Nursing and Midwifery Council
Fitness to Practise Committee

Substantive Order Review Hearing
Wednesday, 5 August 2026

Virtual Hearing

Name of Registrant:	**Ludo Msinamwa**
NMC PIN:	05H0198O
Part(s) of the register:	Registered Nurse – Sub Part 1 Adult Nursing - (5 August 2005)
Relevant Location:	Somerset
Type of case:	Misconduct
Panel members:	James Carr (Chair, Lay member) Elaine Whitton (Registrant member) Tricia Breslin (Lay member)
Legal Assessor:	Lachlan Wilson
Hearings Coordinator:	Sara Glen
Nursing and Midwifery Council:	Represented by Lucia Brieskova, Case Presenter
Ms Msinamwa:	Not present and not represented at this hearing
Order being reviewed:	Conditions of practice order (12 months)
Fitness to practise:	Impaired
Outcome:	**Striking-Off order to come into effect on 7 September 2026 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 Ms Msinamwa was not in attendance and that the Notice of Hearing had been sent to Ms Msinamwa's registered email address by secure email on 6 July 2026.

Ms Brieskova, 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 Ms Msinamwa'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 Ms Msinamwa 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 Ms Msinamwa.

The panel next considered whether it should proceed in the absence of Ms Msinamwa. The panel had regard to Rule 21 and heard the submissions of Ms Brieskova, who invited the panel to continue in the absence of Ms Msinamwa.

Ms Brieskova referred the panel to the relevant case law of *R v Jones (Anthony William)* (No.2) [2002] UKHL 5 and *General Medical Council v Adeogba* [2016] EWCA Civ 162.

Ms Brieskova submitted that there had been no engagement at all by Ms Msinamwa with the NMC in relation to these proceedings. Further, there has been no application for adjournment and there is no reason to believe that an adjournment would secure her

attendance on some future occasion. Ms Brieskova submitted that there is a strong public interest in the expeditious review of these proceedings and that this is a mandatory review.

Ms Brieskova submitted that it is fair, appropriate and proportionate to proceed in Ms Msinamwa's absence.

The panel accepted the advice of the legal assessor.

The panel has decided to proceed in the absence of Ms Msinamwa. In reaching this decision, the panel has considered the submissions of Ms Brieskova 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 Ms Msinamwa;
- Ms Msinamwa has voluntarily absented herself;
- Ms Msinamwa has not engaged with the NMC since an email on 6 August 2025 and has not responded to any correspondence sent to her about this hearing;
- Ms Msinamwa has not attended the last two hearings in 2024 and 2025;
- Ms Msinamwa has not provided the NMC with details of how she may be contacted other than her registered email address;
- There is no reason to suppose that adjourning would secure her attendance at some future date;
- This is a mandatory review with an upcoming expiry; and
- There is a strong public interest in the expeditious review of the case.

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

Decision and reasons on review of the substantive order

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

This order will come into effect at the end of 7 September 2026 in accordance with Article 30(1) of the 'Nursing and Midwifery Order 2001' (the Order).

This is the third review of a substantive conditions of practice order originally imposed for a period of 12 months by a Fitness to Practise Committee panel on 10 August 2023. This was reviewed on 31 July 2024 and the conditions of practice order was confirmed and continued for a further period of 12 months. This was reviewed again on 3 September 2025 where the conditions of practice order was confirmed and continued for a period of 12 months.

The current order is due to expire at the end of 7 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. Having agreed undertakings recommended in the light of a case to answer being found in respect of the regulatory concerns set out in Schedule 1, failed to remedy the issues identified in your practice in that you breached the undertakings listed in schedule 2.

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

Schedule 1

Medication administration
Concerns with falls management and escalating concerns
Poor record keeping
Failure to adhere to care plan – moving and handling

Schedule 2

Undertaking 9

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

- *Following care plans in relation to moving and handling after a person has fallen*
- *Your assessment and observations of people after they have fallen*
- *Your documentation in relation to falls.*

You will:

- *Send your case officer a copy of your PDP within 2 weeks of these undertakings becoming effective*
- *Meet with your workplace manager, supervisor or mentor at least every two weeks to discuss your progress towards achieving the aims set out in your PDP*
- *Send your case officer a report from your workplace manager, mentor or supervisor every month. This report will show your progress towards achieving the aims set out in your PDP and comment on the standard of your practice in relation to the specific areas detailed in this undertaking.*'

The third reviewing panel determined the following with regard to impairment:

'The panel noted that the last reviewing panel found that Ms Msinamwa had not demonstrated developing insight and that it had insufficient evidence before it to conclude that this had changed.

