Nursing and Midwifery Council
Fitness to Practise Committee

Substantive Hearing
Wednesday, 10 September 2025 – Wednesday, 17 September 2025

Virtual Hearing

Name of Registrant:	Amanda Doe
NMC PIN:	08G2461E
Part(s) of the register:	Registered Nurse Nursing – RNC – October 2008
Relevant Location:	Devon
Type of case:	Misconduct
Panel members:	John Kelly (Chair, Lay member) Sally Kitson (Lay member) Sally Thomas (Registrant member)
Legal Assessor:	Lucia Whittle-Martin
Hearings Coordinator:	John Kennedy
Nursing and Midwifery Council:	Represented by Caitlin Connor, Case Presenter
Ms Doe:	Present and represented by Natasha Lake, (instructed by, Royal College of Nursing)
Facts proved:	Charges 1, 2, and 3
Fitness to practise:	Impaired
Sanction:	**Suspension order (12 months)**
Interim order:	**Interim suspension order (18 months)**

Application to amend charge

Ms Connor, on behalf of the Nursing and Midwifery Council (NMC) made an application to amend charge 2, schedule 1, to remove schedule 1 (iii). She made this application on the basis that the words in this schedule have no independent and separate evidence other than that which is relied on for other words in the schedule.

Ms Lake, on your behalf, supported this amendment.

The legal assessor referred the panel to Rule 28 of the nursing and midwifery council (fitness to practise) Rule 2004 (as amended), (the Rules).

The panel accepted the amendment on the basis of the submissions from both parties and because the amendment can be made without disadvantage to you.

> Schedule 1
> *i. Black Bitch*
> *ii. Stupid Black Bitch*
> ~~*iii. She's such a black bitch*~~
> ***iii*** ~~*v*~~*. She wouldn't like me calling Colleague A a black bitch then, would she?*

Details of charge

That you, whilst employed as a Band 6 Nurse at Torbay Hospital:

1. On or around 17 November 2022 referred to Colleague A as a "Black Bitch";

2. On dates unknown made one or more of the comments set out in Schedule 1 in relation to Colleague A

3. Your conduct at charge 1 and/or 2 was racially motivated.

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

Schedule 1
i. Black Bitch
ii. Stupid Black Bitch
iii. She wouldn't like me calling Colleague A a black bitch then, would she?

Documentation

At the outset of the hearing, the panel was addressed by both parties that it had been sent some unredacted documents in error as part of the NMC exhibits. This included information that should not have been before the panel, namely the results of the internal local investigation. On day 1 of the hearing a new version was circulated with the agreed redactions applied.

There was no application for the panel to recuse itself and it determined that as a professional panel it was able to put out of its mind any information that should have been redacted.

Decision and reason on holding the hearing in private

At the conclusion of the NMC case Ms Lake made an application under Rule 19 to hold part of the hearing in private. She submitted that during your oral evidence you will touch on matters relating to your private life and health, and that these matters should be held in private session.

Ms Connor made no objection to the application.

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

The panel decided to hold those parts of the hearing that concern matters involving your private life and health in private.

Background

The charges arose whilst you were employed as a registered nurse by Torbay and South Devon NHS Hospital Trust (the Trust). You were working as a registered band 6 nurse in 2022 when it is alleged that you made racist and racially motivated statements about Colleague A.

The Trust commissioned an investigation into the racist comments allegedly made by you and into the wider allegations of the working culture that were present in the ward at the time. You were referred by the Trust to the NMC in 2023.

Decision and reasons on facts

Ms Lake informed the panel that you make full admissions to charge 1, and that you admit charge 3 as it relates to charge 1.

The panel therefore finds charge 1 proved in its entirety, and charge 3 in respect of charge 1 proved by way of your admissions.

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 Ms Connor and by Ms Lake.

