

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

**Substantive Order Review Hearing
Monday, 10 August 2026**

Virtual Hearing

Name of Registrant:	Jophil George
NMC PIN:	19I0594O
Part(s) of the register:	Registered Nurse- Sub part 1 Adult nurse - 23 September 2019
Relevant Location:	Derbyshire
Type of case:	Misconduct
Panel members:	Emma Moir (Chair, Lay member) Aries Maximus Ogbuokiri (Registrant member) Aurora Piergiacomini Contadini (Lay member)
Legal Assessor:	Jayne Salt
Hearings Coordinator:	Sara Glen
Nursing and Midwifery Council:	Represented by Hina Pattani, Case Presenter
Mr George:	Present and represented by John Mackell, instructed by the Royal College of Nursing (RCN)
Order being reviewed:	Suspension order (6 months)
Fitness to practise:	Impaired
Outcome:	Suspension order replaced with a conditions of practice order (12 months)

Decision and reasons on review of the substantive order

The panel decided to replace the current suspension order with a conditions of practice order.

This order will come into effect at the end of 18 September 2026 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 13 February 2026.

The current order is due to expire at the end of 18 September 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. On or around December 2022:

- a. hugged Colleague A **[PROVED]***
- b. put your hand inside Colleagues A's t-shirt **[PROVED]***
- c. ...*
- d. whilst in the training room:*
 - i. kissed Colleague A **[PROVED]***
 - ii. grabbed Colleague A's breasts **[PROVED]***

*2. On 29 December 2022 kissed Colleague A. **[PROVED]***

3. On 9 November 2023:

- a. told Colleague A that she "was looking very beautiful" or words to that effect **[PROVED]***

- b. tried to hug Colleague A **[PROVED]**
- c. asked Colleague A for a kiss **[PROVED]**

4. Your conduct at 1 – 3 inclusive was sexually motivated in that you were seeking sexual gratification. **[PROVED with respect to Charges 1a, 1b, 1d(i) and 1d(ii)]**

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:

'The panel next went on to decide if as a result of your misconduct, your fitness to practise is currently impaired.

In coming to its decision, the panel had regard to the NMC Guidance on 'Impairment' (Reference: DMA-1 Last Updated:28/01/2026) in which the following is stated:

'Being fit to practise is not defined in our legislation but for us it means that a professional on our register can practise as a nurse midwife or nursing associate safely and effectively without restriction.'

Nurses occupy a position of privilege and trust in society and are expected at all times to be professional and to maintain professional boundaries. Patients and their families must be able to trust nurses with their lives and the lives of their loved ones. To justify that trust, nurses must make sure that their conduct at all times justifies both their patients' and the public's trust in the profession.

In this regard the panel considered the judgment of Mrs Justice Cox in the case of Grant in reaching its decision. In paragraph 74, she said:

'In determining whether a practitioner's fitness to practise is impaired by reason of misconduct, the relevant panel should generally consider not

only whether the practitioner continues to present a risk to members of the public in his or her current role, but also whether the need to uphold proper professional standards and public confidence in the profession would be undermined if a finding of impairment were not made in the particular circumstances.'

The panel considered the three questions asked in the case of Cohen. The panel was aware that this is a forward-looking exercise and first considered whether your misconduct was remediable and whether you have remedied your misconduct. It considered your testimonials and training certificates.

The panel considered that your misconduct is difficult to remediate, given the nature of the allegations and the attitudinal nature of your conduct. With respect to whether you have remedied the concerns, the panel noted that when Colleague A's allegation with respect to the break room incident was raised to you, you were remorseful and later completed several training courses and have provided reflective statements in relation to professional boundaries and communication. During your oral evidence, you further expressed remorse for your actions. However, the panel considered that this was not in relation to your more serious conduct, which it determined to be sexually motivated. In light of this, the panel concluded that your insight, although in the very early stages of developing, was insufficient to demonstrate meaningful remediation of the concerns.