The last reviewing panel determined that Ms Msinamwa was liable to repeat matters of the kind found proved. Today's panel noted that Ms Msinamwa had not submitted any new evidence since the last substantive

order review hearing. In light of this, this panel determined that Ms Msinamwa remains 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 noted that the original panel found Ms Msinamwa had demonstrated no developing insight. At this hearing the panel took into account the absence of any new evidence. The panel considered Ms Msinamwa had given two email updates, in August 2025 and September 2025, in relation to her attendance however, noted she had no other engagement with the regulatory process.

In considering whether Ms Msinamwa had taken steps to strengthen her practice, the panel noted the absence of evidence since the imposition of the conditions of practice order. The panel noted that there was no reflective piece written by Ms Msinamwa.

The panel considered whether Ms Msinamwa's fitness to practise remains impaired.

The panel concluded there was no new evidence on which it could say risk of repetition has diminished. 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 required.

The panel bore in mind the overarching objectives of the NMC is 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. The panel was of the view that a well-informed member of the public would be extremely concerned if Ms Msinamwa were allowed to practise without restriction. The panel concluded that public confidence in the profession would be undermined if a finding of impairment were not made in this case. Accordingly, it finds Ms Msinamwa's fitness to practise impaired on the grounds of public interest.

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

The third 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 serious matters of concern in this case, and the public protection issues identified, an order that does not restrict Ms Msinamwa'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 Ms Msinamwa'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 imposing a further conditions of practice order on Ms Msinamwa's registration would still be a sufficient and appropriate response. The panel is mindful that any conditions imposed must be proportionate, measurable and workable.

The panel determined that it remains possible to formulate appropriate and practical conditions which would address the failings highlighted in this case. The panel noted that Ms Msinmwa(sic) had not engaged with the NMC and therefore had not complied with the conditions of practice. However, it was of the view that conditions of practise would, if complied with, adequately address the concerns.

The panel was very concerned with the lack of engagement, remediation and of any insight or strengthening of practice demonstrated by Ms Msinamwa.

The panel was of the view that a further conditions of practice order is sufficient to protect patients. The panel considered the wider public interest and the maintaining of professional standards, noting as the original panel did that there was no evidence of general incompetence or no deep-seated attitudinal problems. The panel noted Ms Msinamwa had indicated she would attend the earlier, ineffective date 6 August 2025, and the recent acknowledgement of today's hearing and that there is an element of optimism for her continued and progressive engagement in this case, despite the clear lack of previous engagement. There is a duty on Ms Msinamwa to comply and proactively engage in the proceedings.

The panel was of the view that to impose a suspension order would not necessarily be disproportionate at this stage given the lack of clear progress and would not be an unreasonable response in the circumstances of Ms Msinamwa's case. But that it was of the view that it would be fair to afford her another opportunity to comply with the conditions of practise.

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 7 September 2025. 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 keep the NMC informed about anywhere you are working by:

a) Telling your case officer within seven days of accepting or leaving any employment.

b) Giving your case officer your employer's contact details.

2. 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.

3. You must keep us informed about anywhere you are working by:

a) Telling your case officer within seven days of accepting or leaving any employment.

b) Giving your case officer your employer's contact details.

4. You must keep us 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.

5. You must immediately give a copy of these conditions to:

a) Any organisation or person you work for.

b) Any agency you apply to or are registered with for work.

c) Any employers you apply to for work (at the time of application).

d) 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 not be the nurse in charge of a shift.

7. You must not be the sole nurse on a shift.

8. You will ensure that you are supervised by another registered nurse at any time you are working. Your supervision will consist of working with, but not always directly observed by a registered nurse nominated by your workplace manager.

9. You will work with your workplace manager, supervisor or mentor to create a personal development plan (PDP). Your PDP will address:

- *Falls prevention*

• Management of patients following a fall including:

- Assessments

- Observations

- Moving and handling

- Care planning and escalation

You will:

• Send your case officer a copy of your PDP within a month of starting your employment
• Meet with your workplace manager, supervisor or mentor at least every month to discuss your progress towards achieving the aims set out in your PDP

• Send your case officer a report from your workplace manager, mentor or supervisor every three months. This report will show your progress towards achieving the aims set out in your PDP and comment on the standard of your practice in relation to the specific areas detailed in this undertaking.