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:

- Witness 1: Associate Director of Nursing and Professional Practice at the Trust who commissioned the investigation into alleged concerns
- Witness 2: Band 5 nurse who worked for the Trust
- Witness 3: Band 5 nurse who worked for the Trust
- Witness 4: Band 5 nurse who worked for the Trust

The panel also heard evidence from you under oath.

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 Ms Lake.

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

Charge 2

"On dates unknown made one or more of the comments set out in Schedule 1 in relation to Colleague A
Schedule 1
i. Black Bitch

ii. Stupid Black Bitch

iii. She wouldn't like me calling Colleague A a black bitch then, would she?"

This charge is found proved in relation to one occasion in Schedule 1 (i)

Schedule 1

In relation to all of the comments alleged in schedule 1 you told the panel during your oral evidence that you have no recollection of making such comments at any time. You added that the comments listed are so significant that had you used them at all or used them multiple times, you are confident that you would have remembered doing so.

i. Black Bitch

The panel noted that in considering this alleged comment it is determining if you used this phrase on a date other that 17 November 2022, that being the date subject to charge 1 to which you have admitted. The panel considered that the primary evidence for this charge comes from Witness 2.

The panel noted the evidence of Witness 4 who said in their witness statement:

> *'I have heard Amanda use the word "black bitch" before but never knew the context as I was only passing by. I don't know if these words were ever said to anyone.'*

However, it placed little weight on this given the lack of detail on when or where the alleged words were said and the lack of clarity that you made the alleged comments towards Colleague A.

In considering the evidence of Witness 2, the panel noted that they have a number of accounts of events as follows:

- Local email to management dated 15 January 2023;
- Local interview conducted as part of the Trust's investigation dated 12 June 2023;
- NMC statement dated 6 March 2024;
- NMC statement dated 11 June 2025; and
- Oral evidence at this hearing.

The panel noted that in their oral evidence, during cross examination Witness 2 acknowledged that their recollections may have become blurred over time. They added that having been spoken to by a number of people and being required to make numerous statements in relation to these matters, some of their recollections were *"jumbling into one*". Witness 2 told the panel that regardless of this the responses they gave were truthful and reflect their best recollections at the time they were made. Therefore, the panel considered that more weight should be placed on Witness 2's earlier accounts, which were more contemporaneous to the events alleged and therefore less likely to have been affected by the passage of time.

In their email dated 15 January 2023 Witness 2 referred to two alleged incidents when they stated that you used the phrase *"black bitch"* to refer to Colleague A. In the course of the investigation meeting and in Witness 2's witness statement, dated 6 March 2024, there is significantly more detail provided by the witness as to the first alleged incident. Witness 2 states that the first incident took place on an unknown date around December 2022 or January 2023 and took place while you were sat at the nurses' station writing a note. By contrast, in Witness 2's first witness statement Witness 2 said, in relation to the second alleged incident,

> *'Despite completing my local statement and being interviewed at local level I am unable to recall any details of the second time I heard Amanda refer to* [Colleague A] *as a "black bitch".'*

The panel had sight of an agreed extract of the shift rota detailing when you and Witness 2 both worked at the Trust between 19 December 2022 and 11 January 2023. This rota details that the only time you and Witness 2 were on shift together was the nightshift of 30 December 2022. Witness 2 stated in their witness statements that there were two incidents and they were on separate occasions. The panel concluded that it is unlikely that Witness 2 was referring to two incidents on one shift. The evidence provided by the rota, combined with Witness 2's inability to recall any detail of the second alleged incident, led the panel to conclude on the balance of probabilities that there was only one incident witnessed by Witness 2.

In considering the precise words used by you in the first incident referred to by Witness 2 the panel noted that in their email to management dated 15 January 2023, Witness 2 refers to you using the words "*black bitch*". During the local interview record of 12 June 2023 Witness 2 states that the words you used were *'"stupid black bitch" or something like that'*. Witness 2 went on to say that they heard you twice use the term "*black* bitch".