Due to your limited insight, the panel concluded that it is not 'extremely unlikely' that the misconduct will be repeated. The panel therefore decided that a finding of impairment was necessary on the grounds of public protection.

The panel bore in mind that the overarching objective of the NMC is the protection of the public. This involves the pursuit of the following objectives: to protect, promote and maintain the health, safety, and well-

being of the public; to promote and maintain public confidence in the professions; and to promote and maintain proper professional standards and conduct for members of those professions.

The panel determined that a finding of impairment on public interest grounds is also required as this case involves an experienced nurse, who has been found to have sexually assaulted a colleague in the workplace. The panel was of the view that a well-informed and reasonable member of the public would be deeply concerned by the circumstances of this case and that public confidence in the nursing profession would be undermined if a finding of impairment was not made. The panel therefore 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.'

The original 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 protect the public nor be in the public interest to take no further action.

The panel next considered a caution order and had regard to the NMC Guidance on 'Caution order' (Reference: SAN-2b Last Updated: 28/01/2026) in which the following is stated:

'A caution is only appropriate if the Committee has decided there's no risk to the public or to people using services that requires the professional's practice to be restricted. This means 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 actions were not at the lower end of the spectrum of impairment, and it found that there is a risk to patient and public safety, albeit a relatively low one. The panel therefore determined that it would neither protect the public nor be in the public interest to impose a caution order.

The panel next considered whether placing conditions of practice on your registration would be appropriate. The panel is mindful that any conditions imposed must be relevant, proportionate, workable and measurable. The panel had regard to the NMC Guidance on 'Conditions of practice order' (Reference: SAN-2c Last Updated: 28/01/2026) and had regard to the following factors:

- *'no evidence of deep-seated personality or attitudinal problems*
- *identifiable areas of the professional's practice in need of assessment and/or retraining*
- *...*
- *potential and willingness to respond positively to retraining (this should be based on specific evidence provided by the professional)*
- *...*
- *people using services will not be put at risk either directly or indirectly as a result of the conditions*
- *conditions can be created that can be monitored and assessed.'*

The panel is of the view that there are no relevant, proportionate, workable or measurable conditions that could be formulated to protect the public, given the nature of the charges 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 be insufficient to maintain public confidence in the profession nor uphold proper standards.

The panel went on to consider whether a suspension order is appropriate in this case. The panel had regard to the NMC Guidance on ‘Suspension order’ (Reference: SAN-2d Last Updated: 28/01/2026) in which the following factors on when a suspension order may be appropriate are set out:

- ‘the impairment is very serious but not fundamentally incompatible with continuing to be a registered professional*
- an outcome less severe than strike-off would still satisfy the over-arching objective.’*

The panel also had regard to the key considerations as set out in the NMC Guidance to weigh up before imposing a suspension order. It noted the following list of circumstances that may make a suspension order an appropriate sanction:

- ‘the charges found proved are at the most serious end of the spectrum and call into question the professional’s suitability to continue practising, either currently or at all*
- while it is possible that the professional could be fit to practise in future, only a period out of practice would be sufficient to allow them to fully strengthen their practice through reflection, the development of their professional skills and / or development of insight and remediation*
- there is a risk to the safety of people using services if the professional were allowed to continue to practise even with conditions*
- what went wrong is so serious that public confidence in the profession and professional standards could not be maintained if the professional were able to continue practising without stopping for a period of time*
- despite the seriousness of what happened, the professional has engaged in the proceedings and has shown at least some meaningful insight which evidences a realistic possibility that they will continue to develop this insight, address their concerns and return to practice.’*

The panel carefully balanced all the factors and determined that although the misconduct was serious and required a significant regulatory response, it was not fundamentally incompatible with you remaining on the register. The panel determined that a period of suspension would be sufficient to mark the gravity of your misconduct and provide a meaningful opportunity for further reflection and development, whilst recognising that the risk of repetition is relatively unlikely and that there remains a prospect of safe return to practice.

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

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

[PRIVATE]

However, this is outweighed by the public interest considerations in this case.

