Mr Mukombegumi attempted to touch Colleague B on her bottom, hips, and breasts without her consent.

The panel therefore found charges 1a), 1b and (c) proved in respect of attempted touching.

Charge 2a, 2b, 2c, 2d, 2e, 2f, 2g, 2h

That you, a registered nurse March 2023 and November 2023:

- a) Said and/or suggested to Colleague B that Colleague B *"allowed men to spank them"* or words to that effect.
- b) Made comments about you and Colleague B being married.
- c) Said or suggested to Colleague B that they *"liked being spanked"*, or words to that effect.
- d) Said to Colleague B *"Who's your lover? Do you do it with him?"* or words to that effect.
- e) Said to Colleague B *"Do you suck dick?"* or words to that effect.
- f) Said to Colleague B *"You're so pretty; I would do it with you"* or words to that effect.
- g) Asked Colleague B if they were married and/or whether they had a man.
- h) Said to Colleague B *"oh I would marry you"* or words to that effect.

These charges are found proved.

Given the similarity of the allegations, which arise out of a sustained course of conduct directed towards Colleague B, the panel considered charges 2a to 2h together.

In reaching this decision, the panel took into account all the evidence before it, including the handwritten statement of Colleague B, her NMC witness statement, the investigation, her live evidence and Mr Mukombegumi's written response.

The panel noted that Colleague B stated as follows in her statements, live evidence and at the local investigation in relation to each of the charges:

Charge 2a and 2c

'...he will say things like [Colleague B] you like being spanked'

'...He would also make sexual comments suggesting I allow men to spank me...'

Charge 2b, 2g, 2h

'He also made comments about us being married which did not make sense as there is a significant age gap between us, him being approximately 40 years old and I being 21 at the time.'

'He has talked about marriage, he asks me if I am married and whether I have a man or not, all sorts of questions like that and he has said to me before oh I would marry you...'

Charge 2d

'[Colleague B] whos your lover do you do it with him...'

Charge 2e

'do you suck dxxx...'

Charge 2f

'your so pretty I would do it with you'

The panel noted that Mr Mukombegumi denies these allegations both at the investigation and in his written submissions. It accepted Colleague B's evidence that Mr Mukombegumi made repeated sexually suggestive and explicit remarks towards her over several months. Her oral evidence was consistent with her contemporaneous written statement and the record of her interview at the investigation.

The panel found no motive for fabrication and considered Colleague B's description of her discomfort and her attempts to deflect Mr Mukombegumi's remarks to be credible.

The panel noted that, while some of the language varied between accounts, the evidence of the core allegations remained consistent, indicating that Mr Mukombegumi made comments of a sexual nature, including references to spanking, marriage, sexual activity, and physical appearance. The panel considered that these remarks were crude, personal, and wholly inappropriate in a professional setting.

The panel found that Colleague B's recollection of being asked if she was married, whether she had a man, and being told "I would marry you" were consistent across her written and oral evidence, with only minor variation in wording. The panel therefore considered charges 2b, 2g and 2h to be aspects of the same comment rather than distinct incidents.

Having carefully considered the evidence as a whole and for reasons given above, the panel preferred the evidence of Colleague B over the denials to the investigation that he repeated in his written submissions to the panel. On the balance of probabilities, the panel is satisfied that the inappropriate conduct detailed in these charges persisted and escalated over time.

In light of these findings, the panel determined that charge 2a -2h are found proved.

Charge 3)

That you, a registered nurse before 26 November 2023 made comments to Colleague A about having children with them and/or getting them pregnant.

This charge is found proved.

The panel considered the totality of the evidence in relation to this charge and was satisfied, on the balance of probabilities, that you made the comment alleged or words to that effect. The panel placed significant weight on the live evidence of Colleague A, and her statements as contained in the case bundles as follows:

‘...maybe joked about having kids with me or getting me pregnant...’

The panel found her to be a credible witness who gave a clear account of events. It found her evidence to be consistent with the allegation that Mr Mukombegumi made inappropriate and sexualised comments in the workplace.

The panel considered that the nature of the comment was overtly sexual and inappropriate, and that it was unlikely to have been fabricated. It considered that the remark formed part of the broader pattern of sexually motivated conduct that the panel found established.

The panel therefore found charge 3 proved.