The period of this order is for 12 months.'

Decision and reasons on current impairment

The panel has considered whether Ms Msinamwa'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, including the NMC bundle. It has taken account of the submissions made by Ms Brieskova on behalf of the NMC.

Ms Brieskova took the panel through the background of the case and referred the panel to the relevant documentation in the bundle.

Ms Brieskova submitted that Ms Msinamwa is not in attendance at this hearing and has not submitted any of the evidence that the last reviewing panel recommended. Ms Brieskova submitted that Ms Msinamwa has not submitted any evidence of insight, remediation or strengthening of practice since the substantive hearing took place three years ago.

Ms Brieskova submitted that there is no information before the panel to demonstrate that Ms Msinamwa has developed insight nor demonstrated compliance with the conditions of practice order imposed. She submitted that there is also nothing to suggest that Ms Msinamwa has demonstrated an understanding of how her previous actions put patients at risk of harm and how this has impacted on the reputation of the nursing profession or breached the fundamental tenets of the nursing profession and brought it into disrepute.

Ms Brieskova submitted that there remains no new evidence to demonstrate that Ms Msinamwa has taken any steps to strengthen her practise. She submitted that without this evidence of remediation, full insight into her previous misconduct there is a real risk of repetition of the matters found proved. She submitted that the panel may find that a finding of impairment is necessary on the ground of public protection and in the wider public interest as there is a clear risk of repetition of harm to patients.

Further she submitted a finding of impairment is necessary in order to uphold the standards of conduct and performance of such an important profession as nursing.

In relation to sanction, Ms Brieskova submitted that the NMC is neutral. However, she submitted that Ms Msinamwa has been given numerous opportunities over the years to work towards her improvement as per the undertakings and then conditions in the conditions of practice order. Ms Brieskova submitted that Ms Msinamwa has not done anything to comply with these. She invited the panel to consider that one year has passed since the last review hearing and that Ms Msinamwa is still in the same position that she was at the substantive hearing in August 2023.

The panel accepted the advice of the legal assessor.

The panel had regard to the NMC guidance REV-2 namely '*Substantive order reviews'* last updated 14 October 2022 and DMA-1 '*Impairment*' last update 28 January 2026.

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 Ms Msinamwa's fitness to practise remains impaired.

The panel noted that the last reviewing panel had nothing before it to suggest that Ms Msinamwa had sufficient insight into her misconduct. This panel had no new information before it to suggest that Ms Msinamwa had any insight into her failings due to her non engagement with the NMC.

In its consideration of whether Ms Msinamwa has taken steps to strengthen her practice, the panel noted that there was no evidence before it today to demonstrate that Ms Msinamwa had undertaken any additional learning or training since the imposition of the conditions of practice order.

The last reviewing panel determined that Ms Msinamwa was liable to repeat matters of the kind found proved. Today's panel determined that due to the lack of evidence that Msinamwa has any insight into her misconduct, remediation or has undertaken training to demonstrate strengthening of practice, Ms Msinamwa continues to be 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 this case, a finding of continuing impairment on public interest grounds is also required.

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

Decision and reasons on sanction

Having found Ms Msinamwa'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 Sanction Guidance (SG) specifically; SAN-1 '*The purpose and approach to sanctions*' last updated 28 January 2026, SAN-2d '*Suspension Order*' last updated 28 January 2026 and REV-2h '*Removal from the register when there is a substantive order in place*' last updated 13 May 2026.The panel 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 Ms Msinamwa'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 Ms

Msinamwa'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 on Ms Msinamwa's registration would still be a sufficient and appropriate response. The panel is mindful that any conditions imposed must be proportionate, measurable and workable. The panel considered that the conditions in the current conditions of practice order imposed are not onerous and that the conditions are workable and practicable. The panel considered the seriousness of the matters found proved at the original hearing and that there has been no engagement from Ms Msinamwa in relation to these proceedings nor any evidence of any compliance with the current conditions of practice order imposed. As such, the panel considered that a conditions of practice order is no longer workable and would serve no useful purpose due to the repeated failings by Ms Msinamwa to engage in NMC proceedings.

