

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

**Substantive Order Review Hearing
Friday, 10 October 2025**

Virtual Hearing

Name of Registrant:	Dianne Stephenson	
NMC PIN:	1111165S	
Part(s) of the register:	Registered Nurse – Sub Part 1 Adult Nursing (Level 1) – 8 September 2014	
Relevant Location:	Aberdeen	
Type of case:	Lack of Competence	
Panel members:	Graham Thomas Gardner	(Chair, Lay member)
	Mordecai Edziyie Dadzie	(Registrant member)
	Ray Salmon	(Lay member)
Legal Assessor:	Sean Hammond	
Hearings Coordinator:	Dennis Kutyaupipo	
Nursing and Midwifery Council:	Represented by Nicola Kay, Case Presenter	
Dianne Stephenson:	Present and unrepresented	
Order being reviewed:	Conditions of practice order (2 years)	
Fitness to practise:	Impaired	
Outcome:	Conditions of practice order (2 years)	

Decision and reasons on application for hearing to be held in private

Ms Kay made an application that parts of this case may need to be held in private on the basis that proper exploration of your case may involve reference to [PRIVATE]. The application was made pursuant to Rule 19 of the 'Nursing and Midwifery Council (Fitness to Practise) Rules 2004', as amended (the Rules).

You supported this application.

The legal assessor reminded the panel that while Rule 19(1) provides, as a starting point, that hearings shall be conducted in public, Rule 19(3) states that the panel may hold hearings partly or wholly in private if it is satisfied that this is justified by the interests of any party or by the public interest.

The panel decided to hold parts of the hearing which refer to [PRIVATE] in private because it concluded that this was justified by the need to protect your privacy and that this outweighed any prejudice to the public interest in holding those parts of the hearing in public. However, where there is no reference to [PRIVATE] the hearing would be held in public.

Decision and reasons on review of the substantive order

The panel decided to impose a further conditions of practice order for a period of 2 years.

This order will come into effect at the end of 10 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 conditions of practice order originally imposed for a period of three years by a Fitness to Practise Committee panel on 12 October 2020.

The current order is due to expire at the end of 10 November 2025.

The panel is reviewing the order pursuant to Article 30(1) of the Order.

The charges found proved which resulted in the imposition of the substantive order were as follows:

‘That you, a Registered Nurse, failed to demonstrate the standards of knowledge, skill, and judgement required to practise without supervision as a Scrub Nurse in that:

While subject to a Stage 1 Formal Capability Process at Aberdeen Royal Infirmary you failed to complete the following actions / competencies on your Performance Improvement Action Plan:

- 1) Complete all scrub competencies on completion of the action plan;*
- 2) Complete all circulating competencies on completion of the action plan;*
- 3) Demonstrating that you are aware of the appropriate time to complete a surgical count of instruments in accordance with the swab, needle instrument policy;*
- 4) Competently performing the role of Scrub Nurse without the support of a trained nurse acting as your circulating nurse;*
- 5) Communicating appropriately to floor staff;*
- 6) Demonstrate an understanding of different sutures and to give examples of when they could be utilised;*
- 7) ...*
- 8) The concerns at any or all of areas referred to charges 1- 7 above is demonstrated by, but not limited to, those matters set out in ‘Schedule A’*

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

<u>SCHEDULE A</u>		
<i>i</i>	05/04/2018	<i>Your lack of understanding relating to an insufflator machine during an observation scenario relating to scrubbed setting up for a Laparoscopic Cholecystectomy</i>
<i>j</i>	05/04/2018	<i>Your lack of understanding relating to blade sizes during an observation scenario relating to scrubbed setting up for a Laparoscopic Cholecystectomy</i>
<i>l</i>		<i>Your lack of understanding relating to sutures for a Laparoscopic procedure relating to scrubbed setting up for a Laparoscopic Cholecystectomy</i>
<i>o</i>	19/04/2018	<i>You not looking at the screen when the surgeon when putting the laproscopic ports relating to a Laparoscopic Cholestectomy</i>
<i>p</i>	19/04/2018	<i>You not anticipating the needs of the surgeon and /or potential hazards relating to a Laparoscopic Cholestectomy</i>
<i>s</i>	19/04/2018	<i>Your lack of knowledge in relation to sutures'</i>

The original panel determined the following with regard to impairment:

'The panel considered that the facts found proved demonstrated deficiencies in basic nursing competencies. The panel considered that these were basic fundamental tenets of the nursing profession and that although the competencies related to your role as a scrub and circulating nurse, certain elements such as communication with colleagues, would be required in all aspects of nursing.