Charge 4

That you, a registered nurse on 26 November 2023 in relation to Colleague A:

- a) Responded to Colleague A's question as to where you wanted to allocate them by saying *“in my bed”* or words to that effect.
- b) Looked Colleague A's body up and down.

- c) Told Colleague A to make sure they wore *“tight, skimpy clothing”* to the Christmas party, or words to that effect.
- d) Told Colleague A *“it would be funny to get Colleague C drunk and take her back to a hotel room as she would wake up not knowing what had happened and it would be awkward”*, or words to that effect.
- e) Told Colleague A *“to shut the door and sit on [your] lap and that no one needed to know”*, or words to that effect.
- f) Told Colleague A her pains were *“probably from being up all-night using dildos”* on herself, or words to that effect.
- g) Took down a display photo of Colleague A and:
 - i) said you were *“glad the photo was laminated”*, or words to that effect
 - ii) said it was *“going to be a long night”*, or words to that effect;
 - iii) placed the display photo of Colleague A in your drawer.
- h) Asked Colleague A to move from behind a computer so they were in your view;

These charges are found proved.

Given that the conduct described in these charges are alleged to have occurred on the same day, the panel considered charges 4a to 4h together.

In reaching this decision, the panel took into account all the evidence before it, including the handwritten statement of Colleague A, her NMC witness statement, the investigation meeting notes, her live evidence and Mr Mukombegumi’s written response.

The panel noted that Colleague A stated as follows in her statements, live evidence and at the local investigation in relation to each of the charges:

Charge 4a

'...When I arrived on the Ward, I was not sure which area I was supposed to be in, so I asked Washington where he wanted me. He said "in my bed". I was shocked by this and asked him to repeat himself. He just laughed it off and walked away...'

'... it was just us two and he replied saying 'in my bed'...'

Charge 4b

'I was sitting in the office at the Sister's desk. Washington kept calling my name from across the nurses' station. He deliberately looked my body up and down and it felt and looked as though he was trying to look up my dress. After this, I checked that the desk was hiding the bottom part of my body to ensure that Washington could not actually see up my dress from where he was standing.'

'... I had a dress on that day and the way he was saying "[Colleague A], [Colleague A], [Colleague A]", he looked me up and down and this sounds silly but it made me feel like he could see up my dress the way he looked me up and down, it made me feel really uncomfortable and it was not until a week later where I checked the desk and I saw that it was covered and so I knew he could not but that was just how it made me feel. As I knew he was trying to move me across the computer to see me...'

Charge 4c)

'...was feeling unwell so I got a drink and sat down. Washington came over and we talked about the upcoming Christmas party. He told me to make sure I wore tight, skimpy clothes which were revealing so he could see my body.'

'...He then spoke about our upcoming Christmas party and told me to wear something 'skimpy' I said I wasn't sure what I would be wearing...'

'...Yes and I knew the Christmas party was coming up and I was panicking and thinking oh my god if he is coming to the Christmas party I need to cover up. I was so conscious of what I was going to wear and was worried to go as he joked about getting us all

drunk and getting one of the girls drunk about taking her back to a hotel room, how funny would that be if she was so drunk she didn't remember and the she woke up the next day how funny would that be he said..'

Charge 4d)

'also said he wanted to get the other female staff drunk. He said it would be really funny to get [Colleague C], Nursing Associate, drunk and take her back to a hotel room as she would wake up not knowing what had happened and it would be awkward.'

'...he joked about getting us all drunk and getting one of the girls drunk about taking her back to a hotel room, how funny would that be if she was so drunk she didn't remember and then she woke up the next day how funny would that be he said.'

'...He was talking about getting girls drunk and then he said [Colleague C's] name and I said no she has a boyfriend and then he carried on saying I would take her back to the hotel room and she wouldn't remember and how funny and awkward would that be.'

Charge 4e)

'... I told him I would sit here for a minute due to not feeling great. He laughed and told me that it was fine and told me I should come and sit on his lap for the last hour or so of the shift and that I should 'shut the office door and lock it and that no one would know...'

'...was having such pains and went to the office telling others that I was not feeling very well. Washington came into the office and told me to shut the door and sit on his lap and that no-one needed to know. I did not sit on his lap and instead stayed far away from him.'

'... I think it is because he asked me to come and sit on his lap and lock the door and talking about getting girls drunk and it just made me feel like he had a plan for something to happen...'

Charge 4f)

‘...I was saying I do not feel well and he said is it period pains and I said no and he said it must be because you were using a dildo on yourself last night...’

