Nursing and Midwifery Council

Fitness to Practise Committee

Substantive Order Review Hearing

Tuesday, 30 September 2025

Virtual Hearing

Name of Registrant:	**Mary Folake Olanrewaju**
NMC PIN:	91H0145O
Part(s) of the register:	Nursing – Sub part 1 RN1: Registered Nurse – Adult (15 August 1991)
Relevant Location:	Bedfordshire
Type of case:	Misconduct
Panel members:	Peter Fish (Chair, Lay member) Sharon Haggerty (Registrant member) Vicki Harris (Lay member)
Legal Assessor:	Melissa Harrison
Hearings Coordinator:	Sara Glen
Nursing and Midwifery Council:	Represented by Leesha Whawell, Case Presenter
Mrs Olanrewaju:	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 7 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 Olanrewaju was not in attendance and that the Notice of Hearing had been sent to Mrs Olanrewaju's registered email address by secure email on 28 August 2025.

Ms Whawell, 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 Olanrewaju'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 Olanrewaju 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 Olanrewaju

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

Ms Whawell referred the panel to the NMC guidance CMT-8 '*Proceeding with hearings when the nurse, midwife or nursing associate is absent*' last updated 13 January 2023 and the relevant case law of *General Medical Council v Adeogba* [2016] EWCA Civ 162 and *R* v *Jones (Anthony William)* (No.2) [2002] UKHL 5.

Ms Whawell submitted that Mrs Olanrewaju was served with the notice of hearing and all the documentation that was to be relied upon in good time. Therefore, there would be no unfairness to Mrs Olanrewaju if the panel were to decide to proceed in her absence as she has full knowledge of the information that the panel has sight of and will consider it in its decision making. She submitted that there had been no engagement at all by Mrs Olanrewaju with the NMC in relation to these proceedings and as a consequence, there was no reason to believe that an adjournment would secure her attendance on some future occasion. Ms Whawell submitted that the matters of this case relate to both public protection and public interest concerns and as the current substantive suspension order is due to expire on the 7 November 2025, there is a public interest consideration to dispose of the case expeditiously before the order expires. Ms Whawell submitted that the panel should proceed in Mrs Olanrewaju's absence.

The panel accepted the advice of the legal assessor.

The panel has decided to proceed in the absence of Mrs Olanrewaju. In reaching this decision, the panel has considered the submissions of Ms Whawell and the advice of the legal assessor. It has had particular regard to the relevant case law 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 Olanrewaju;
- Mrs Olanrewaju has not engaged with the NMC and has not responded to any of the emails sent to her about this hearing;
- 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 as the current suspension order is due to expire on 7 November 2025.

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

Decision and reasons on review of the substantive order

The panel decided to extend the suspension order for a period of 6 months.
This order will come into effect at the end of 7 November 2025 in accordance with Article 30(1) of the 'Nursing and Midwifery Order 2001' (the Order).

This is the first review of a substantive suspension order originally imposed for a period of 6 months by a Fitness to Practise Committee panel on 8 April 2025.

The current order is due to expire at the end of 7 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,

1. *while working as a locum Nurse Practitioner at Toddington Medical Centre:*

a. *On or about 15 October 2019 incorrectly advised Patient A that they did not require an MMR vaccine for a planned trip.* ***[PROVED]***

b. *On 11 October 2019:*
i. *wrongly went to inject Denosumab directly into Patient B's stomach,* ***[PROVED]***
ii. *…*

c. *On 30 September 2019 incorrectly administered Zoladex to Patient C via the anterior thigh instead of the abdomen.* ***[PROVED]***

d. *In August and September 2019, incorrectly administered both Baby A's first and second baby immunisations early.* ***[PROVED]***

e. *Applied compression stockings while tending to Patients D, E, and/or F's wound dressings when it was clinically incorrect to do so.* ***[PROVED]***

f. *On an unknown date, applied one or more dressings without wearing protective gloves.* ***[PROVED]***

