

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

**Substantive Order Review Hearing
Wednesday, 17 September 2025**

Virtual Hearing

Name of Registrant:	Adenike Simiat Balogun-Sadiq
NMC PIN:	9918529E
Part(s) of the register:	Registered Midwife Registered Nurse – Sub Part 1
Relevant Location:	Bromley
Type of case:	Misconduct
Panel members:	Charlie Tye (Chair, Lay member) Fawzia Zaidi (Registrant member) Kitty Grant (Lay member)
Legal Assessor:	Neil Fielding
Hearings Coordinator:	Aisha Charway
Nursing and Midwifery Council:	Represented by Fiona Williams, Case Presenter
Mrs Balogun-Sadiq:	Not present and unrepresented
Order being reviewed:	Suspension order (6 Months)
Fitness to practise:	Impaired
Outcome:	Suspension order (6 months) to come into effect on 6 November 2025 in accordance with Article 30 (1)

Decision and reasons on service of Notice of Hearing

The panel was informed at the start of this hearing that Mrs Balogun-Sadiq was not in attendance and that the Notice of Hearing had been sent to Mrs Balogun-Sadiq's registered email address by secure email on 15 August 2025.

Further, the panel noted that the Notice of Hearing was also sent to Mrs Balogun Sadiq's representative by email on 15 August 2025.

Ms Williams, on behalf of the Nursing and Midwifery Council (NMC), submitted that it had complied with the requirements of Rules 11 and 34 of the 'Nursing and Midwifery Council (Fitness to Practise) Rules 2004', as amended (the Rules).

The panel accepted the advice of the legal assessor.

The panel took into account that the Notice of Hearing provided details of the substantive order being reviewed, the time, date and that the hearing was to be held virtually, including instructions on how to join and, amongst other things, information about Mrs Balogun-Sadiq's right to attend, be represented and call evidence, as well as the panel's power to proceed in her absence.

In the light of all of the information available, the panel was satisfied that Mrs Balogun-Sadiq has been served with notice of this hearing in accordance with the requirements of Rules 11 and 34.

Decision and reasons on proceeding in the absence of Mrs Balogun

The panel next considered whether it should proceed in the absence of Mrs Balogun-Sadiq. The panel had regard to Rule 21 and heard the submissions of Ms Williams who invited the panel to continue in the absence of Mrs Balogun-Sadiq. She submitted that Mrs Balogun-Sadiq had voluntarily absented herself.

Ms Williams referred the panel to the documentation sent on behalf of Mrs Balogun-Sadiq by her representative in an email received on the 2 September 2025, informing the case officer that Mrs Balogun-Sadiq would not be in attendance and will not be represented. Ms Williams suggested to the panel that Mrs Balogun-Sadiq was happy for the hearing to proceed in her absence as stated in the email from the Mrs Balogun-Sadiq's representative.

The panel accepted the advice of the legal assessor.

The panel has decided to proceed in the absence of Mrs Balogun-Sadiq. In reaching this decision, the panel has considered the submissions of Ms Williams, and the advice of the legal assessor. It has had particular regard to *R v Jones and General Medical Council v Adeogba [2016] EWCA Civ 162* and to the overall interests of justice and fairness to all parties. It noted that:

- No application for an adjournment has been made by Mrs Balogun-Sadiq;
- Mrs Balogun-Sadiq has informed the NMC that she has received the Notice of Hearing and confirmed she is content for the hearing to proceed in her absence;
- There is no reason to suppose that adjourning would secure her attendance at some future date; and
- There is a strong public interest in the expeditious review of the case.

In these circumstances, the panel has decided that it is fair to proceed in the absence of Mrs Balogun-Sadiq.

Decision and reasons on review of the substantive order

The panel decided to extend the current suspension order for a further 6 months

This order will come into effect at the end of 6 November 2025 in accordance with Article 30(1) of the 'Nursing and Midwifery Order 2001' (the Order).

The current order is due to expire at the end of 6 November 2025.

The panel is reviewing the order pursuant to Article 30(1)/30(2) of the Order.