In their witness statement dated 6 March 2024 Witness 2 refers to you using the phrase "*black bitch*" on two occasions and goes on to say that the phrase used was "*stupid black bitch*". In their witness statement dated 11 June 2025 Witness 2 then claims that they heard you refer to Colleague A as a "*stupid black bitch"* on two occasions, and that these were the exact words used. During their oral evidence Witness 2 was unable to add further detail to the precise words allegedly used by you. The panel bore in mind Witness 2's own evidence in relation to their recollections and therefore gave more weight to the more contemporaneous documentary evidence. In their account of the 15 January 2023, Witness 2 is clear that the phrase used was "*black bitch*". During the local interview, dated 12 June 2023, Witness 2 states you used the phrase "*stupid black bitch*" but qualified this by adding *'or something like that'*. It is only in their later evidence in NMC statements that Witness 2 emphasises that the phrase used was "*stupid black bitch*". However, in their oral evidence Witness 2 stated:

> *"I don't know if I can be certain about the phrase 'stupid black bitch'".*

However, Witness 2 remained clear that the phrase "*black bitch*" was used.

In light of the above the panel was satisfied on the balance of probabilities, that Witness 2 overheard you speaking on one occasion when you used the phrase "*black bitch*" in relation to Colleague A, but was not satisfied that this occurred on any other occasion, or that the phrase overhead included the word "*stupid"*. Therefore, the panel finds schedule 1 i) proved on that basis.

Schedule 1
ii. Stupid Black Bitch

The panel noted that the evidence relied on to prove that you used this phrase is the same as the evidence referred to above.

The panel has concluded that there was only one incident, and that the words used during that incident were more likely to have been "*black bitch*".

Therefore, the panel finds schedule 1 ii) not proved.

Schedule 1
iii. She wouldn't like me calling Colleague A a black bitch then, would she?

The panel considered that the evidence for this phrase is from Witness 3 who recounts what Witness 2 is alleged to have told them. Their account is hearsay evidence and therefore the panel approached it with caution. In their oral evidence Witness 2 did not recall you making this comment in their presence, nor recounting it to Witness 3. Witness 2 made no mention of this phrase being used by you in any of their evidence.

Therefore, the panel finds schedule 1 iii) not proved.

Charge 3

> "Your conduct at charge 1 and/or 2 was racially motivated.
> subject to ongoing NMC proceedings."

This charge is found proved

The panel in considering this charge noted that you admitted this charge in relation to your conduct at charge 1. Therefore, the panel's findings only relate to the second clause of this charge, namely as it relates to your conduct at charge 2.

The panel considered the test for racial motivation as set out in the case *Lambert-Simpson v HCPC* [2023] EWHC 481 (Admin). In regard to the first part of that test the panel determined that the use of the phrase "*black*" is significantly and clearly referable to race.

In considering the second limb of the test, the panel concluded that the phrase "*black bitch*" is one that is explicitly clear it is intending to show hostility towards Colleague A, as distinguished by their race.

Therefore finding both limbs engaged the panel is satisfied that your conduct in relation to charge 2 was racially motivated.

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 your 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, your fitness to practise is currently impaired as a result of that misconduct.

Submissions on misconduct

You gave evidence under oath.

Ms Connor invited the panel to take the view 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.

Ms Connor identified the specific, relevant standards where your actions amounted to misconduct. She submitted that your actions were a significant falling short of the expected standards of a registered nurse and breached the fundamental tenets of the nursing profession. She outlined sections of the Code, including 20.2, 20.8, and 20.10 that your actions breached, and she invited the panel to find that your actions do amount to misconduct.

Ms Lake submitted that it is accepted that your actions do amount to misconduct.

Submissions on impairment

Ms Connor 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).

Ms Connor submitted that your actions are a significant departure from the expected standards of a registered nurse, a breach of a fundamental tenet of the nursing profession, and have brought the profession into disrepute. She submitted that it is open for the panel to find that there was a risk of harm to patients, and that your misconduct has significantly damaged the reputation of the nursing profession. She invited the panel to find that your practice is currently impaired. Ms Connor made reference to the case of *PSA v HCPC and Roberts* [2020] EWHC 1906 (Admin) and sought to distinguish it from the fact of your case.