The panel was mindful that the issue it had to determine was that of current impairment as of today. It therefore had to consider whether you are liable in future to act in such a way as to put patients at unwarranted risk of harm and/or breach fundamental tenets. The decision about the risk of repetition in this case would be informed by consideration of the level of insight you have demonstrated and by whether your lack of competence is capable of being remedied and, if so, whether it has been remedied.

Regarding insight, the panel considered that you have demonstrated some insight as you accepted that you lack competence in certain areas. The panel noted that you have attempted to engage in a RTP course and have not been able to secure a place. However the panel considered that there are other opportunities and avenues that exist in which you are able to engage to demonstrate that you have remediated the concerns in your level of competence. The panel also considered that throughout the proceedings you attempted to allocate blame to your colleagues, to the NMC and to other third parties without accepting responsibility for the concerns in relation to your practice. The panel therefore considered that, whilst you have demonstrated some insight, your insight is still, at this time, developing.

The panel considered whether the three questions in Cohen; whether it could be satisfied that your lack of competence as a band 5 nurse is capable of being remedied, whether it in fact had been remedied and whether it is highly unlikely that your previous lack of competence would be repeated.

The panel is of the view that your level of competence is potentially capable of being remedied, but that it has not been so far. The panel noted that you went through a significant period where you were heavily supported in your role but you failed to successfully complete a Stage 1 Formal Capability Process which was implemented to improve your practice. Further the panel has no evidence of any continued professional development you have undertaken in the form of online or distance learning courses, your attendance at conferences or any reflections on relevant articles. The panel therefore concluded that you have yet to remediate your lack of competence.

The panel is of the view that there is a high risk of repetition based on your limited, albeit developing, insight and lack of remediation, especially given you have not practiced as a registered nurse since April 2018. 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 are to protect, promote and maintain the health safety and well-being of the public and patients, and to uphold/protect the wider public interest, which 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 was of the view that the public would rightly expect a registered nurse to be competent in basic nursing skills and knowledge. The panel determined that, in this case, a finding of impairment on public interest grounds was required.

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

The original panel determined the following with regard to sanction:

'Having found your fitness to practise currently impaired, the panel went on to consider what sanction, if any, it should impose in this case. The panel has borne in mind that any sanction imposed must be appropriate and proportionate and, although not intended to be punitive in its effect, may have such consequences. The panel had careful regard to the Sanction Guidance (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:

- You sought to blame others for your imposition and took no responsibility for your failings;*
- Lack of full insight;*
- Little remediation has taken place; and*
- Should the matters found proved be repeated there is a potential risk of harm to patients.*

The panel also took into account the following mitigating features:

- You have engaged throughout the NMC process; and*
- You have shown some insight into the matters found proved.*

The panel first considered whether to take no action but concluded that this would be inappropriate in view of the wide ranging lack of competence in this 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 ‘there is no risk to the public or to patients requiring the nurse or midwife’s practice to be restricted, meaning the case is at the lower end of the spectrum of impaired fitness to practise’. The panel considered that your lack of competence was not at the lower end of the spectrum and that a caution order would be inappropriate in view of the issues identified. The panel decided that it would be neither proportionate nor in the public interest to impose a caution order.

The panel next considered whether placing conditions of practice on your registration would be a sufficient and appropriate response. The panel is mindful that any conditions imposed must be proportionate, measurable and workable. The panel took into account the SG, in particular:

- Identifiable areas of the nurse or midwife’s practice in need of assessment and/or retraining;*
- Patients will not be put in danger either directly or indirectly as a result of the conditions;*
- The conditions will protect patients during the period they are in force; and*
- Conditions can be created that can be monitored and assessed.*

The panel considered that the lack of competency demonstrated was specific to the role of a scrub nurse, and noted that most of the charges found proved are focused in this specific area. The panel took into account that you never intend to work as a scrub nurse again. However, the panel was of the view that beneath this it could identify fundamental issues in your general nursing practice which includes working within a team, communication, learning and adapting and focusing on important matters.

The panel determined that it would be possible to formulate appropriate and practical conditions which would address the failings highlighted above. The panel accepted that you would be willing to comply with conditions of practice.

Balancing all of these factors, the panel determined that that the appropriate and proportionate sanction is that of a conditions of practice order.

The panel was of the view that to impose a suspension order today would be disproportionate, punitive and would not be a reasonable response in the circumstances of your case.

Having regard to the matters it has identified, the panel has concluded that a conditions of practice order will mark the importance of maintaining public confidence in the profession, and will uphold the standards of practice required of a registered nurse.