The panel next considered imposing a suspension order. It noted that NMC Guidance SAN-2d on '*Suspension*' says that the key things to consider when imposing a suspension order are;

- *'Whether the risk posed to the public, or to the people receiving care, can only be managed by temporary removal from the Register?*

- *Will suspension be sufficient to protect people using services, public confidence in the profession, or professional standards?*

- *is it realistic that the professional could return to unrestricted practice in the future, even if it is not appropriate for them to do so now?*

- *What would the registrant need to do in order to be fit to practise in the future? Is it realistic that they will be able to do this?*'

The panel noted that apart from one email Ms Msinamwa has not engaged at all with her regulator since August 2023 and at every review hearing she has supplied no evidence of

any compliance with the current substantive conditions of practice order, nor any evidence demonstrating insight, remediation or any steps to demonstrate strengthening of practice. The panel determined that a period of suspension would not serve any useful purpose in all circumstances, having concluded that it is not realistic that Ms Msinamwa would return to unrestricted practise in the future.

The panel gave serious consideration as to whether it should impose a striking off order. It took into account the NMC guidance REV-2h '*Removal from the register when there is a substantive order in plac*e' last updated 13 May 2026.

The panel noted from the above guidance, some of the following factors that must be contemplated when considering removing someone from the Register while still impaired:

> *'It is not in the public interest or a professional's interests to remain on the register indefinitely when they are not fit to practise;*
>
> *Sometimes a conditions of practice order will no longer be workable and there are no alternative conditions that will ensure the public is safe and maintain confidence in the professions we regulate;*
>
> *…*
>
> *Panels should not base their decision whether strike off or lapse with impairment is appropriate solely upon the nature of the allegations as proven by the original panel. Although the seriousness of the original allegations is a relevant factor, what is also important is whether or not the registrant has meaningfully engaged since the substantive decision, any conduct and progress since the last panel determination, any attitudinal concerns present, and the current overall circumstances of the case'*

The panel found that the previous substantive conditions of practice order imposed had given Ms Masinamwa sufficient opportunity to engage with the NMC, provide evidence of her compliance with the conditions of practice order and provide evidence of her insight into her misconduct and strengthening of practice. The panel noted that the previous panel

said in its determination at the last review hearing, it was concerned with '*the lack of engagement, remediation and any insight or strengthening of practice demonstrated by Ms Masinamwa*'. The previous panel also said;

> '*The panel was of the view that to impose a suspension order would not necessarily be disproportionate at this stage given the lack of clear progress and would not be an unreasonable response in the circumstances of Ms Msinamwa's case. But that it was of the view that it would be fair to afford her another opportunity to comply with the conditions of practise*'

This panel determined that Ms Msinamwa has been afforded ample opportunity over the course of the review hearings over the last three years, to demonstrate evidence of her compliance with the current substantive conditions of practice order and engage in the NMC proceedings. The panel considered that through her complete non engagement with the NMC, this has aggravated the seriousness of her misconduct and as such, the panel determined that it was necessary to take action to prevent Ms Msinamwa from practising in the future.

The panel considered whether it would be more appropriate for the substantive order to lapse with a finding of impairment thereby removing Ms Msinamwa from the Register.

The panel noted the following passage from the guidance REV-2h;

> '*A panel should consider allowing a professional to lapse with impairment only in cases where all of the following factors are present;*
>
> - *the professional would no longer be on the register but for the order in place*
> - *the panel concludes that the professional is unlikely to return to safe unrestricted practice within a reasonable period of time*
> - *The case relates solely to health or English language* ***or*** *is one where the professional has retired and has made it clear through engagement with the NMC and evidence that they do not intend to*

*return to practice **or** situations where a professional's inability to address impairment not related to health (for example misconduct or lack of competence) is clearly related to a health condition'*

The panel found that Ms Msinamwa has not engaged with the NMC nor provided any evidence of her insight, remediation or strengthening of practice. The panel noted that as Ms Msinamwa has failed to engage with the NMC, she has not provided any evidence of information as to her health and in these circumstances, the panel was unable to attribute her lack of engagement to any health condition. The panel decided that taking this option, namely, to allow Ms Msinamwa's registration to lapse with impairment, was not appropriate in the circumstances.

The panel concluded that the only sanction that would adequately protect the public and serve the public interest was a striking-off order.

The panel therefore directs the registrar to strike Ms Msinamwa's name off the register.

This striking-off order will take effect upon the expiry of the current conditions of practice order, namely the end of 7 September 2026 in accordance with Article 30(1).

This will be confirmed to Ms Msinamwa in writing.

That concludes this determination.