The following charges were found proven, charge 3 was proved by admission, and resulted in the imposition of the substantive order:

‘That you, a registered midwife

1. At Princess Royal University Hospital on 17-18 July 2019 failed to treat Mother A with kindness, respect and compassion in that you

- a. On one or more occasions did not respond at all or kindly when Mother A spoke to you*
- b. Did not provide reassurance or encouragement to Mother A during care of her*
- c. When Mother A stated she felt she couldn’t push anymore responded by saying (words to the effect of)*

‘If you don’t push, I’m going to have to cut you’

- d. ... [NOT PROVED]*
- e. When Mother A cried out in pain, responded by saying (words to the effect of)*

‘What’s wrong with you? Are you emotional?’

2. At Princess Royal University Hospital on 17-18 July 2019 failed to ensure that Mother A had adequate pain relief in place before commencing and/or during the suturing process

3. On or around 03 November 2022 completed paperwork for consideration by the Nursing & Midwifery Council (‘NMC’) that stated that you

‘retired on 31 August 202’ (sic)

which was not true as you continued to undertake midwifery shifts at

St Georges Hospital’.

The original panel determined the following with regard to impairment:

‘The panel next went on to decide if as a result of the misconduct, your 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.’

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

b) *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:

- c) 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*
- d) has in the past brought and/or is liable in the future to bring the medical profession into disrepute; and/or*
- e) 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*
- f) ...'*

The panel found limbs a, b and c were engaged in the Grant test. The panel finds that Mother A was put at risk and was caused physical and emotional harm as a result of your misconduct. Specifically, this was caused by your actions in suturing Mother A without sufficient analgesia, failing to act with adequate kindness and compassion and using inappropriate language that caused distress. Your actions as described above and in particular, continuing to suture a patient showing obvious signs of distress would be very likely to cause great concern to members of the public and therefore brought the reputation of the profession into disrepute. Your misconduct had breached the fundamental tenets of the midwifery profession namely failing to act with kindness and compassion or providing adequate pain relief for a patient in a vulnerable situation, giving birth for the first time.

The panel considered that these concerns are remediable. When considering whether the concerns had in fact been remediated the panel took into account your oral evidence, your written reflection, and the evidence in your bundle which included several positive testimonials and certificates of course you had completed.

The panel noted the oral evidence provided by Witness 3 who described you as a reliable midwife who worked hard. Witness 3 confirmed that she did not have any concerns with regards to your practice at the time of this incident.

The panel noted that between 2023 – 2024 you had received several positive testimonials from mothers who had been in your care who thanked you for the care they had received. The panel took into account the relevant CPD courses you completed and which remained valid, relating to communication, conflict resolution and complaint handling. The panel further noted that in your reflection dated 11 March 2025 you stated, “I now practice active listening, paying close attention to body language and unspoken concerns while maintaining good eye contact. Additionally I actively seek clarification from patients to ensure mutual understanding before proceeding with any intervention.” The panel considered that these all demonstrated you had taken some positive steps towards remediating the concerns.

However, the panel noted that your reflection lacked detail and you had not demonstrated a full understanding of why what you did was wrong, how your actions caused harm to Mother A and how this impacted negatively on the reputation of the midwifery profession. The panel noted that you had apologised for your actions but that you placed the blame on others. Your apology was couched in terms of outside factors which you suggested caused the issues (for example acuity on labour ward, the anaesthetist not being able to attend) rather than your actions. The panel further noted that your reflection did not sufficiently describe how you would handle a similar situation differently in the future. In respect of the courses you had undertaken, your reflection failed fully to address what you had learnt from these courses and how they would inform your practice in the future. The panel further noted that you have not been working as a midwife since 2023 and therefore have not had an opportunity to put this learning into practice.

Taking all of this into consideration the panel was of the view that your insight is not yet fully developed, you have not had an opportunity to strengthen your practice and there therefore remained a risk of repetition. 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 public confidence in the profession would be undermined if a finding of impairment were not made in this case. Having regard in particular to the distressing nature of some of your conduct and the very serious level of concern it would engender in any ordinary member of the public were such a finding not to be made.