The panel determined that the following conditions are appropriate and proportionate in this case:

'For the purposes of these conditions, 'employment' and 'work' mean any paid or unpaid post in a nursing, midwifery or nursing associate role. Also, 'course of study' and 'course' mean any course of educational study connected to nursing, midwifery or nursing associates.'

- 1. You must ensure that you are supervised by a band 6 nurse any time you are working. Your supervision must consist of:*
 - Working at all times while being directly observed by a registered nurse of band 6 or above.*
- 2. You must work with your mentor, line manager, supervisor or their nominated deputy to create a personal development plan (PDP). Your PDP must address the concerns about:*
 - a) Team working*

- b) Communication skills*
- c) Clinical competencies relevant to the role you are working in*

You must:

- a) Send your case officer a copy of your PDP within 6 weeks starting work as a registered nurse.*
 - b) Meet with your mentor, line manager, supervisor or their nominated deputy at least every fortnight to discuss your progress towards achieving the aims set out in your PDP.*
 - c) Send your case officer a report from your mentor, line manager, supervisor or their nominated deputy every 3 months. This report must show your progress towards achieving the aims set out in your PDP.*
- 3. You must keep us informed about anywhere you are working by:*
- a) Telling your case officer within seven days of accepting or leaving any employment.*
 - b) Giving your case officer your employer's contact details.*
- 4. You must keep us informed about anywhere you are studying by:*
- a) Telling your case officer within seven days of accepting any course of study.*
 - b) Giving your case officer the name and contact details of the organisation offering that course of study.*
- 5. You must immediately give a copy of these conditions to:*
- a) Any organisation or person you work for.*
 - b) Any agency you apply to or are registered with for work.*
 - c) Any employers you apply to for work (at the time of application).*
 - d) Any establishment you apply to (at the time of application), or with which you are already enrolled, for a course of study.*
 - e) Any current or prospective patients or clients you intend to see or care for on a private basis when you are working in a self-employed capacity.*

6. *You must tell your case officer, within seven days of your becoming aware of:*
- a) Any clinical incident you are involved in.*
 - b) Any investigation started against you.*
 - c) Any disciplinary proceedings taken against you.*
7. *You must allow your case officer to share, as necessary, details about your performance, your compliance with and / or progress under these conditions with:*
- a) Any current or future employer.*
 - b) Any educational establishment.*
 - c) Any other person(s) involved in your retraining and/or supervision required by these conditions.*

The period of this order is for three years. The panel noted your stated career intentions and concluded that a time frame of three years would allow you to gain employment, considering the Covid-19 pandemic and the delays this could cause, and would also allow for some time to implement and comply with the conditions imposed.'

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 defines fitness to practise as a registrant's ability to practise 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 information before it, including the hearing bundle, testimony from you and the documentation you provided. It has taken account of the submissions made by Ms Kay on behalf of the NMC.

Ms Kay invited the panel to further extend the current conditions of practice order.

Ms Kay provided the panel with the summary of the case and reminded it of the decision of the previous panel. She submitted that there is insufficient evidence before this panel to demonstrate that you have addressed the regulatory concerns or taken sufficient steps to strengthen your practice since the imposition of the order.

Ms Kay submitted that the last reviewing panel found that whilst you had a degree of insight into your lack of competence, it was not fully developed and that remains the position at this hearing. She submitted that you have not provided a detailed reflective account to evidence your developing insight on your lack of competence. She submitted that you have not yet remediated your lack of competence.

Ms Kay acknowledged that you have completed various online training courses, and this shows that you are heading in the right direction. However, these training courses have not been applied in a clinical setting, you have not worked as a registered nurse since 2018, and you have not satisfied the conditions of practice imposed nor have you completed the Return to Practice course. Consequently, you have not demonstrated that you can practice safely, kindly and professionally as a registered nurse. As such, there has been no remediation, and a risk of repetition and the need to protect the public remains.

Ms Kay therefore invited the panel to find current impairment on the grounds of public protection and also otherwise in the wider public interest. She submitted that an informed member of the public would be concerned to know that a nurse who was deemed to lack competence in fundamental areas of nursing seven years ago is permitted to practise without restriction.

Ms Kay invited the panel to consider the NMC Guidance on sanction. She said that a no further action or a caution order would not protect the public or address the wider public interest. Ms Kay submitted that in the circumstances of the case, the panel may conclude that an order preventing you from unrestricted practice is necessary on the grounds of public protection and otherwise in the wider public interest to protect the reputation of the profession, and to declare and uphold proper standards of conduct within the profession.

