

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

**Substantive Order Review Meeting
Thursday, 9 April 2026**

Virtual Meeting

Name of Registrant: Cristian Gabriel Barcan

NMC PIN: 15D0103C

Part(s) of the register: Registered Nurse - Sub part 1
Adult - 9 April 2015

Relevant Location: Wargrave

Type of case: Misconduct/Lack of competence

Panel members: Graham Coulston-Herrmann (Chair, Lay member)
Alison Thomson (Registrant member)
Robert Marshall (Lay member)

Legal Assessor: Neil Fielding

Hearings Coordinator: Eyram Anka

Order being reviewed: Conditions of practice order (12 months)

Fitness to practise: Impaired

Outcome: **Conditions of practice order (12 months)
to come into effect on 14 May 2026 in accordance
with Article 30 (1)**

Decision and reasons on service of Notice of Meeting

The panel noted at the start of this meeting that the Notice of Meeting had been sent to Mr Barcan's registered email address by secure email on 23 February 2026.

The panel took into account that the Notice of Meeting provided details of the review that the review meeting would be held no sooner than 30 March 2026 and inviting Mr Barcan to provide any written evidence seven days before this date.

The panel accepted the advice of the legal assessor.

In the light of all of the information available, the panel was satisfied that Mr Barcan has been served with notice of this meeting in accordance with the requirements of Rules 11A and 34 of the Nursing and Midwifery Council (Fitness to Practise) Rules 2004 (as amended) (the Rules).

Decision and reasons on review of the current order

The panel decided to extend the existing conditions of practice order for a period of 12 months. This order will come into effect at the end of 14 May 2026 in accordance with Article 30(1) of the Nursing and Midwifery Order 2001 (as amended) (the Order).

This is the first review of a substantive conditions of practice order originally imposed for a period of 12 months by a Fitness to Practise Committee panel on 15 April 2025.

The current order is due to expire at the end of 14 May 2026.

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. *Between 9 January 2023 and 5 February 2023 failed to demonstrate the standards of knowledge, skills and judgment required to practise without supervision as a Band 5 nurse in medication management and administration, in that you:*
 - a. *failed a medication competency test on 27 January 2023*
 - b. *attempted to administer an un-thickened effervescent tablet to Patient A, on 27 January 2023*
 - c. *attempted to administer Colchicine to Patient B, without clinical justification*
 - d. *were unable to state the purpose of Colchicine*
 - e. *...*
 - f. *attempted to administer less than the prescribed dosage*
 - g. *...*
 - h. *...*

2. *On one or more occasions between 9 January 2023 and 5 February 2023 communicated with patients in a manner that was*
 - a. *...*
 - b. *abrupt and/or*
 - c. *...*
 - d. *...*
 - e. *...*

3. *...*

AND in light of the above, your fitness to practise is impaired by reason of your lack of competence at charge 1 and misconduct at charges 2...’.

The original panel determined the following with regard to impairment:

‘The charges found proved in relation to your competence showed that at that time your fitness to practise was impaired by reason of lack of competence. The panel assessed whether your to practise remains currently impaired by reason of lack of competence. It determined you have provided no information or evidence to

indicate that your level of competence has improved subsequent to the matters found proved.

You have not provided any evidence of strengthening your practice including any further training, improved knowledge of medicines or sufficient reflection by you since these incidents.

As an example, you have not addressed the concerns identified in charge 1a, namely successfully completing a medication competency test. Further, the concerns in charge 1b remain outstanding as you have not demonstrated understanding of dysphasia. The panel took the view that you have not shown that you are currently capable of safe practice.

Accordingly, the panel was of the view that, in the absence of any evidence of safe practice since the matters found proved, there is a high risk of repetition.

The panel therefore concluded that your fitness to practise remains impaired by reason of the lack of competence. The panel considered that should you return to practice unrestricted you would be highly likely to make further similar and repeated errors and so place patients at risk of harm. Therefore, it decided that your fitness to practise is currently impaired. The panel was satisfied that a finding of impairment on public protection grounds is necessary.

Further, the panel bore in mind that the overarching objectives of the NMC are to protect, promote and maintain the health safety and well-being of the public and patients, and to uphold/protect the wider public interest, which includes promoting and maintaining public confidence in the nursing and midwifery professions and upholding the proper professional standards for members of those professions.

The panel determined that your lack of competence is sufficiently serious that a member of public would be concerned if a finding of impairment was not made, particularly with the finding that, real and significant harm could have come to patients as a result of your lack of competence. The panel determined that, in this case, a finding of impairment on public interest grounds was also required.