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 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:

- *Your misconduct caused actual harm to Mother A.*

- *The conduct demonstrated a pattern of behaviour which took place during one episode of intrapartum care but contained multiple incidents.*
- *Your lack of developed insight into your misconduct. The panel does consider this to be an aggravating feature given the passage of time and the opportunity this has afforded for you to reflect upon these matters. However, the panel considers it to be less significant than the other matters identified because you have begun the process.*

The panel also took into account the following mitigating features:

- *You provided positive testimonials and character references.*
- *Absence of previous regulatory findings. Whilst this ordinarily would not be considered a mitigating feature and these are serious matters which led to actual harm and you have not fully developed your level of insight into why this occurred, its impact on Mother A, the profession and how you would approach things differently. However, within the context of this case the panel does consider it has some, limited relevance to the level of risk in this matter. These concerns arose on a single occasion and though there was a pattern of behaviour over the course of these events which lasted a considerable period of time it has not been suggested that anything of this sort has happened before (over a long career) or since. To that extent and that extent only the panel does view it as a positive feature of your case. It does not however, affect the potential impact on public confidence arising from these matters because of the nature and extent of the harm caused.*

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, the public protection issues identified and that actual harm was caused, an order that does not restrict your practice would not be appropriate in the circumstances. The SG states that a caution order may be appropriate where 'the case is at the lower end of the spectrum of impaired fitness

to practise and the panel wishes to mark that the behaviour was unacceptable and must not happen again.' The panel considered that your misconduct was not at the lower end of the spectrum and that a caution order would be inappropriate in view of the issues identified. The panel decided that it would be neither proportionate nor in the public interest to impose a caution order.

The panel next considered whether 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 is of the view that in the absence of fully developed insight there are currently no practical or workable conditions that could be formulated, given the nature of the charges in this case. The misconduct identified in this case was not something that can be addressed through retraining given you have not yet demonstrated fully developed insight.

Furthermore, the panel concluded that the placing of conditions on your registration would not adequately address the seriousness of this case and would not protect the public nor address the public interest concerns due to the harm caused to Mother A.

The panel then went on to consider whether a suspension order would be an appropriate sanction. The SG states that a 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;*
- ...*
- ...*

The panel was of the view that your misconduct, though serious because it led to actual harm to Mother A, was a course of conduct which took place during a single episode of care. The panel was satisfied that there was no evidence of harmful deep-seated personality or attitudinal problems. The panel saw no evidence that you had repeated your misconduct and noted that you had shown the beginnings of insight into the issues highlighted by these concerns. The panel further noted that you have had an unblemished career of 22 years prior to this incident, and you have worked unrestricted since this incident until 2023 without the misconduct being repeated. The panel considered these factors do reduce the risk of repetition and thus the likelihood of further harm being caused, though a risk remains. The public interest also requires the panel to take account of the impact of such behaviour on the standing of the profession and public confidence. The panel considered that your misconduct would cause the public significant concern and therefore the panel takes the view that having regard to the continuing level of risk you present and the public interest a suspension order is proportionate in all the circumstances.

The panel was satisfied that in this case, the misconduct was not fundamentally incompatible with remaining on the register.

The panel went on to consider whether a striking-off order would be proportionate but, taking account of all the information before it, and of the mitigation provided, the panel concluded that it would be disproportionate. Whilst the panel acknowledges that a suspension may have a punitive effect, it would be unduly punitive in your case to impose a striking-off order.

Balancing all of these factors the panel has concluded that a suspension order for a period of 6 months would be the appropriate and proportionate sanction, as it would reflect the seriousness of the misconduct and allow you sufficient time to develop your insight.

The panel noted the hardship such an order will inevitably cause you. However, this is outweighed by the public interest in this case.

The panel considered that this order is 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 midwife.

The panel determined that a suspension order for a period of 6 months was appropriate in this case to mark the seriousness of the misconduct.

At the end of the period of suspension, another panel will review the order. At the review hearing the panel may revoke the order, or it may confirm the order, or it may replace the order with another order.