The panel considered that this order is necessary to mark the seriousness of this case, in order to maintain public confidence in the profession, and to send to the public and the profession a clear message about the standard of behaviour required of a registered nurse.

The panel determined that a suspension order for a period of six months was appropriate in this case to mark the seriousness of the misconduct. This should provide sufficient time for you to undertake the required further development of your insight. The panel further considered that any lesser period would be insufficient to mark your misconduct.

At the end of the period of suspension, another panel will review the order.

At the review hearing the panel may revoke the order, or it may confirm the order, or it may replace the order with another order.

Any future panel reviewing this case would be assisted by:

- *A reflective piece demonstrating a clear understanding of the seriousness of the misconduct, including the physical sexual contact;*
- *Evidence of developed insight into professional boundaries and the impact of your inappropriate behaviour on Colleague A;*
- *Evidence that you continue to maintain and update your professional knowledge including but not limited to training, reading, research, or other relevant professional development;*
- *Testimonials or references from any employer, voluntary organisation, or other professional setting in which you have been engaged during the period of suspension, addressing your conduct, professionalism, and adherence to appropriate boundaries.'*

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, as well as your bundle containing five reflective statements, two testimonials, a reading log and training certificates and screenshots of job applications. It has taken account of the submissions made by Dr Pattani on behalf of the NMC.

Dr Pattani took the panel through the background of the case and referred the panel to the relevant documentation in the bundle.

Dr Pattani submitted that it is the NMC's position that on the expiry of the current suspension order, a conditions of practice order should be imposed.

Dr Pattani submitted that the matter that led to the suspension order was an extremely serious matter and was a matter of sexual conduct. She submitted that this matter related to unwanted physical, sexual conduct towards a vulnerable colleague and there was a clear power hierarchy whereby you were working as a nurse and Colleague A was a healthcare assistant. Further, Dr Pattani submitted [PRIVATE]. Dr Pattani submitted that the previous panel found [PRIVATE]. Colleague A was fearful of reporting the first incident due to the impact on her job.

Dr Pattani submitted the previous panel found that you had limited insight into the impact of your actions on Colleague A. Dr Pattani submitted that it is the NMC's position that your insight remains limited. She referred the panel to your reflective statement and submitted that all that is said about the negative impact of your actions on Colleague A is that there was an impact. She submitted that there is nothing in your reflection around what that impact could have been and of any steps, if any, to mitigate this from happening again in the future. Further she submitted that there is no real understanding of the impact on Colleague A.

Further, in your reflection, Dr Pattani submitted that you state that you maintain your position. She submitted that this is concerning in light of a police warning having been given about these incidents and that there is no mention of the police warning or anything of that nature in your reflection that would reflect the seriousness of what occurred and the impact on Colleague A. She submitted that there was a clear breach of professional boundaries.

Dr Pattani submitted that a conditions of practice order is necessary as your insight is still developing and you should not go from a suspension order straight into unsupervised, unrestricted practise. She submitted that the testimonials before the panel are limited, one is dated before the substantive suspension order was imposed and one is dated August

2026. The most recent says that you have enough insight to resign from your post of employment rather than take on a more administrative role.

Dr Pattani submitted that there is evidence of training which you have undertaken. She submitted that it is clear from your training certificates that it has occurred in the month of July 2026 and therefore you have had limited time to reflect on what you have learnt and to make any real change to the ways of behaving from that training.

With regard to the impact that these proceedings have had on you, Dr Pattani submitted that it is the NMC's position that the impact is known and understood and that the panel has to balance any ongoing public safety concerns of you going back to practise after a period of suspension.

Dr Pattani submitted that a conditions of practice order should be imposed for when you return to practice.

When asked if the NMC has any recommended conditions by the panel, Dr Pattani suggested that conditions including one substantive employer with a clear personal development plan and supervision reports at regular intervals are suggested. She submitted that these conditions should remain in place for a period of 12 months.

The panel also had regard to the submissions from Mr Mackell on your behalf.