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

Taking the above limbs of the test in the case of Grant in turn, the panel was satisfied that that patients were put at risk of harm. Your misconduct had breached the fundamental tenets of the nursing profession, namely by communication with vulnerable patients in an abrupt manner and failing to treat those patients with appropriate professionalism.

The panel considered that impairment is a forward-looking exercise, and it next considered whether you are liable, in the future, to put patients at unwarranted risk of harm, bring the nursing profession into disrepute and breach one of the fundamental tenets of the nursing profession, pursuant to Grant. In reaching its decision, the panel also considered the principles derived from R (on application of Cohen) v General Medical Council [2008] EWHC 581 (Admin), namely:

- Whether the concern is easily remediable;*
- Whether it has in fact been remedied; and*
- Whether it is highly unlikely to be repeated.*

The panel considered that the communication concerns in charge 2b were remediable. It noted that all three witnesses, who originated from Romania, said that your abrupt manner would be accepted in Romania, but all agreed that it was not appropriate in the context of a UK setting. Witness 3 stated 'you needed more time, conversation practice and direction about how to work with the elderly in the UK, as it is a different culture to that of Romania'. The panel agreed that this represented a failing that you are required to address and improve.

On whether you have remedied the concerns, the panel considered that, since the incidents, you have not displayed sufficient insight into your conduct. The panel was not satisfied that you have remedied these concerns. It determined there was little or no evidence of you having insight into the matters of misconduct found proved. It noted that you accept that that you require some further training and that you came from an A&E background which may be the reason why you were being abrupt as you were used to working at a fast pace.

Consequently, when considering whether the conduct is highly unlikely to be repeated, the panel took into account that it does not have any evidence before it that you have sufficiently developed insight or remediation into your conduct. The panel was satisfied that there is a risk of repetition, given your lack of sufficient insight, remediation or reflection.

Accordingly, the panel determined that a finding of impairment is necessary on the grounds of public protection.

Further, the panel bore in mind that the overarching objectives of the NMC, namely, 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 public confidence in the profession would be undermined if a finding of impairment were not made in this case. Accordingly, the panel also finds that your fitness to practise is 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 by way of your misconduct and your lack of competence.'

The original panel determined the following with regard to sanction:

'The panel took into account the following aggravating features:

- *The conduct involved vulnerable patients*

The panel also took into account the following mitigating features:

- *Limited opportunity and timescale for you to remedy the concerns identified within the workplace*
- *Limited but developing insight*

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, nor would it protect the public.

The panel then considered the imposition of a caution order but again determined that, due to the seriousness of the case, and the public protection issues identified, an order that does not restrict your practice would not be appropriate in the circumstances. The panel decided that it would be neither proportionate nor in the public interest to impose a caution order, nor would it protect the public.

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 which in particular indicates that conditions may be appropriate when some or all of the following factors are apparent:

- *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;*
- *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;*
- *No evidence of general incompetence;*
- *The conditions will protect patients during the period they are in force;*
and
- *Conditions can be created that can be monitored and assessed.*

The panel concluded that all the above factors are present in this case to a greater or lesser extent.

Having determined that your misconduct and competency issues are capable of being addressed, the panel concluded that it would be possible to formulate appropriate and practical conditions which would address the failings highlighted in this case. The panel was of the view that a conditions of practice order would give you the opportunity to

demonstrate that you are capable of safe and effective practice, while at the same time protecting patients.

Having regard to the matters it has identified, the panel has also concluded that a conditions of practice order will mark the importance of maintaining public confidence in the profession.

The panel had regard to the fact that you have been engaged throughout with the process, your admissions to some of the charges and your acceptance that a conditions of practice order is appropriate in the circumstances, and you are willing to engage with the order.

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

The panel was of the view that imposing a suspension order would be wholly disproportionate. It noted that the conduct is remediable in this case and that you have shown a willingness to engage with the conditions of practice order, and therefore a suspension order would not be a reasonable response in the circumstances of your case.

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

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

- 1. You must restrict your nursing practice to one substantive employer. This can be facilitated through an agency.*
- 2. You must not be the nurse in charge.*
- 3. You must be directly supervised any time you are administering medication until you are formally assessed and deemed competent to do so independently by*

another registered nurse. You must send evidence of this assessment to your NMC case officer within 7 days of completion.