g. *Took one or more smear tests which were inadequate.* ***[PROVED]***

2. *Having accepted undertakings with the NMC, failed to comply with one or more of the following of those undertakings:*

a. *Undertaking 6a, in you did not by 11 May 2024 send a report from your line manager or supervisor, setting out the standard of your supervised medication rounds.* ***[PROVED]***

b. *Undertaking 6b, in that you did not by 11 May 2024 send the NMC evidence that you had successfully completed a relevant course in the safe administration of medicines at all/ and/or which included an assessment of your competency.* ***[PROVED]***

c. *Undertaking 7, in that you did not send an up-to-date copy of your Personal development Plan within a month of the undertakings becoming effective.* ***[PROVED]***

d. *Undertaking 8, in that you did not send a report from your supervisor/line manager/mentor each month detailing progress against your Personal Development Plan.* ***[PROVED]***

e. *Undertaking 9, in that you did not send a copy of your reflective profile every two months.* ***[PROVED]***

f. *Undertaking 10, in that you did not complete and/or provide evidence that you had completed the agreed set of undertakings within 12 months of their becoming effective.* ***[PROVED]***

And, in light of the above, your Fitness to Practise is impaired by reason of your misconduct.'

The original panel determined the following with regard to impairment:

'Regarding insight, the panel considered that there is no recent evidence before it that Mrs Olanrewaju has reflected on her misconduct or taken steps to strengthen her practice. It noted that there is some documentation before it of reflection and training, however these documents precede the misconduct and therefore do not adequately address the misconduct in this case. It further noted that Mrs Olanrewaju has not provided any updated reflections or insight since 2019.

The panel was satisfied that the misconduct in this case is capable of being addressed. It noted that the misconduct relates to fundamental competencies for nurses, such as medication management and wound care which can be addressed through retraining.

However, the panel is of the view that there is a risk of repetition based on the lack of evidence before it that Mrs Olanrewaju has reflected on the misconduct or completed any further training in these areas of concern. 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 a member of the public would be concerned if Mrs Olanrewaju was permitted to return to practice unrestricted. In addition, the panel concluded that public confidence in the profession would be undermined if a finding of impairment were not made in this case and therefore also finds Mrs Olanrewaju's fitness to practise impaired on the grounds of public interest.

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

The original panel determined the following with regard to sanction:

'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 was satisfied that in this case, the misconduct was not fundamentally incompatible with remaining on the register. The panel considered that there is no evidence that the misconduct has been repeated, however there is also no evidence before it of Mrs Olanrewaju demonstrating sufficient insight or reflection. The panel further noted that a suspension order would protect the public from any risk of harm.

It did go on to consider whether a striking-off order would be proportionate but, taking account of all the information before it, 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 Mrs Olanrewaju's case to impose a striking-off order.

Balancing all of these factors the panel has concluded that a suspension order would be the appropriate and proportionate sanction.'

Decision and reasons on current impairment

The panel has considered carefully whether Mrs Olanrewaju'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 ability to practise kindly, safely 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 documentation before it, including the NMC bundle. It has taken account of the submissions made by Ms Whawell on behalf of the NMC.

Ms Whawell referred the panel to the background of the case.

She referred the panel to the relevant case law *Abrahaem v General Medical Council* [2008] EWHC 183 (Admin) and the NMC Guidance REV-2 namely '*Substantive Order Reviews'* last updated 14 October 2022.

She submitted that the persuasive burden is on the registrant at a review to demonstrate that they have acknowledged that their past professional performance was deficient and through insight, supervision, education and other achievements has been sufficiently addressed. Ms Whawell submitted that in the absence of any information from Mrs Olanrewaju regarding matters of the kind found proved, the panel may find no difficulty in making a current finding of impairment.

In regard to sanction, Ms Whawell submitted that if the panel were to make a finding of current impairment, then it will need to consider whether the current suspension order should be extended or replaced with another order.

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 Olanrewaju's fitness to practise remains impaired.