Ms Lake submitted that whilst you acknowledged in your oral evidence that there was a risk of potential harm to patients should they have overheard your racially motivated comments there is no evidence that this has actually happened. She submitted that since the incident you have remained working as a registered nurse and there have been no further concerns raised about your practice and there has been no actual harm caused. She submitted that you have undertaken extensive relevant training courses and reflected on how to embed antiracist training into your practice. She submitted that you have obtained a number of positive testimonials from colleagues you have worked with since the incident, and who were aware of the NMC investigation.

Ms Lake submitted that given this developed insight and reflection there is no risk of repetition. She submitted that the public confidence would be satisfied given your engagement with the process and the remedial steps you have voluntarily undertaken, above and beyond what was expected. She submitted that your practice is not currently impaired and invited the panel to have reference to the case of *PSA v HCPC and Roberts* in reaching its decision.

The panel accepted the advice of the legal assessor which included reference to a number of relevant judgments. These included: *PSA v HCPC and Roberts, CHRE v NMC and Grant, Roylance v General Medical Council* (No 2) [2000] 1 A.C. 311, *Yeong v GMC* [2009] EWHC 1923 (Admin), and *Cohen v GMC* [2008] EWHC 581 (Admin).

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 your actions fell significantly short of the standards expected of a registered nurse, and that your actions amounted to a breach of the Code. Specifically:

> ***'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*
>
> *20.3 be aware at all times of how your behaviour can affect and influence the behaviour of other people*
>
> *20.5 treat people in a way that does not take advantage of their vulnerability or cause them upset or distress*
>
> *20.7 make sure you do not express your personal beliefs (including political, religious or moral beliefs) to people in an inappropriate way*

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. However, the panel was of the view that your actions in relation to each charges admitted or found proved were significant departures from the expected standards of a registered nurse. The panel noted that you accept that your actions amount to misconduct. The panel considered that your actions were not a single isolated event but took place on two occasions.

The panel found that your actions fell seriously short of the conduct and standards expected of a nurse and amounted to misconduct.

Decision and reasons on 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, and the judgment of Mrs Justice Cox in the case of *CHRE v NMC and Grant.* The panel considered that limbs *a, b*, and *c* of the test set out in *Grant* are engaged.

The panel finds that patients were put at risk of harm. The panel considered that while no actual harm was caused there was a significant risk of harm. Your comments were made in a public area of the children's ward that could have easily been overheard by patients, including children, young people and their families, or a member of the public. The panel considered that should a patient have heard your comments, especially if they were from an ethnic minority community, it could have negative impact including deterring them from seeking health care in the future and as a result place them at risk of harm. During your oral evidence, you acknowledged that making racist comments presents a risk to patient safety.

The panel also concluded that your misconduct in making two racially motivated comments towards a colleague had breached a fundamental tenet of the nursing profession, relating to promoting professionalism and trust, and brought its reputation into disrepute.

The panel went on to consider whether your misconduct can easily be addressed, whether it has been addressed, and is it highly unlikely to be repeated.

The panel considered that your misconduct is capable of being remediated. However, it noted that using racist words on two occasions indicated an attitudinal problem which may make remediation more difficult.

In considering the extent to which your misconduct has been addressed, the panel took into account all of the evidence before it including the training that you have undertaken, your wider reading, testimonials, your expressions of regret and remorse, and your reflections.

The panel noted the extensive training you have undertaken in relation to equality and diversity, including antiracism, and how you have endeavoured to apply this in your practice and the wider workplace. In addition, the panel heard that you have carried out self-motivated research into relevant subject areas.

The panel took account of your testimonials, all of which are positive and speak of your good character and capability as a registered nurse. The panel found that the testimonials were from people who knew about the NMC charges and the ongoing fitness to practice process.