4. You must work with your line manager, mentor or supervisor to create a personal development plan (PDP). Your PDP must address the concerns about:

a. Medication management and administration

b. Your abrupt communication skills and the importance of developing appropriate nonverbal and verbal communication in relation to vulnerable patients

c. Your timely completion of training relevant to your nursing role

- You must send your case officer a copy of your PDP within a month of starting your employment.*

- You must send a report from your line manager, mentor or supervisor to your case officer two weeks before your NMC review hearing. This report must show your progress towards achieving the aims set out in your PDP.*

5. You must meet with line manager, mentor or supervisor on a monthly basis to discuss your PDP and document progress in relation to the following areas in condition 4.

6. You must produce a reflective statement and send it to your case officer two weeks before the NMC review hearing. Your reflective statement must address the following:

- The impact of poor communication upon vulnerable patients, their families as well as colleagues*

- How you have improved your communication skills and what you are doing differently*

7. You must keep the NMC informed about anywhere you are studying by:

a. Telling your case officer within seven days of accepting any course of study.

- b. Giving your case officer the name and contact details of the organisation offering that course of study.*

- 8. You must immediately give a copy of these conditions to:*
 - a. Any organisation or person you work for.*
 - b. Any employers you apply to for work (at the time of application).*
 - c. Any establishment you apply to (at the time of application), or with which you are already enrolled, for a course of study.*

- 9. You must tell your case officer, within seven days of your becoming aware of:*
 - a. Any clinical incident you are involved in.*
 - b. Any investigation started against you.*
 - c. Any disciplinary proceedings taken against you.*

- 10. You must allow your case officer to share, as necessary, details about your performance, your compliance with and / or progress under these conditions with:*
 - a. Any current or future employer.*
 - b. Any educational establishment.*
 - c. Any other person(s) involved in your retraining and/or supervision required by these conditions*

The period of this order is for 12 months.'

Decision and reasons on current impairment

The panel has considered carefully whether Mr Barcan's fitness to practise remains impaired. Whilst there is no statutory definition of fitness to practise, the NMC has defined fitness to practise as the ability of a professional on our register to practise as a nurse, midwife or nursing associate safely and effectively 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 within the NMC bundle.

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 Mr Barcan's fitness to practise remains impaired.

The panel noted that there was no evidence of Mr Barcan's engagement with the NMC since the original substantive hearing in April 2025. There is no information before the panel to suggest that Mr Barcan has taken steps to strengthen his nursing practice or address the concerns identified. The panel further observed that there is no evidence to suggest that Mr Barcan's level of insight has developed since the imposition of substantive condition of practice order.

Furthermore, the panel found no evidence that Mr Barcan has complied with the recommendations made by the previous panel. Specifically, there is no evidence of relevant training, no references or testimonials, no reflective statement and no evidence of compliance with the conditions of practice order.

The panel bore in mind that the persuasive burden rests with Mr Barcan to demonstrate that his fitness to practise is no longer impaired. In the absence of any updated or supporting information, the panel therefore considered that there was insufficient evidence of any material change in the circumstances or a reduction in risk since the original hearing.

Given the continued lack of insight, remediation or reflective practice, the panel determined that there remains a real risk of repetition. The panel therefore decided that a finding of continuing impairment is necessary on the ground 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. In this case, the panel determined that a finding of continuing impairment is also required on public interest grounds.

For these reasons, the panel finds that Mr Barcan's fitness to practise remains impaired.

Decision and reasons on sanction

Having found Mr Barcan 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 Mr Barcan'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, but the Committee wants to mark that what happened was unacceptable and must not happen again.'* The panel considered that Mr Barcan's misconduct and lack of competence was not at the lower end of the spectrum and that a caution order would be inappropriate in view of the issues identified. The panel decided that it would be neither proportionate nor in the public interest to impose a caution order.

The panel next considered whether imposing a further conditions of practice order on Mr Barcan's registration would remain a sufficient and appropriate response. In doing so, the panel was mindful that any conditions imposed must be proportionate, measurable and workable.

The panel was of the view that a further conditions of practice order is sufficient to protect patients and the wider public interest.

Whilst the original panel findings included misconduct, today's panel considered the nature of the concerns and determined that the case relates to lack of competence with the exception of charge 2b. The panel took the view that the underlying issues are capable of remediation through appropriate support, supervision and structured reflection. In these circumstances, the panel considered that it could be disproportionate to treat this case solely as one warranting a more restrictive sanction, such as suspension, particularly where the main issues relate to a lack of competency and there remains a prospect of improvement.