Mr Mackell referred the panel to the case law of *Economou v de Freitas* [2018] EWCA Civ 2591 and *Cohen v General Medical Council* [2008] EWHC 581 (Admin).

Mr Mackell submitted that no order is required in this case. He submitted that if the panel were minded that an order is necessary, a conditions of practice order could meet the required threshold and requirements.

Mr Mackell submitted that it is evident that you have learned significantly from the findings of fact made against you and that you have learned about the impact that your actions can and did have on a number of people, primarily your colleague. He submitted that this is

noted in your reflective piece where you said, *“I sincerely regret the distress, uncertainty, and difficulty that this process has caused to everyone involved particularly Colleague A.”*

Further, Mr Mackell submitted that you have also reflected on areas where you can improve and enhance your skills set and that this is where you have undertaken additional training. He accepted that the training that you have undertaken was completed recently but submitted that there is no time bar on training and that it is part of your reflection and understanding. He submitted that the courses you have undertaken are relevant to the areas of complaint including courses on ‘*Professional Boundaries*’, ‘*Dignity at work*’ and ‘*Sexual harassment*’ and the application of policies around that area. Mr Mackell submitted that the courses that you have completed are pertinent to the complaints found and that this shows a degree of maturity and reflection. He submitted that you recognise there are areas where you need to be more reticent and aware of your surroundings when you are conducting yourself professionally and that you have said going forward you will ensure that you maintain clear professional boundaries in every interaction.

Further, he submitted that you have said in your reflection in relation the training undertaken on ‘*Sexual Harassment*’,

“I learned that professional behaviour is judged not only by my intentions but also by the impact my words or actions may have on another person. I now recognise that comments, humour, conversations or behaviour that I may not have intended to be harmful can still cause discomfort, embarrassment or distress.”

He submitted that it is evidence that you are someone who has completed a course and have used the information from the course and reflected back on your conduct and what you have learned from it, and what you could do differently in the future. He submitted that this is evidence of someone who can remedy their conduct and who has completed courses to gain additional knowledge and has set out the reasons why the likelihood of that type of behaviour occurring again is significantly reduced. Mr Mackell submitted that this goes a long way to assure the panel that you are someone who has learned from a very difficult period where your actions caused harm.

In weighing up the necessity of an order, Mr Mackell asked the panel to consider that you have been a nurse for many years, starting in India in 2008 and coming to the UK in 2019. He submitted that you have worked in a range of hospital and medical environments without incident or concern for many years. He submitted that these regulatory findings are the only concerns that have been found against you and that this shows that this type of behaviour was not evidenced throughout your career.

Mr Mackell referred the panel to the testimonial provided on your behalf by your manager which he submitted sets out clearly that there were no concerns regarding your competency as a nurse or how you conducted your duties. Further, since the substantive hearing, Mr Mackell submitted that you have resigned from your employment post. He submitted that email correspondence from the business manager at Morton Grange, dated 5 August 2026 says that in their view resigning from your post showed development and acceptance of the outcome of the panel. He submitted that the email correspondence also said that you resigned as they were unable to facilitate a twelve-month period of suspension as they are a small unit, operating with a small group of staff. Mr Mackell submitted that Morton Grange did not have any concerns about your competency or ability to work as a nurse.

With regard to the impact of a suspension order on you, [PRIVATE] you have applied to a number of jobs, not within the health sector and that you have been unable to secure employment. Mr Mackell submitted that if a suspension order were to continue to be imposed, [PRIVATE]. He submitted there is an absence of evidence in the form of a testimonial on your capacity to work as you have been unable to secure employment.

Mr Mackell submitted that in consideration of the necessity of an order, you worked effectively for around two years under an interim conditions of practice order whilst these matters were being investigated, prior to the substantive hearing. Mr Mackell submitted that you have the ability to work within conditions and to work effectively and without incident under those conditions. He submitted that if the panel were minded to impose a conditions of practice order, there are conditions which are workable, proportionate and which could meet the requirements of the panel in order to give them assurance that you can work effectively without any similar types of complaints arising. If conditions were to be

imposed, he submitted that there could be safeguards by way of supervision and regular engagement with management by way of having one substantive employer.