Any future panel reviewing this case would be assisted by:

- *A reflective piece using a structured reflective cycle.*
- *Evidence of professional development, including documentary evidence of any training completed, relevant articles read, or any other learning undertaken.*
- *Testimonials from a line manager or supervisor from paid or voluntary work.*
- *Your attendance at a future review.'*

Decision and reasons on current impairment

The panel has considered carefully whether, Mrs Balogun-Sadiq's fitness to practise remains impaired. Whilst there is no statutory definition of fitness to practise, the NMC has defined fitness to practise as a registrant's suitability to remain on the register without restriction. In considering this case, the panel has carried out a comprehensive review of the order in light of the current circumstances. Whilst it has noted the decision of the last panel, this panel has exercised its own judgement as to current impairment.

The panel has had regard to all of the documentation before it, including the NMC bundle, and the documents supplied by Mrs Balogun-Sadiq's representative, which included certificates completed by Mrs Balogun-Sadiq.

It has taken account of the submissions made by Ms Williams on behalf of the NMC, who invited the panel to consider a number of options available to them. Ms Williams highlighted to the panel that the persuasive burden is on Mrs Balogun-Sadiq to show that she is no longer impaired. Ms Williams submitted that as there was limited information, provided by Mrs Balogun-Sadiq to show that she is not impaired, the most appropriate sanction would be to extend the current order.

Ms Williams referred the panel to the bundle and the background of the case, she reminded the panel of the previous panel's decision-making process.

She reminded the panel that the previous panel found misconduct and impairment and the guidance they considered, from *Roylance v General Medical Council (No. 2) [2000] 1 AC 311*. Ms Williams highlighted to the panel that Mrs Balogun-Sadiq's actions fell significantly short of the standards expected of a registered midwife, and that her actions amounted to a breach of the Code.

Ms Williams then reminded the panel of the previous panel's decision on impairment, she referred the panel to the previous panel's consideration, and that they noted, that midwives occupy a position of privilege and trust in society and are expected at all times to be professional, and patients should be able to trust midwives with their lives.

Ms Williams also referred the panel to the previous panel's consideration of the test in the case of *CHRE v NMC* and *Grant* in reaching its decision. Specifically, the reference to the test set out by Dame Janet Smith. She highlighted to the panel that the limbs a, b and c were satisfied in the *Grant* test. The panel found not only that Mother A was put at risk, but that physical and emotional harm was caused because of Mrs Balogun-Sadiq's misconduct. The previous panel was of the view that Mrs Balogun-Sadiq's misconduct had breached the fundamental tenets of the midwifery profession, failing to act with kindness and compassion and providing adequate pain relief for a patient in a vulnerable situation.

Ms Williams further noted that the previous panel found that Mrs Balogun-Sadiq's reflection lacked detail in that she had not demonstrated an adequate understanding of her actions and how these actions caused harm to Mother A, and how this had a negative impact on the midwifery profession. Ms Williams further stated that the previous panel

found that Mrs Balogun-Sadiq's apology placed blame on external factors. She also highlighted that the previous panel noted that Mrs Balogun-Sadiq's reflection did not address how she would address these concerns if they arose in the future.

Ms Williams made reference to the certificates that were completed by Mrs Balogun-Sadiq in advance of today's hearing. She stated that Mrs Balogun-Sadiq did not address what she has learnt from these courses and how they would assist her in the future.

Ms Williams reminded the panel that the previous panel took into account the following aggravating features.

- Mrs Balogun-Sadiq's misconduct caused actual harm to Mother A.
- The conduct demonstrated a pattern of behaviour which took place during one episode of intrapartum care but contained multiple incidents.
- Mrs Balogun-Sadiq's lack of developed insight into her misconduct.

In respect of the lack of developed insight, Ms Williams submitted that the previous panel considered this to be an aggravating feature given the duration of time, and the opportunity this afforded for Mrs Balogun-Sadiq to reflect upon these matters. However, the previous panel considered this to be less significant than the other matters identified by Mrs Balogun-Sadiq during the process.