‘... he then said ahh is it from you using all your dildos on yourself last night and he laughed...’

‘...He then said that my pains were probably from being up all-night using dildos on myself. I was shocked by this and walked out of the office. I confirm that Washington and I had never spoken about dildos before.’

Charge 4gi), 4gii), 4giii),

‘The previous day had been healthcare assistant appreciation day, so all the healthcare assistants’ pictures were on the wall. As a part of my cleaning, I was taking these pictures down. Washington took my picture down in front of me and said it was “going to be a long night” and put my picture in his drawer. I thought this meant that he would be looking at my picture all night whilst touching himself in a sexual manner. I was very uncomfortable about this and did not know how to respond. I confirm that I did not give him my picture. About one week later, I took the picture out of Washington’s drawer. It took me about a week to do this, as I only work once a week on the Ward.’

It noted Mr Mukombegumi’s response at the local investigation where he said:

‘No what happened was we were having a conversation and she gave me the picture as a joke and then she said, “put it in your locker” so I put it in my locker and it should be in there.’

‘I did not really think about it at the time I just thought we were having a laugh’

When asked during the local investigation if he said he was glad Colleague A’s picture was laminated Mr Mukombegumi responded no.

Charge 4h)

‘... I had a dress on that day and the way he was saying “[Colleague A], [Colleague A], [Colleague A]”, he looked me up and down and this sounds silly but it made me feel like he could see up my dress the way he looked me up and down, it made me feel really uncomfortable and it was not until a week later where I checked the desk and I saw that it was covered and so I knew he could not but that was just how it made me feel. As I knew he was trying to move me across the computer to see me...’

The panel found Colleague A’s evidence to be clear, credible, and consistent both internally and when compared with her contemporaneous complaint. She described a sequence of inappropriate remarks and behaviour by Mr Mukombegumi on a single day, which together created a sexually charged and degrading atmosphere.

With respect to charge 4a), the panel accepted that when Colleague A asked where Mr Mukombegumi wished to allocate her, he responded “in my bed” or words to that effect. Her account was consistent with her written statement and the disciplinary notes contained in the case bundle.

In relation to charge 4b), the panel found proved that Mr Mukombegumi looked Colleague A’s body up and down. While he did not physically touch her, his manner and gaze were described credibly as suggestive and invasive. The panel was satisfied that this behaviour occurred and was consistent with his other sexually charged comments that day.

With respect to charge 4c), the panel found proved that Mr Mukombegumi told Colleague A to wear ‘*tight, skimpy clothing*’ to the Christmas party. This was supported by her contemporaneous statement at the investigation.

As to charge 4d), the panel accepted that Mr Mukombegumi made a comment about “getting Colleague C drunk and taking her back to a hotel room,” which Colleague A understandably found disturbing and offensive.

The panel further found proved that Mr Mukombegumi told Colleague A to “shut the door and sit on [his] lap and that no one needed to know” (charge 4e); that he made an inappropriate remark about her pains being ‘*from using dildos all night*’ (charge 4f); and that he took down her display photo, made sexually suggestive comments about it being laminated, said it was ‘*going to be a long night*’, and placed it in his drawer (charge 4g).

The panel considered these incidents together as part of a continuous course of inappropriate behaviour occurring within a short space of time.

Accordingly, the panel found all aspects of charge 4a) - g) proved.

Charge 5a)

That your actions at charge 1 were sexually motivated in that:

- a) You were seeking to gain sexual gratification from touching Colleague B

The panel considered all the evidence before it, including the evidence of Colleague B, and Mr Mukombegumi’s written submissions. The panel found her account to be consistent with the broader pattern of sexually motivated behaviour, she attributed to him, which have been found proved.

The panel considered this evidence relevant in assessing his pattern of behaviour and attitude towards female colleagues. It found Colleague B’s evidence to be credible and supportive of a sexually inappropriate workplace dynamic fostered by Mr Mukumbegumi. The panel also took account of Mr Mukombegumi’s denial of making this comment. However, the panel found his general denials and vague explanations were not persuasive.

Taking all the evidence into account and recognising the cumulative effect of repeated inappropriate behaviour and remarks, the panel determined that it was plausible and more likely than not that Mr Mukombegumi’s behaviour towards Colleague B as

described in charge 1 were sexually motivated in that Mr Mukombegumi sought sexual gratification from touching Colleague B.