Mr Mackell submitted that no order is necessary due to good testimonial evidence, your previous work background and degree of reflection set out within the reflections provided to the panel at today's hearing. He submitted that if the panel were not minded to give no order, then there are conditions which are workable, proportionate and could manage the associated risks. Further, there are conditions which would allow you the opportunity to demonstrate a capacity to work after the suspension has been completed and demonstrate effectively that there is limited or no risk of these types of complaints arising in the future.

When asked what your position was in relation to the allegations, Mr Mackell submitted on your behalf that you said whilst the interactions took place, you dispute that those were sexual in nature but that you accept the outcome of the panel's decision and that you have not appealed its decision in any way. He submitted that you describe the instance that occurred differently but acknowledge that the interactions crossed professional boundaries and that you accept the outcome as set out in the substantive findings of the panel.

When asked if you could provide further detail on what the impact on Colleague A could have been, Mr Mackell submitted on your behalf that you said you recognised that the interactions impacted Colleague A's wellbeing and her safety. You understand you're your actions made her feel uncomfortable, vulnerable and unsafe in the workplace and that she may have lost trust in that workplace as a result of your actions and conduct.

When asked why the reference describes the substantive suspension imposed as 12 months and what information you provided before your manager wrote the reference, Mr Mackell submitted on your behalf that this is a typographical error and that the substantive order was provided by you at the time. The author of the testimonial was aware during the duration of the suspension order of the background of the case and the outcome. An updated email was received during the course of the hearing from the Business Manager dated 7 August 2026 clarifying the suspension order as 6 months.

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 your fitness to practise remains impaired.

The panel had regard to NMC Guidance Rev-2a namely '*Standard reviews of substance orders before they expire*' last updated 30 August 2024 and DMA-1 namely '*Impairment*' last updated 28 January 2026.

The panel considered the serious nature of the charges found proved and took into consideration the aggravating features found by the previous panel. It considered that the sexual misconduct found proved breached one of the fundamental tenets of the nursing profession. Further, the panel considered the vulnerability of Colleague A, in particular as it heard that at the time of the allegations, she lived at the care home and that she had recently moved to the UK from India. The panel also considered that there was a power imbalance at the time of the matters found proved, whereby you were working as a nurse and that Colleague A was working as a healthcare support worker.

The panel had regard to the following evidence provided by you at this hearing;

- Reflective statement dated August 2026
- Reflective account on Professional boundaries training
- Reflective account on Sexual harassment training
- Reflective account on Dignity in workplace training
- Reflective account on Professional communication training
- Testimonial from your manager at Morton Grange Nursing Home dated 5 February 2026.
- Email communication from the Business Manager at Morton Grange dated 5 August 2026.
- Updated email communication from the Business Manager at Morton Grange dated 7 August 2026.
- Your record of reading.

- Including training certificates on ‘*Sexual Harassment in the workplace*’ dated 1 July 2026, ‘*Professional Boundaries*’ dated 3 July 2026 and ‘*Dignity in care*’ dated 3 July 2026 and other training evidence.
- Screenshots of job applications.

The panel noted that the original panel found that you had limited insight. At this hearing the panel determined that whilst your insight is developing, it is still limited. The panel considered that your reflective statement was written recently in August 2026 and whilst the panel recognised that you have made an effort to reflect on the matters found proved, you have only made one brief reference to Colleague A in your registrant bundle of 57 pages. You said;

‘I sincerely regret the distress, uncertainty, and difficulty that this process has caused to everyone involved particularly Colleague A but also, my colleagues and my profession’.