The previous panel also took into account the following mitigating features:

- Mrs Balogun-Sadiq provided positive testimonials and character references.
- The fact that there were no previous regulatory findings.

Ms Williams invited today's panel to consider that Mrs Balogun-Sadiq's fitness to practise is still impaired on the grounds of public interest and public protection. Ms Williams acknowledged that Mrs Balogun-Sadiq provided certificates of completed courses. Ms

Williams made reference to the previous panel's observations who confirmed that a reviewing panel would be assisted by:

- A reflective piece using a structured reflective cycle.
- Evidence of professional development, including documentary evidence of any training completed, relevant articles read, or any other learning undertaken.
- Testimonials from a line manager or supervisor from paid or voluntary work.
- Mrs Balogun-Sadiq's attendance at a future review.

Ms Williams submitted to the panel that the certificates provided did not show further insight or demonstrate what was learnt. Mrs Balogun-Sadiq is also not in attendance to inform the panel of any updates or explain the courses undertaken. Ms Williams highlighted to the panel that there were no testimonials or current information with regard to Mrs Balogun-Sadiq's work or voluntary roles. Ms Williams stated to the panel that the lack of information provided by Mrs Balogun-Sadiq meant that this panel is limited in what it can consider, Ms Williams made reference to the email provided by Mrs Balogun-Sadiq's representative which she stated on Mrs Balogun-Sadiq's behalf that she is conceded in all likelihood the order would continue.

The panel also had regard to Mrs Balogun-Sadiq's evidence supplied by an email from her representative on her behalf.

The panel heard and accepted the advice of the legal assessor.

In reaching its decision, the panel was mindful of the need to protect the public, maintain public confidence in the profession and to declare and uphold proper standards of conduct and performance.

The panel considered whether Mrs Balogun-Sadiq's fitness to practise remains impaired.

The panel noted that the original panel found that Mrs Balogun-Sadiq had insufficient insight.

At this hearing the panel felt that Mrs Balogun-Sadiq had not provided enough evidence due a lack of a reflections and testimonials.

In its consideration of whether Mrs Balogun-Sadiq has taken steps to strengthen her practice, the panel took into account the additional relevant training Mrs Balogun-Sadiq has undertaken, which included:

- RCM Introduction to Reflection.
- RCM Personalised Care.
- RCM Human Rights in Maternity Care: Advocating for Women.
- RCM Human Factors – reducing errors in maternity care.
- RCM Health inequalities: the power of maternity care.
- RCM Delivering unexpected news in pregnancy.
- RCM Promoting dignity respectful and compassionated care in midwifery practice.
- RCM Managing change for midwifery managers.
- RCM Ethical practice for maternity care.
- RCM Epidurals in labour.

However, the panel determined that the original concerns had not been addressed, although the panel acknowledge the relevance of the certificates provided. However, due to the lack of the meaningful reflections, and no positive testimonials there is insufficient evidence of developing insight. The panel concluded that Mrs Balogun-Sadiq's progress was minimal, and her insight is incomplete, the panel was of the view that Mrs Balogun-Sadiq had not taken the adequate steps to address the regulatory concerns.

The original panel determined that Mrs Balogun-Sadiq was liable to repeat matters of the kind found proved. Today's panel has received information of training undertaken; the panel did not consider that this information, was adequate to address the concerns coupled with the lack of evidence.

The panel considered the original panel's finding:

‘The panel finds that Mother A was put at risk and was caused physical and emotional harm as a result of your misconduct.’

The panel also referred to the facts and the issue of Mrs Balogun-Sadiq not administering pain medication to Mother A, the panel considered this was serious. In light of this, this panel determined that Mrs Balogun-Sadiq is still liable to repeat matters of the kind found proved because she had not yet fully addressed the underlying concerns. The panel therefore decided that a finding of continuing impairment is necessary on the grounds of public protection.

The panel has borne in mind that its primary function is to protect patients and the wider public interest which includes maintaining confidence in the midwifery profession and upholding proper standards of conduct and performance.