Therefore, charge 5a) is found proved.

Charge 5b)

That your actions at charge 1 were sexually motivated in that:

- b) You were seeking to pursue a future sexual relationship with Colleague B.

This charge is found proved.

In reaching this conclusion, the panel considered that the cumulative nature of Mr Mukombegumi's conduct, revealed a persistent pattern of personal, sexualised, and inappropriate attention towards Colleague B. The language used in several of the comments were sexual, and the physical conduct, including repeated attempts to touch her inappropriately demonstrated a clear and sustained sexual interest in her.

In this context, the panel was satisfied that the behaviour at charge 1 was not was a course of conduct in pursuit of a future sexual relationship.

Therefore, the panel finds charge 5b) proved.

Charge 6)

Your conduct at charge 2 and/or charge 3 and/or charge 4 was sexually motivated in that you were seeking to pursue a future sexual relationship with Colleague A and/or Colleague B.

This charge is found proved.

In reaching this decision, the panel took into account all the evidence before it as well as the facts found proved in respect of charges 2, 3 and 4.

The panel was satisfied that Mr Mukombegumi's repeated and escalating comments towards both colleagues were sexually motivated. They were not isolated instances of poor humour but reflected a deliberate pattern of conduct directed at two junior female colleagues over several months.

In respect of Colleague B, the panel concluded that Mr Mukombegumi's comments about spanking, marriage, and other explicit comments were sexually motivated and intended to pursue a future sexual relationship.

In respect of Colleague A, the panel found that the remarks as described in charges 3 and 4 were sexually motivated by an intention to seek a sexual encounter with her.

Accordingly, charge 6 was found proved.

Charge 7a and 7b

Your conduct at charge 1 and/or charge 2 and/or charge 3 and/or charge 4:

- a) Was unwanted by Colleague A and/or Colleague B;
- b) Was of a sexual nature;

This charge is found proved in respect of both Colleague A and Colleague B.

In reaching this decision, the panel considered all the evidence before it, including the evidence of Colleagues A and B, who stated that Mr Mukombegumi made inappropriate comments and behaved inappropriately towards them on several occasions.

The panel found their account clear, direct, and consistent across written and oral evidence. They described feeling uncomfortable during these interactions and recalled the interactions becoming more intense as the behaviour progressed.

The panel observed their discomfort and distress whilst giving evidence and found that this was consistent with someone recalling the experience of an unwanted and inappropriate conduct.

The panel therefore concluded that given the nature of Mr Mukombeguni's behaviour, The conduct was unwanted by both Colleagues A and B was of a sexual nature.

Accordingly, charges 7a and 7b are found proved.

Charge 7c and 7d

- a) Was intended to violate Colleague A and/or Colleague B's dignity and/or create an intimidating, hostile, degrading, humiliating or offensive environment for Colleague A and/or Colleague B.
- or
- b) Had the effect of violating Colleague A's and/or Colleague B's dignity and/or creating an intimidating, hostile, degrading, humiliating or offensive environment for Colleague A and/or Colleague B.

In reaching this decision, the panel considered all the evidence before it. It had particular regards to its findings on charges 1,2,3 and 4.

The panel observed first-hand the emotional impact of Mr Mukombeguni's behaviour on Colleague A during her live evidence. She was visibly distressed when recounting events and described the cumulative effect of the conduct on her wellbeing. It also noted the discomfort and embarrassment in Colleague B with reference to Mr Mukombeguni's remarks and conduct in her live evidence and her statements.

The panel considered the power imbalance between Mr Mukombeguni and his very junior colleagues. It concluded that Mr Mukombeguni's persistent remarks and behaviour caused them discomfort and had the effect of violating their dignity, creating a degrading, humiliating or offensive environment for them.

The panel concluded that there was no evidence that Mr Mukombegumi intended to violate their dignity or create an intimidating and hostile environment. It was satisfied that such a finding would be inconsistent with its findings that Mr Mukombegumi wished to pursue a sexual relationship with Colleagues A and B.

Accordingly, the panel found charge 7c) not proved, and charge 7d) proved.

Fitness to practise

Having reached its determination on the facts of this case, the panel then moved on to consider, whether the facts found proved amount to misconduct and, if so, whether Mr Mukombegumi's fitness to practise is currently impaired. 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, Mr Mukombegumi's 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.*'

Mr Cox submitted 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.