The panel was concerned at Mrs Olanrewaju's lack of engagement with the NMC both prior to and since the substantive meeting on 8 April 2025. As a consequence, the panel has no new information before it. The panel noted that the original panel found that Mrs Olanrewaju had insufficient insight due to the fact that that Mrs Olanrewaju provided no updated reflections since 2019. At this hearing, there is no evidence before the panel to suggest that Mrs Olanrewaju's insight has developed at all. Further, the panel was not afforded the opportunity to hear Mrs Olanrewaju's oral submissions and ask any questions as a result of her non-attendance at this hearing.

The panel noted that the original panel was satisfied that the misconduct in this case was capable of being addressed. At this hearing, the panel is of the view that the matters of the kind found proved are capable of being remediated, however there has been no evidence submitted by Mrs Olanrewaju to demonstrate that she has taken any steps to gain further knowledge and strengthen her practice since prior to the substantive meeting on 8 April 2025. Although the panel is aware that the current suspension order prohibits Mrs Olanrewaju from working as a nurse, there is no information of Mrs Olanrewaju's current work situation, and no testimonials in support of her current practice.

The panel was satisfied that there remains a risk to the public if Mrs Olanrewaju were allowed to practise without restriction. The panel determined that there is a risk of repetition due to the lack of evidence before it to suggest that Mrs Olanrewaju has reflected fully on her misconduct or completed any further training in the areas of concern.

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 nursing profession and upholding proper standards of conduct and performance. The panel considered that members of the public would be concerned at the manner in which Mrs Olanrewaju had disregarded undertakings with which she had agreed, in order to address her clinical competence, and her failure to engage with the NMC as her regulator. In the light of this, 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 Olanrewaju's fitness to practise remains impaired.

Decision and reasons on sanction

Having found Mrs Olanrewaju's 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. 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 Olanrewaju'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 Olanrewaju'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 order on Mrs Olanrewaju'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 meeting and that Mrs Olanrewaju had undertakings in place prior to the substantive meeting. The panel was of the view that Mrs Olanrewaju had an opportunity at that time to prove herself as someone who is able to practice kindly, safely and professionally and remediate her misconduct. The panel noted her lack of compliance with the undertakings and the fact that there is no new information before it to suggest that Mrs Olanrewaju would now comply with any conditions of practice if they were to be imposed. Further there is no information about Mrs Olanrewaju's work situation since the allegations were made. The panel concluded that a conditions of practice order would not adequately protect the public or satisfy the public interest.

The panel considered the imposition of a further period of suspension. It was of the view that a suspension order would allow Mrs Olanrewaju further time to fully reflect on her previous failings. The panel concluded that a further 6 month suspension order would be the appropriate and proportionate response and would afford Mrs Olanrewaju 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 6 months would provide Mrs Olanrewaju with an opportunity to engage with the NMC and to provide the NMC with information in regard to Mrs Olanrewaju's intentions to return to nursing practice. It considered this to be the most appropriate and proportionate sanction available.

The panel was of the view that a striking off order would be disproportionate at present, as the substance of Mrs Olanrewaju's original misconduct was not fundamentally incompatible with remaining on the register.

The panel considered whether to allow the current suspension order to lapse upon expiry with a finding of impairment. The panel determined that it could not conclude at this stage that it was unlikely that Mrs Olanrewaju would return to safe and unrestricted practice within a reasonable period of time.

This suspension order will take effect upon the expiry of the current suspension order, namely the end of 7 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, extend 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:

- Mrs Olanrewaju's engagement and attendance at a future review hearing.
- A written statement recording Mrs Olanrewaju's reflections on the conduct which gave rise to the findings against her, on the impact it had on patients, colleagues and the wider profession, and what Mrs Olanrewaju has done to address them.
- Any recent references or testimonials attesting to Mrs Olanrewaju's capability to perform your duties, in whatever role, in any paid or unpaid work.
- Any relevant training courses undertaken to address the areas of concern identified in the substantive meeting on 8 April 2025.

This will be confirmed to Mrs Olanrewaju in writing.

That concludes this determination.