During your evidence you told the panel of your genuine regret and remorse for your actions on numerous occasions. Your remorse has not extended to offering or attempting to offer direct apologies to those impacted by your misconduct. You told the panel that at

an early stage of the Trust investigation you were instructed not to contact the colleagues affected. Whilst this may have been the case at that time, the panel considered that there may have been scope for you to subsequently offer apologies through the Trust, if appropriate. When pressed on this you told the panel you had sought mediation but that others did not want to engage. However, the panel was of the view that mediation is different to an apology.

The panel considered that you have begun to develop insight into your misconduct but that it is not yet comprehensive. Whilst you are able to articulate some of the potential impact that your misconduct may have had on your colleagues, the panel considered that this was phrased in a way that lacked depth and understanding. In particular in your reflections and oral evidence, you showed little understanding of the power imbalance between you as a band 6 sister and your junior colleagues. In your reflections you stated:

> *'I wish that if colleagues felt I was speaking out of line that they would have either discussed it with or been able to speak to someone to discuss it with me.'*

The panel took the view that this ignores the difficult situation that you placed your colleagues in and shifts responsibility for regulating your own behaviour onto others. It concerned the panel that you did not consider there to be a power imbalance.

The panel took account of your admission to charge 1 and 3, your acceptance of the panel's finding on charge 2 and 3, and the fact that at no stage have you suggested that the alleged words, if said, did not amount to misconduct. The panel regarded these as positive features indicating some insight. However, the panel noted that you denied the allegation at the local investigation stage, claiming that you said "*blank bitch"*. In relation to charge 1, your admission was entered on the basis of the witness evidence, rather than an accepted recollection on your part. Similarly, in accepting the panel's decision on charge 2 at the impairment stage, you told the panel that you did not remember saying the comments, but should have remembered saying them. You said it was "*so long down the line"* and that it was "*hard to understand why"* you said it. The panel concluded that whilst

you have demonstrated some insight into your misconduct, through your admission to charge 1 and 3, your acceptance of the panel's finding on charge 2 and 3, and your acceptance of misconduct, you have not developed full insight into your actions.

The panel considered the case of *PSA v HCPC and Roberts* and the submissions made on your behalf that features of your case are similar. However, in contrast to that case the panel finds that your racially motivated comments took place on two occasions, and therefore could not be regarded as an isolated incident, were made in an open area where they could be easily overheard, and there was no immediate admission by yourself such as a self-referral to the Trust or NMC. The panel therefore rejected the submission that your case is similar to that of *PSA v HCPC and Roberts*.

In light of all the above, particularly your insight, the panel concluded that you have not yet fully remediated your misconduct. Therefore, the panel could not conclude that your misconduct is highly unlikely to be repeated. The panel finds that you are therefore impaired on the ground 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 the public would be shocked if a registered nurse who had made racially motivated comments on two occasions in the circumstances of this case was not found to be impaired. This would seriously undermine the public confidence in the nursing profession. Therefore, the panel also finds your fitness to practise impaired on the grounds of public interest.

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

Sanction

The panel considered this case and decided to make a suspension order for a period of one year. The effect of this order is that the NMC register will show that your registration has been suspended.

In reaching this decision, the panel had regard to the evidence adduced in this case and to the Sanctions Guidance (SG) published by the NMC. The panel accepted the advice of the legal assessor.

Submissions on sanction

Ms Connor informed the panel that in the Notice of Hearing, the NMC advised you that it would seek the imposition of a striking-off order if it found your fitness to practise currently impaired. She submitted that the public protection concerns, deep-seated attitudinal issues, and the need to maintain public confidence in the nursing profession make any lesser sanction unworkable in this case. She referred to the SG guidance, particularly to the section on discrimination and racism which sets out that any racist misconduct should be considered particularly serious.