The panel considered that a fully informed member of the public would be concerned that the NMC is failing in its duty to maintain professional standards should Mrs Balogun-Sadiq be permitted to return to unrestricted practice. The public should expect that registered professionals will only be permitted to practice without restriction, when it is safe for them to do so. The panel was of the view the public should expect that if there are serious regulatory concerns about a Registrant, that such concerns will be addressed before they return to unrestricted practice. The public’s faith in the midwifery profession would be undermined if they thought that serious regulatory concerns were not being fully addressed, professionals were being allowed to return to unrestricted practice despite the risk of harm. On that basis the panel determined that, in this case, a finding of continuing impairment on public interest grounds is also required.

For these reasons, the panel finds that Mrs Balogun-Sadiq’s fitness to practise remains impaired.

Decision and reasons on sanction

Having found Mrs Balogun-Sadiq’s fitness to practise remains currently impaired, the panel then considered what, if any, sanction it should impose in this case. The panel noted that its powers are set out in Article 30 of the Order. The panel has also taken into account

the 'NMC's Sanctions Guidance' (SG) and has borne in mind that the purpose of a sanction is not to be punitive, though any sanction imposed may have a punitive effect.

The panel first considered whether to take no action but concluded that this would be inappropriate in view of the seriousness of the case. The panel decided that it would be neither proportionate nor in the public interest to take no further action.

It then considered the imposition of a caution order but again determined that, due to the seriousness of the case, and the public protection issues identified, an order that does not restrict Mrs Balogun-Sadiq'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 Mrs Balogun-Sadiq's misconduct was not at the lower end of the spectrum, and that a caution order would be inappropriate in view of the issues identified. The panel decided that it would be neither proportionate nor in the public interest to impose a caution order.

The panel next considered whether a conditions of practice on Mrs Balogun-Sadiq's registration would be a sufficient and appropriate response. The panel is mindful that any conditions imposed must be proportionate, measurable and workable. The panel bore in mind the seriousness of the facts found proved at the original hearing and concluded that a condition of practice order would not adequately protect the public or satisfy the public interest. The panel considered the nature of Mrs Balogun-Sadiq's role as a midwife and felt that there would not be any workable conditions that could be imposed.

The panel considered the imposition of a further period of suspension. It was of the view that a suspension order would allow Mrs Balogun-Sadiq further time to fully reflect on her previous misconduct. The panel concluded that a further six month suspension order would be the appropriate and proportionate response and would afford Mrs Balogun-Sadiq adequate time to further develop her insight and take steps to strengthen her practice.

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

would provide Mrs Balogun-Sadiq with an opportunity to engage with the NMC to provide evidence of further insight and strengthened practice. The panel had regard to NMC guidance 'REV-2a' on substantive order reviews and felt that 6 months was adequate time for Mrs Balogun-Sadiq to reflect and strengthen her practice.

It considered this to be the most appropriate and proportionate sanction available. The panel felt that a strike off would have had a punitive effect and was of the view that Mrs Balogun-Sadiq's concerns were remediable. The panel stated that the onus was on Mrs Balogun-Sadiq and for her to show she is fit to practise safely. The panel considered that this was an isolated incident and that Mrs Balogun-Sadiq should be given the opportunity to show she has addressed these concerns.

This suspension order will take effect upon the expiry of the current suspension order, namely the end of 6 November 2025 in accordance with Article 30(1)

Before the end of the period of suspension, another panel will review the order. At the review hearing the panel may revoke the order, or it may confirm the order, or it may replace the order with another order.

Any future panel reviewing this case would be assisted by:

- Evidence of any further professional development including documentary evidence of additional courses.
- Testimonials from a line manager or supervisor that detail current work or voluntary positions.
- A structured reflective piece which critically examines the regulatory concerns to include what Mrs Balogun-Sadiq would do differently if faced with a similar situation.
- A reflective piece on what Mrs Balogun-Sadiq has learnt from the training she has done, how it will inform her practice in the future and how it addresses the regulatory concerns.
- Mrs Balogun-Sadiq's attendance at a future review hearing.

This will be confirmed to Mrs Balogun-Sadiq in writing.

That concludes this determination.