

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

**Substantive Order Review Hearing  
Monday, 20 April 2026**

Virtual Hearing

**Name of Registrant:** Julian Alexander Phillip Faulkner

**NMC PIN:** 99D0110E

**Part(s) of the register:** Registered Nurse – Sub Part 1  
Adult Nursing (Level 1) – 7 March 2003

**Relevant Location:** Staffordshire

**Type of case:** Misconduct

**Panel members:** Louise Guss (Chair, lay member)  
Sharon Aldridge-Bent (Registrant member)  
Catherine Beckett (Lay member)

**Legal Assessor:** Nigel Ingram

**Hearings Coordinator:** Samara Baboolal

**Nursing and Midwifery Council:** Represented by Leesha Whawell, Case Presenter

**Mr Faulkner:** Present and represented by Harrie Austin-Jones,  
Counsel instructed by the Royal College of Nursing (RCN)

**Order being reviewed:** Suspension order (12 months)

**Fitness to practise:** Impaired

**Outcome:** **Suspension order (12 months) to come into effect on 2 May 2026 in accordance with Article 30 (1)**

## **Decision and reasons on review of the substantive order**

The panel decided to extend the current suspension order by 12 months.

This order will come into effect at the end of 2 May 2026 in accordance with Article 30(1) of the 'Nursing and Midwifery Order 2001' (the Order).

This is the second review of a substantive suspension order originally imposed for a period of 12 months at a remitted hearing on 4 April 2024. This was reviewed on 24 March 2025, where the reviewing panel imposed a further suspension order of 12 months.

The current order is due to expire at the end of 2 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, whilst working at Fauld House Nursing Home:*

*1. On a date or dates on or around 28 August 2019:*

- a) ...;*
- b) Made a recording of Patient A on your mobile phone;*
- c) Played the recording of Patient A to one or more of your colleagues;*
- d) ...*

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

The panel at the previous hearing determined the following with regard to impairment:

*'The panel considered whether your fitness to practise remains impaired.*

*The panel noted that you were struck off the register in 2009, and were subsequently restored and returned to practice. The panel considered that you worked autonomously for a period of a year before your DBS barring, and that the incidents found proved occurred two months into your first nursing role after being restored to the register.*

*The panel noted that the original panel found that you had developing insight. At this hearing, the panel took into account your reflective piece, evidence of training and testimonials. While the panel acknowledges that you have demonstrated increased insight into how your actions impacted both the patient and the wider nursing profession, there remains a need for further in-depth reflection on the underlying reasons for your decision to record the patient and share this with a colleague.*

*The act of recording a patient and then disclosing that recording raises serious concerns regarding professional boundaries, patient dignity, and confidentiality. It is essential that that you engage in deeper reflection to fully understand the motivations behind your actions and the reasons why they would be unlikely to be repeated in the future.*

*A thorough exploration of these aspects is necessary to ensure that you can demonstrate a sustained commitment to upholding professional standards and public protection, mitigating any risk of recurrence, and rebuilding trust in your ability to practise safely, kindly and professionally. This is particularly as you have previously been struck off in relation to concerns of a similar but more serious nature. The panel considers this level of reflection and personal accountability crucial before determining whether full remediation has been achieved.*

*The panel also acknowledged the steps you have undertaken to address the concerns raised by way of training courses. However, it was mindful that the charges that were found proved were not related to your clinical practice and performance but rather your attitude and conduct with a patient and colleague. Therefore, the panel determined that you have not fully demonstrated that you have addressed the concerns identified with your misconduct.*

*In its consideration of whether you have taken steps to strengthen your practice, the panel took into account that you have not worked as a nurse in over four years due to the DBS barring, and so you have not been able to demonstrate how you have embedded your developing insight and learning into safe practice.*