Mr Cox identified the relevant paragraphs in the Code supporting his submissions that Mr Mukombegumi's actions amounted to misconduct.

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

20.4 Keep to the laws of the country in which you are practising

Mr Cox submitted that the concerns in this case are sexual in nature and discriminatory on the basis of sex, as Mr Mukombegumi's behaviour was directed towards female colleagues. He submitted that the findings amount to clear instances of sexual harassment and sexually motivated conduct, involving both attempted touching and inappropriate sexualised remarks made to colleagues over a sustained period. Mr Cox therefore invited the panel to find that Mr Mukombegumi's actions represented a serious departure from the standards expected of a registered nurse and amounted to professional misconduct.

Submissions on impairment

Mr Cox 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 case of *Council for Healthcare Regulatory Excellence v (1) Nursing and Midwifery Council (2) and Grant* [2011] EWHC 927 (Admin).

Mr Cox submitted that the nature of the concerns found proved in this case raises serious questions as to whether Mr Mukombegumi is capable of practising kindly, safely and professionally. He invited the panel to consider the risk posed by such conduct.

Mr Cox submitted that there is no evidence before the panel to suggest that Mr Mukombegumi has remediated the concerns identified or developed any meaningful insight into his behaviour. He noted that Mr Mukombegumi continues to deny the conduct found proved and has provided no evidence to demonstrate any attempt at remediation. In the absence of such evidence, Mr Cox submitted that there is nothing before the panel to indicate that Mr Mukombegumi's conduct is unlikely to be repeated, nor that he appreciates why his actions were wrong or the impact they had on others.

Mr Cox submitted that given the current climate of awareness around the sort of behaviour identified in this case, public confidence in the profession would be seriously undermined if a finding of impairment were not made in this case. He submitted that Mr Mukombegumi's fitness to practise is currently impaired on both public protection and public interest grounds.

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, *Shodlock v General Medical Council* [2015] EWCA Civil 769, *Khan v. Bar Standards Board* [2018] EWHC 2184 (Admin), *Solicitors Regulation Authority v. Day and ors* [2018] EWHC 2726 (Admin), *CHRE v NMC and P Grant* [2011] EWHC 927 (Admin), *Cheatle v GMC* [2009] EWHC 645 Admin, *Sawatii v GMC* [2022] EWHC 283 (Admin) and *GMC v Chaudhary* [2017] EWHC 2561.

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 Mr Mukombegumi's actions did fall significantly short of the standards expected of a registered nurse, and that Mr Mukombegumi's actions amounted to a breach of the Code. Specifically:

1) Treat people as individuals and uphold their dignity

To achieve this, you must:

1.1 treat people with kindness, respect and compassion

1.5 respect and uphold people's human rights

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 ..., treating people fairly and without discrimination, bullying, and harassment

20.3 be aware at all times of how your behaviour can affect and influence the behaviour of others

20.5 treat people in a way that does not take advantage of their vulnerability or cause them upset or distress

20.8 act as a role model of professional behaviour for students and newly qualified nurses, midwives and nursing associates to aspire to

The panel appreciated that breaches of the Code do not automatically result in a finding of misconduct.

The panel noted the persistent course of the conduct found proved including inappropriate comments of a sexual nature, suggestive remarks and attempts to touch a colleague. It found that Mr Mukombegumi's conduct amounted to serious misconduct and had a significant impact on both Colleagues A and B. The panel was of the view that this course of conduct represented a clear breach of the fundamental tenets of the profession.

The panel considered that the persistent harassment also had the potential of seriously affecting workplace dynamics and professional trust. It was satisfied that Mr

Mukombegumi abused his position as a registered nurse and as a senior member of staff on the Ward by targeting junior colleagues with repeated, unwanted and sexually motivated behaviour. It found that his conduct demonstrated a serious abuse of power that was sexually motivated.

The panel concluded that Mr Mukombegumi's conduct had a negative effect on workplace culture, created a risk to patients by undermining professional boundaries, and had the potential to damage public trust and confidence in the profession. It found that the behaviour indicated a deep-seated attitudinal issue and a disregard for respect and professional boundaries with junior female colleagues.

The panel went through each of the charges, considering them individually and collectively. It found that each charge represented a course of conduct. Mr Mukombegumi's actions fell significantly short of the conduct and standards expected of a nurse and determined that the charges found proved amounted to serious professional misconduct.