The panel considered that you have not fully demonstrated insight as to the impact that your actions may have had on Colleague A, how she may have felt and how your actions may have had an impact on your colleagues and patients as well. The panel also took into consideration your answer during panel questions whereby you said through your representative, Mr Mackell, that whilst you accepted the previous panel’s decision, you did not agree that your actions amounted to sexual misconduct. The panel accept that you dispute some of the facts found proved and that does not in itself prevent the panel from making a finding of sufficient insight. However, the panel found that the evidence presented did not demonstrate sufficient insight on the seriousness of the misconduct, the potential risk to patients and damage to the profession arising from the facts found proved. As a result the panel concluded that your insight is still limited and developing.

In its consideration of whether you have taken steps to strengthen your practice, the panel noted the training certificates provided, demonstrating that you have undertaken recent training relevant to the matters found proved and your reflections on what you have learnt from each of the training courses. Further the panel considered that you have said that you are currently unemployed and unable to secure employment at this time, limiting your ability to obtain evidence demonstrating any clinical practice. It noted the two testimonials

provided at this hearing, one from your manager at the care home dated 5 February 2026 which is positive about your professionalism and states that there have been no concerns raised from staff members about your behaviour. The other testimonial dated 5 August 2026 from the Business Manager at the care home states they were unable to accommodate your employment after the imposition of the substantive suspension order and that you resigned. It states that there were no concerns raised about your practice during the period of your interim conditions of practice order. Whilst the panel acknowledged that you have had difficulty obtaining employment, it considered that you could have provided testimonials from any voluntary organisation or from those who know you as character references, which would further demonstrate any strengthening of practice at today's review hearing.

The original panel determined that due to your limited insight, '*it is not 'extremely unlikely' that the misconduct will be repeated.*' This panel determined that due to your developing but still limited insight as to the impact of your actions on Colleague A, that it is the case that it is not highly unlikely that your misconduct will be repeated. As such, 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

The panel had regard to NMC guidance San-2 '*The sanctions available*' last updated 28 January 2026.

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 considered substituting the current suspension order with a conditions of practice order. Despite the seriousness of your misconduct, there has been evidence produced to show that whilst your insight is limited, it is developing and you have provided evidence of the steps you have taken to strengthen your practice by way of training you have undertaken and reflective accounts on that training. The panel did not consider your misconduct to be as a result any deep-seated attitudinal issues, as evidenced by your continued engagement with the regulatory process and absence of any previous reported incidents of this nature to the NMC. You have indicated that you wish to return to nursing practise. The panel considered that the seriousness of your misconduct has been marked by your current substantive suspension order imposed for a period of six months.

As such, the panel was satisfied that it would be possible to formulate practicable and workable conditions that, if complied with, may lead to your unrestricted return to practice and would serve to protect the public and the reputation of the profession in the meantime.

The panel decided that the public would be suitably protected as would the reputation of the profession by the implementation of the following conditions of practice:

'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 which must not be an agency or involve any bank work.
2. You must meet with your line manager, supervisor or mentor monthly to discuss your conduct in relation to your adherence to appropriate professional boundaries.
3. You must collate reports from your line manager, supervisor for the next review hearing. If any concerns are raised in such a report these must be immediately reported to the Nursing and Midwifery Council.
4. You must keep the Nursing and Midwifery Council informed about anywhere you are working by:
 - a. Telling the Council within seven days of accepting or leaving any employment.
 - b. Giving the Council your employer's contact details
5. 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.

6. You must tell the Council, within seven days of your becoming aware of:
 - a. Any investigation started against you.
 - b. Any disciplinary proceedings taken against you.
7. You must allow the Council 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.

This conditions of practice order will take effect upon the expiry of the current suspension order, namely the end of 18 September 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 you have 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:

- Evidence of in-depth reflection demonstrating a clear understanding of the seriousness of the type of misconduct found proved including the impact of your inappropriate behaviour on Colleague A.

- Evidence that you continue to maintain and update your professional knowledge including but not limited to training, reading, research and other relevant professional development.
- Testimonials or references from any employer, voluntary organisation or other professional setting addressing your conduct, professionalism and adherence to appropriate boundaries.

This will be confirmed to you in writing.

That concludes this determination.