Ms Lake submitted that an order which permits you to continue working in practice would be appropriate in this case. She outlined the 27 positive testimonials and workplace awards you have achieved since the incidents, and that these all speak to how you have been able to practice kindly, safely, and effectively without further concerns. She submitted that you have demonstrated some insight, as noted by the panel, and that you would be willing and able to deeper your reflection into the areas that the panel identified as lacking. She submitted that a conditions of practice order would be appropriate. She submitted that conditions such as restrictions on working as a manager over staff, training

into the importance of power dynamics and importance of working as a role model, and further reflection would allow you to address the concerns identified by the panel while maintaining public safety and upholding the public confidence.

Decision and reasons on 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 bore 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 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:

- You were working in a senior position with leadership responsibilities
- Your misconduct indicated attitudinal concerns
- Your misconduct took place in an open area on a children's ward

The panel also took into account the following mitigating features:

- You have undertaken relevant training
- You demonstrated some remorse
- Your previous good character and work history
- Your positive testimonials that demonstrate your competence as a caring nurse

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

It then considered the imposition of a caution order but again determined that, due to the seriousness of the case, and the public protection issues identified, an order that does not

restrict your practice would not be appropriate in the circumstances. The SG states that a caution order may be appropriate where '*the case is at the lower end of the spectrum of impaired fitness to practise and the panel wishes to mark that the behaviour was unacceptable and must not happen again.'* The panel considered that your misconduct was not at the lower end of the spectrum and that a caution order would be inappropriate in view of the issues identified. The panel decided that it would be neither proportionate nor in the public interest to impose a caution order.

The panel next considered whether 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 the following which indicate when a conditions of practice order may be appropriate:

- *No evidence of harmful deep-seated personality or attitudinal problems;*
- *Identifiable areas of the nurse or midwife's practice in need of assessment and/or retraining;*
- *No evidence of general incompetence;*
- *Potential and willingness to respond positively to 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.*

Whilst some of these criteria may be engaged in this case, the panel is of the view that there are no practical or workable conditions that could be formulated, given the nature of the misconduct in this case.

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.

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;*
- *…*
- *…*

The panel acknowledged that your misconduct was not a single incident but noted that both incidents flow from a relatively short period of your otherwise unblemished career. Consequently while the panel concluded that your misconduct indicated attitudinal concerns it did not characterise these as deep-seated as there was no evidence these were ingrained, or long-standing. There is no evidence of your misconduct being repeated. The panel note that you have taken steps to remediate your misconduct and you have some, albeit incomplete, insight. The panel previously noted that, based on your current insight, it could not be said that your misconduct is highly unlikely to be repeated. However, the panel was of the view that you do not pose a significant risk of repeating your behaviour.

The panel considered that given the attitudinal concerns identified and the seriousness of your misconduct as it relates to discrimination, there is a need to declare and uphold proper standards of the nursing profession and at a least a period of suspension is therefore necessary.

The panel went on to consider whether a striking-off order would be appropriate; however, taking account of all the information before it, including your efforts at remediation,

training, positive testimonials and previous good character, the panel concluded that such an order would be disproportionate in the circumstances of this case.

In light of all of this the panel concluded that a striking-off order would be disproportionate, and a period of suspension is sufficient to protect the public, maintain the public confidence, and permit you the opportunity to address the concerns of insight that the panel earlier identified as lacking.

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 determined that a suspension order for a period of one year is appropriate in this case to mark the seriousness of your misconduct, maintain public confidence, and send out a strong message as to the professional standards expected of registered nurses.

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:

- Your attendance at the review
- Evidence of your further reflection and developed insight
- Any other information you think may help a future review panel

This will be confirmed to you in writing.

Interim order

As the suspension 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 your own interests until the substantive suspension order takes effect. The panel heard and accepted the advice of the legal assessor.

Submissions on interim order

The panel took account of the submissions made by Ms Connor. She submitted that an interim suspension order for 18 months is necessary on the grounds of public protection and public interest to cover any potential appeal period.

Ms Lake made no submissions regarding an interim order.

The panel heard and 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 as necessary on the grounds of public protection and the public interest to cover any potential appeal period.

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

That concludes this determination.