Decision and reasons on impairment

The panel next went on to decide if as a result of the misconduct, Mr Mukombegumi'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 and to maintain professional boundaries. 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 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* 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/ fitness to practise is impaired in the sense that S/He:

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

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

d) ...'

The panel finds that Mr Mukombegumi's conduct impacted Colleagues A and B significantly and had the potential to place patients at risk given the discomfort and distress it had on some of his female colleagues on the Ward. The panel further noted the impact of Mr Mukombegumi's behaviour on the public's trust in the profession, given that some of the reported incidents are said to have occurred in the presence of patients.

Regarding insight, the panel considered that Mr Mukombegumi denied the conduct and had provided no reflective statement or evidence of any attempt to understand the impact of his behaviour on others.

The panel was mindful that Mr Mukombegumi is entitled to maintain a denial. However, the panel found there was no evidence before it of reflection, remediation, training on acceptable workplace behaviour or evidence of his current work record to demonstrate that similar misconduct has not and/or would not be repeated in the future. Accordingly, the panel found no indication that Mr Mukombegumi had developed any insight into the nature or consequences of his behaviour on both Colleagues A and B and the profession. Nor had he taken any steps to improve his practice.

The panel next considered the risk of repetition. It took into account the sexually motivated nature of the misconduct, its persistence over time, and Mr Mukombegumi's lack of insight. The panel also considered Mr Mukombegumi's senior position, and the incremental progression of the behaviour towards Colleagues A and B. It determined that Mr Mukombegumi failed to uphold his responsibility to maintain professional boundaries within the Ward as a senior member of staff.

Given the evidence before it, the panel is of the view that there remains a real risk of repetition. It concluded that Mr Mukombegumi remains liable to repeat the conduct found proved due to his failure to demonstrate that he no longer poses a risk to colleagues and by extension patients. 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 members of the public would be deeply disturbed by the behaviour demonstrated by Mr Mukombegumi towards junior female colleagues. The panel concluded that failing to mark such conduct with a finding of impairment would undermine public confidence in the profession and the NMC as a regulator. The panel, therefore, concluded that a finding of impairment is also necessary in the wider public interest.

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

Sanction

The panel has considered this case very carefully and has decided to make a striking-off order. It directs the registrar to strike Mr Mukombegumi off the register. The effect of this order is that the NMC register will show that Mr Mukombegumi has been struck-off the register.

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

Mr Cox submitted that the overarching objectives of the NMC is to protect the public by promoting and maintaining the health and safety of the public, public confidence and upholding proper professional standards. He directed the panel to the *Guidance on Cases involving sexual misconduct* and noted that such behaviours can pose a risk not only to colleagues but also people receiving care, as well as seriously undermining public trust in the profession and the NMC as a regulator.

Mr Cox submitted that the key aggravating factors in this case include:

- Abuse of a position of trust
- Lack of insight into failings
- A pattern of misconduct maintained over a period of time and in relation to more than one colleague
- The misconduct occurred in the workplace where patients or members of the public could have observed the behaviour, thereby risking harm to the reputation of the profession

Mr Cox drew the panel's attention to the absence of any mitigating factors. He submitted that there was no evidence of remorse or reflection to demonstrate a commitment to safe and professional practice.

Mr Cox referred the panel to the *Sanctions Guidance*, which states that cases involving sexual misconduct are likely to result in more serious outcomes, including removal from the register, because such behaviour is fundamentally incompatible with continued registration. He concluded that the only appropriate and proportionate sanction in this circumstance is a striking-off order.

The panel accepted the advice of the legal assessor.

Decision and reasons on sanction

Having found Mr Mukombegumi'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:

- Abuse of a position of trust
- Lack of insight into failings
- The misconduct was sexually motivated and directed towards junior colleagues
- A pattern of misconduct involving more than one colleague, in the case of Colleague B extending over a period of time and with Colleague A it was the culmination of a worsening situation
- Conduct which potentially placed people receiving care at risk of suffering harm by distracting staff from their duties

The panel found no mitigating features in this case. It acknowledged that Mr Mukombegumi had no previous regulatory history, but the panel placed limited weight on this. [PRIVATE].

The panel had regard to the SG in making its decision, particularly the following statements from SAN-2

'Sexual misconduct is unwelcome behaviour of a sexual nature, or behaviour that can reasonably be interpreted as sexual, which degrades, harms, humiliates or intimidates another. It includes sexual harassment and will be regarded as extremely serious whether or not it occurs in the workplace.'