You gave evidence under affirmation.

You told the panel that you are currently transitioning from working in the community and moving to NHS Fife as a Band 2 clinical support worker as bank staff. You stated that you plan to volunteer alongside the practice education facilitator to assist you in addressing the found concerns and your revalidation.

You explained to the panel that in 2017, you were [PRIVATE] nearer to your revalidation and as a result of [PRIVATE], you forfeited your revalidation. [PRIVATE].

You said that at the time the substantive sanction was imposed, you had a gap in your practice as a nurse and had intended to undertake a Return to Practice course to ensure competency. However, despite you explaining to course providers in applications and interviews that your NMC registration is only valid for the purposes of regulatory proceedings, you were turned down and were advised to obtain employment instead.

You told the panel that the route now available to you is that of revalidation and you are undertaking the necessary steps including efforts to obtain a clinical role, and training to ensure you are competent to revalidate. You also explained that part of your plan is to work closely on a voluntary basis, to allow you the opportunity to address the clinical training requirement for revalidation.

[PRIVATE].

You submitted that you have every intention to return to nursing in a step-by-step manner.

The panel also had regard to your oral evidence.

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 first considered whether your fitness to practise remains impaired by reason of your lack of competence on a wide range of fundamental basic skills. As such, the panel had regard to the case of *Council for Healthcare Regulatory Excellence v (1) Nursing and Midwifery Council (2) and Grant* [2011] EWHC 927, in particular, the test set out in paragraph 76, Mrs Justice Cox referred to Dame Janet Smith's "test" which reads as follows:

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

- a) has in the past acted and/or is liable in the future to act so as to put a patient or patients at unwarranted risk of harm; and/or*
- b) has in the past brought and/or is liable in the future to bring the medical profession into disrepute; and/or*
- c) has in the past breached and/or is liable in the future to breach one of the fundamental tenets of the medical profession; and/or*
- d) has in the past acted dishonestly and/or is liable to act dishonestly in the future.'*

The panel found that limbs a, and c of the test are engaged in this case.

The panel noted that the last reviewing panel found that you had developed a degree of insight into your lack of competence. At this hearing, the panel in its deliberations took into account your training certificates and your oral evidence. The panel acknowledges that you are undertaking some positive steps to remediate your lack of competence through training, engagement with the proceedings, and efforts to obtain clinical employment. However, the panel noted that the training you have undertaken is not directly relevant to the specific deficiencies identified in your practice. Furthermore, you have not provided a written reflection as recommended by the previous panel to evidence further development

of insight, nor have you provided any testimonials or character references. The panel acknowledged that you have not been able to secure employment as a registered nurse, however, you could have provided references from any recent employer. It noted that there is still a lack of understanding into your failings and that in your oral evidence, you deflected issues onto others.

The panel noted that you have not practised as a registered nurse since 2018 and therefore, have not had the opportunity to comply with the conditions of practice and demonstrate that you are able to practise safely, kindly and professionally. It also noted that in your oral evidence you attributed your refuted efforts to undertake a Return to Practice course to the fact that your NMC registration is still valid for these proceedings. Therefore, the panel determined that you have not sufficiently addressed the regulatory concerns found proved and are yet to develop sufficient insight into your failures. The panel concluded that the regulatory concerns against you are serious and wide ranging. In these circumstances, there is a risk of repetition and real risk of harm to the public, should you be permitted to return to practise without restriction.

The panel also noted that due to the finding of a lack of competence and the lack of sufficient information regarding the steps taken towards remediation, the risk you pose to the public remains high. Therefore, public interest and public protection must be upheld until you provide further evidence of your strengthening practice.

The last reviewing panel determined that you were liable to repeat matters of the kind found proved. Today's panel has received no new information that would suggest that this position has now changed. In light of this, the panel determined that you remain liable to repeat matters of the kind found proved, and it 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, a finding of current impairment on public interest grounds is also required.

For these reasons, the panel finds that your fitness to practise remains currently impaired by reason of your lack of competence.

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 and in the absence of sufficient evidence to demonstrate you have remedied the concerns found proved or taken steps to strengthen your practice. The panel decided that it would be neither be proportionate nor in the public interest to take no further action.

The panel 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 the lack of competence identified was not at the lower end of the spectrum and that a caution order would be inappropriate. The panel decided that it would be neither proportionate nor in the public interest to impose a caution order.

The panel next considered whether extending the conditions of practice order on your registration would still be a sufficient and appropriate response. The panel is mindful that any conditions imposed must be proportionate, measurable and workable.