In relation to compliance with the existing conditions, the panel noted that it has no information before it to confirm whether Mr Barcan is currently practising. However, the panel has no evidence before it to demonstrate compliance with Condition 6, which requires the submission of a reflective statement two weeks prior to any review.

Notwithstanding this, the panel determined that extending the existing conditions of practice order would afford Mr Barcan a further opportunity to demonstrate that he is able to practice safely and effectively, develop insight into the concerns and strengthen his nursing practice, while ensuring that appropriate safeguards remain in place to protect patients. The panel determined that it remains possible to formulate appropriate and practical conditions which would address the failings highlighted in this case.

The panel was of the view that to impose a suspension order would be wholly disproportionate and would not be a reasonable response in the circumstances of Mr Barcan's case because this is the first review of the order and there is insufficient information to conclude that Mr Barcan is unwilling or unable to comply with the conditions in the future.

The panel considered whether to impose a striking off order but given its decision to continue with the conditions of practice order was of the view that this would be a disproportionate response at this stage. The panel also noted that if the case solely related to lack of competence, then strike off would not have been an option open to it. As the

more serious concerns, giving rise to the greater potential risk to both public safety and public confidence relate to lack of competence it would therefore potentially give rise to a degree of unfairness to make an order that Mr Barcan be struck off at this point, in relation to the lesser (albeit serious) aspect of misconduct encompassed by charge 2b.

Accordingly, the panel determined, pursuant to Article 30(1)(c) to make a conditions of practice order for a period of 12 months, which will come into effect on the expiry of the current order, namely at the end of 14 May 2026. It decided to impose the following conditions which it considered are appropriate and proportionate in this case:

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

1. *You must restrict your nursing practice to one substantive employer. This can be facilitated through an agency.*
2. *You must not be the nurse in charge.*
3. *You must be directly supervised any time you are administering medication until you are formally assessed and deemed competent to do so independently by another registered nurse. You must send evidence of this assessment to your NMC case officer within 7 days of completion.*
4. *You must work with your line manager, mentor or supervisor to create a personal development plan (PDP). Your PDP must address the concerns about:*
 - a. *Medication management and administration*
 - b. *Your abrupt communication skills and the importance of developing appropriate nonverbal and verbal communication in relation to vulnerable patients*
 - c. *Your timely completion of training relevant to your nursing role*

- *You must send your case officer a copy of your PDP within a month of starting your employment.*
 - *You must send a report from your line manager, mentor or supervisor to your case officer two weeks before your NMC review hearing. This report must show your progress towards achieving the aims set out in your PDP.*
5. *You must meet with line manager, mentor or supervisor on a monthly basis to discuss your PDP and document progress in relation to the following areas in condition 4.*
6. *You must produce a reflective statement and send it to your case officer two weeks before the NMC review hearing. Your reflective statement must address the following:*
- *The impact of poor communication upon vulnerable patients, their families as well as colleagues*
 - *How you have improved your communication skills and what you are doing differently*
7. *You must keep the NMC informed about anywhere you are studying by:*
- a. *Telling your case officer within seven days of accepting any course of study.*
 - b. *Giving your case officer the name and contact details of the organisation offering that course of study.*
8. *You must immediately give a copy of these conditions to:*
- a. *Any organisation or person you work for.*
 - b. *Any employers you apply to for work (at the time of application).*
 - c. *Any establishment you apply to (at the time of application), or with which you are already enrolled, for a course of study.*

9. *You must tell your case officer, within seven days of your becoming aware of:*

- a. Any clinical incident you are involved in.*
- b. Any investigation started against you.*
- c. Any disciplinary proceedings taken against you.*

10. *You must allow your case officer to share, as necessary, details about your performance, your compliance with and / or progress under these conditions with:*

- a. Any current or future employer.*
- b. Any educational establishment.*
- c. Any other person(s) involved in your retraining and/or supervision required by these conditions'*

The period of this order is for up to 12 months.

This conditions of practice order will take effect upon the expiry of the current conditions of practice order, namely the end of 14 May 2026 in accordance with Article 30(1).

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

Any future panel reviewing this case would be assisted by:

- Engagement with the NMC including up to date references and testimonials from any work paid or unpaid
- Evidence of e-learning and/or training particularly relating to medicine management and administration and communication
- Evidence of your compliance with these conditions

- Your reflective statement

This will be confirmed to Mr Barcan in writing.

That concludes this determination.