‘Sexual misconduct is likely to create a risk to people receiving care and to colleagues as well as undermining public trust and confidence in the professions we regulate. A panel should always consider factors such as the duration of the conduct in question, the professional’s relationship or position in relation to those involved and the vulnerabilities of anyone subject to the alleged conduct. Long-term or repeated conduct is more likely to suggest risk of harm, together with conduct involving imbalances of power, cruelty, exploitation and predatory behaviour.’

‘However, as these behaviours can have a particularly severe impact on public confidence, a professional’s ability to uphold the standards and values set out in the Code, and the safety of people receiving care, any nurse, midwife or nursing associate who is found to have behaved in this way will be at risk of being removed from the register. If the panel decides to impose a less severe sanction, they will need to make sure they explain the reasons for their decision clearly and carefully.’

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 Mr Mukombegumi’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 Mr Mukombegumi’s misconduct was not at the lower end of the spectrum and that a caution order 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 impose a caution order.

The panel next considered whether placing conditions of practice on Mr Mukombegumi’s registration would be a sufficient and appropriate response. 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 where the behaviour was attitudinal in

nature. Furthermore, the panel concluded that the placing of conditions on Mr Mukombegumi's registration would not adequately address the seriousness of the misconduct, protect the public nor address the public interest in this case.

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;*
- *The Committee is satisfied that the nurse or midwife has insight and does not pose a significant risk of repeating behaviour;*
- *...; and*
- *...*

The panel noted that the misconduct referenced in this case occurred over two years ago, yet there has been no evidence of insight, remorse, remediation or safe professional practice from Mr Mukombegumi since that time. The panel was of the view that the absence of any meaningful reflection after such a significant period indicates that there is no realistic prospect of remediation. It considered that a temporary removal from the register even for the maximum period of 12 months, would not adequately address the seriousness of the misconduct, nor would it sufficiently maintain public confidence in the profession.

The conduct, as highlighted by the facts found proved, was a significant departure from the standards expected of a registered nurse. The panel noted that the serious breach of the fundamental tenets of the profession evidenced by Mr Mukombegumi's actions is fundamentally incompatible with Mr Mukombegumi remaining on the register.

In this particular case, the panel determined that a suspension order would not be a sufficient, appropriate or proportionate sanction.

Finally, when considering a striking-off order, the panel took note of the following paragraphs of the SG:

- *Do the regulatory concerns about the nurse or midwife raise fundamental questions about their professionalism?*
- *Can public confidence in nurses and midwives be maintained if the nurse or midwife is not removed from the register?*
- *Is striking-off the only sanction which will be sufficient to protect patients, members of the public, or maintain professional standards?*

Mr Mukombegumi's actions were significant departures from the standards expected of a registered nurse and are fundamentally incompatible with his remaining on the register. The panel was of the view that the findings in this particular case demonstrate that Mr Mukombegumi's actions were so serious that to allow him to continue practising would undermine public confidence in the profession and in the NMC as a regulatory body.

Balancing all of these factors and after taking into account all the evidence before it during this case, the panel determined that the appropriate and proportionate sanction is that of a striking-off order. Having regard to the effect of Mr Mukombegumi's actions in bringing the profession into disrepute by adversely affecting the public's view of how a registered nurse should conduct himself, the panel has concluded that nothing short of this would be sufficient in this case.

The panel considered that this order was 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 standard of behaviour required of a registered nurse.

This will be confirmed to Mr Mukombegumi in writing.

Interim order

As the striking-off 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 Mr Mukombegumi's own interests until the striking-off sanction takes effect.

Submissions on interim order

The panel took account of the submissions made by Mr Cox. He submitted that Mr Mukombegumi is currently subject to an interim suspension order which will lapse at the end of this hearing. Mr Cox submitted that, given the seriousness of the concerns and the panel's findings, an interim suspension order for a period of 18 months is necessary in order to protect the public and otherwise in the public interest, to cover the 28-day appeal period before the substantive order becomes effective.

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 proved 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 in order to protect the public and otherwise in the public interest, during any potential appeal period. The panel determined that not to impose an interim order would be inconsistent with its reasons for its decision to strike Mr Mukombegumi off the register, including the risk of repetition which the panel has identified.

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

That concludes this determination.