The panel determined that it would be possible to formulate appropriate and practical conditions which could address the failings highlighted in this case. The panel noted that you demonstrated a willingness to comply with conditions of practice, have undertaken

training, continued to engage with the regulator and this sanction would give you the opportunity to strengthen your practice in a clinical setting. The panel referred to your most recent job application made on 8 October and acknowledged that you are actively trying to obtain a clinical role. The panel was of the view that a conditions of practice order would also give you the opportunity to revalidate, undertake a Return to Practice course, and is sufficient to protect patients and the wider public interest.

The panel was of the view that to impose a suspension order or a striking-off order would be disproportionate at this stage and would not be a reasonable response in the circumstances of your case because the charges found proved are remediable through re-training and fully developed insight.

Accordingly, the panel determined, pursuant to Article 30(1) (a) to extend the period for which the current order has effect, for a period of two years to grant you sufficient time to secure a place on a Return to Practise course and thereafter demonstrate that you are safe to practise as a registered nurse. The panel was satisfied that a conditions of practice order is an appropriate and proportionate sanction. The panel considered that the requirements in condition of the current order that you be directly observed at all times by a nurse of Band 6 or above may be unduly onerous. The panel therefore decided to amend condition 1 to require you at all times to be supervised by a Band 6 nurse but to allow you to be directly observed by a Band 5 nurse provided that your supervisor is present. The panel was satisfied that with this amendment the conditions are workable, verifiable, enforceable and are sufficient to protect the public and address the wider public interest considerations in this case.

For the purposes of these conditions, 'employment' and 'work' mean any paid or unpaid post in a nursing, midwifery or nursing associate role. Also, 'course of study' and 'course' mean any course of educational study connected to nursing, midwifery or nursing associates.

1. You must ensure that you are supervised by a band 6 nurse or above any time you are working. Your supervision must consist of:
 - Working at all times while being directly observed by a registered nurse of band 5 or above provided that your supervisor is present.

2. You must work with your mentor, line manager, supervisor or their nominated deputy to create a personal development plan (PDP). Your PDP must address the concerns about:
 - a. Team working
 - b. Communication skills
 - c. Clinical competencies relevant to the role you are working in.You must:
 - d. Send your case officer a copy of your PDP within 6 weeks starting work as a registered nurse.
 - e. Meet with your mentor, line manager, supervisor or their nominated deputy at least every fortnight to discuss your progress towards achieving the aims set out in your PDP.
 - f. Send your case officer a report from your mentor, line manager, supervisor or their nominated deputy every 3 months. This report must show your progress towards achieving the aims set out in your PDP.
3. You must keep us informed about anywhere you are working by:
 - a. Telling your case officer within seven days of accepting or leaving any employment.
 - b. Giving your case officer your employer's contact details.
4. You must keep us informed about anywhere you are studying by:
 - a. Telling your case officer within seven days of accepting any course of study.
 - b. Giving your case officer the name and contact details of the organisation offering that course of study.
5. You must immediately give a copy of these conditions to:
 - a. Any organisation or person you work for.
 - b. Any agency you apply to or are registered with for work.
 - c. Any employers you apply to for work (at the time of application).
 - d. Any establishment you apply to (at the time of application), or with which you are already enrolled, for a course of study.

- e. Any current or prospective patients or clients you intend to see or care for on a private basis when you are working in a self-employed capacity.
6. You must tell your case officer, within seven days of your becoming aware of:
 - a. Any clinical incident you are involved in.
 - b. Any investigation started against you.
 - c. Any disciplinary proceedings taken against you.
7. You must allow your case officer to share, as necessary, details about your performance, your compliance with and / or progress under these conditions with:
 - a. Any current or future employer.
 - b. Any educational establishment.
 - c. Any other person(s) involved in your retraining and/or supervision required by these conditions.

The period of this order is for two years for the reasons set out above.

This conditions of practice order will take effect upon the expiry of the current conditions of practice order, namely at the end of 10 November 2025 in accordance with Article 30(1).

Before the end of the period of the order, a panel will hold a review hearing to see how well you have complied with the order. At the review hearing, the panel may revoke the order or any condition of it, it may confirm the order or vary any condition of it, or it may replace the order for another order.

Any future panel reviewing this case would be assisted by:

- A detailed reflective piece which fully addresses your lack of competence identified;
- Your continued engagement with the NMC, including your attendance at the next review of this order;
- Testimonials from caring roles, paid or unpaid, which you may have undertaken; and

- Testimonials from any other employer;
- Records of any training undertaken to address the regulatory concerns.

This decision will be confirmed to you in writing.

That concludes this determination.