*The panel determined that the matters found proved are remediable, however, it was of the view that you have not fully demonstrated insight into your conduct. In light of this, this panel determined that you are liable to repeat matters of the kind found proved. 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 determined that, in light of you being subject to a DBS barring order, a finding of continuing impairment on public interest grounds is also required.*

*For these reasons, the panel finds that your fitness to practise remains impaired.'*

The previous reviewing panel determined the following with regard to sanction:

*'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 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 bore in mind the seriousness of the facts found proved at the original hearing and concluded that although conditions of practice order could potentially be formulated to adequately protect the public and satisfy the public interest, your DBS barring restricts you from working in a nursing capacity. Therefore, the panel was not able to formulate workable conditions of practice that would be practical and appropriate.*

*The panel considered the imposition of a further period of suspension. It was of the view that a suspension order would allow you further time to fully reflect on your previous failings and to address your DBS barring. The panel concluded that a further 12 months suspension order would be the appropriate and proportionate response and would afford you adequate time to further develop your insight, and deal with your DBS barring appeal. It considered this to be the most appropriate and proportionate sanction available. The panel noted that if your DBS appeal was successful, either party may request an early review of this order.*

*The panel was of the view that a striking off order would be disproportionate at this time as it had no information before it to suggest that it is necessary.*

*This suspension order will take effect upon the expiry of the current suspension order, namely the end of 2 May 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:*

- *Your engagement and attendance at any future review hearing.*
- *An updated reflective statement demonstrating sufficient insight as to your misconduct and the panel's findings including the underlying reasons for your decision to record the patient and share this with a colleague, the motivations behind your actions and the reasons why they would be unlikely to be repeated in the future, particularly as your fitness to practise has been found to be impaired on two separate occasions.*
- *Any references or testimonials attesting to your capability to perform your duties, in whatever role, professionally in any paid or unpaid work subsequent to this hearing.*
- *Any relevant training courses undertaken in the areas of concern subsequent to this hearing.*

*This panel notes that a future panel may also be assisted by having sight of your reflective statement produced for this hearing. ‘*

## **Decision and reasons on current impairment**

The panel has considered carefully whether your fitness to practise remains impaired. Whilst there is no statutory definition of fitness to practise, the NMC 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, including the NMC bundle, your registrant's bundle, including your reflective piece, testimonials, reading log, and training certificates. It has taken account of the submissions made by Ms Whawell on behalf of the NMC, and Mr Austin-Jones on your behalf.

Ms Whawell took the panel through the background of the case, and referred the panel to the relevant documentation.

Ms Whawell submitted that you have been unable to demonstrate safe practice in an unrestricted way due to your DBS barring which is still in place. She submitted that you have been unable to practise, and therefore have not been able to demonstrate how you will implement your action plan in a pressured and stressful clinical setting.

Ms Whawell submitted that, at the previous review, it was submitted on your behalf that a further 12-month suspension order would enable you to progress the matter of your current DBS barring, however, she submitted that there is no mention of it within your bundle at today's hearing.

Ms Whawell submitted that your fitness to practise remains impaired, particularly due to your inability to demonstrate safe practice. She submitted that there remains a risk to the public if you were to return to unrestricted practice without a finding of impairment.

Ms Whawell submitted that a finding of impairment is also in the public interest, in order to maintain proper professional standards and public confidence in the nursing profession.

Ms Whawell submitted that a conditions of practice order would not be workable while your DBS barring remains in place. She submitted that a further period of suspension is appropriate and proportionate, in order to allow further time for your DBS barring matter to be resolved. She submitted that, however, at some point, a panel must "*grapple with how*

*long that position can be maintained, as substantive orders are not intended to be indefinite.”*

Mr Austin-Jones, on your behalf, submitted that a conditions of practice order is the preferred order in this case, however, he submitted that pragmatically, that may not be possible due to the current position with the DBS barring.

Mr Austin-Jones submitted that you have been unable to resolve your DBS barring. He submitted that you have previously been given “unfortunate advice” around this and in addition, you have been unable to secure a solicitor to represent you [PRIVATE].

Mr Austin-Jones submitted that you have engaged substantially with this process. He submitted that your reflection covers the impact on the patient themselves, and your colleagues. He invited the panel to consider the detail and clarity of your reflection.

Mr Austin-Jones informed the panel that you are currently working as a bus driver with no issues in relation to your work. He submitted that you are also undertaking voluntary work; you have been teaching some first aid under your adult teaching certificate.

Mr Austin-Jones submitted that you fully understand the seriousness of your conduct and mistakes made, and that you have continued over the past three years to update your clinical knowledge and to further develop your insight and reflection.

In response to the panel’s questions, you told the panel that the RCN had, on your behalf, submitted a request to the DBS Barring Service to allow you to appeal the DBS barring.

The panel 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 your fitness to practise remains impaired.

The panel acknowledged that you have provided evidence of completed training courses, and that your reflection appears to show developing insight. However, the panel was missing information around what you particularly learned in relation to the training you undertook, how you would apply this to your work and practice in the future, and how this would assist you in not repeating the same behaviours going forward. Taking all the above into account, the panel concluded that your insight is not yet fully developed.

The panel took into account that there is insufficient information around your ability to practise safely. You have been unable to practise in a clinical setting due to your DBS barring, which is still in place. The panel noted that despite requesting a period of time to address the DBS barring at the last review, you have not done so.

The panel took into account the positive testimonials provided by you, however, it noted that these are predominantly historic. The panel did not have before it any up-to-date testimonials relating to your present work and volunteering activities, as requested by the previous panel.

In light of the above, the panel determined that you are liable to repeat matters of the kind found proved by the substantive fitness to practise panel. 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 determined that, in this case, a finding of continuing impairment on public interest grounds is also required.

For these reasons, the panel finds that your fitness to practise remains impaired.

### **Decision and reasons on sanction**

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

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

The panel first considered whether to take no action but concluded that this would be inappropriate in view of the seriousness of the case. 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, but the Committee wants to mark that what happened 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 a conditions of practice order 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 that, while you have a DBS barring in place, any conditions formulated would be unworkable as you cannot work in a healthcare or nursing setting.

The panel considered the imposition of a further period of suspension. It was of the view that a suspension order would allow you further time to fully reflect on your previous conduct, and address the DBS barring. The panel concluded that a further 12 month suspension order would be the appropriate and proportionate response and would afford you adequate time to further develop your insight and take steps to strengthen your practice, and address the DBS barring. It would also give you an opportunity to approach current employers to attest to your ability to practise safely and professionally in your workplace assignments since the substantive hearing.

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. It considered this to be the most appropriate and proportionate sanction available.

This suspension order will take effect upon the expiry of the current suspension order, namely the end of 2 May 2026 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:

- Your engagement and attendance at future hearings
- The following information to be provided at least 14 days prior to your next review hearing:
  - Written confirmation of any actions taken by you and progress made in relation to your DBS barring
  - An up-to-date reflective statement, which includes an explanation as to how your reflections have developed your practice, and how you plan to employ any learning to your practice in the future.
  - Up-to-date references and testimonials from present employers and organisations that you volunteer with, attesting to your ability to perform and work safely with the public.
  - Certificates from training courses relevant to the areas of concern, undertaken since this review, with an explanation as to how your learning has developed your practice, and how you plan to employ any learning to your practice in the future.

The panel noted that the previous panel was advised, by you via your representative, that a 12 month suspension order would give you time to undertake an appeal to the DBS and to secure the removal of your barring.

The panel today was presented with almost the same situation as the previous panel in relation to the DBS barring. This panel emphasises the importance of the position of the DBS review, which will be fundamental to the next reviewing panel. This panel noted with concern that there has been no progress made in relation to this, and that without sufficient information, the next reviewing panel may consider a more serious sanction.

This will be confirmed to you in writing.

That concludes this determination.