Nursing and Midwifery Council
Fitness to Practise Committee

Substantive Order Review Hearing
Monday, 3 August 2026

Virtual Hearing

Name of Registrant:	**Shiny Thomas**
NMC PIN:	10E0015O
Part(s) of the register:	Nurses part of the register Sub part 1 RN1: Adult nurse, level 1 (12 May 2010)
Relevant Location:	Kent
Type of case:	Misconduct
Panel members:	James Carr (Chair, lay member) Elaine Whitton (Registrant member) Tricia Breslin (Lay member)
Legal Assessor:	Charlene Bernard
Hearings Coordinator:	Adaobi Ibuaka
Nursing and Midwifery Council:	Represented by Sahara Fergus-Simms, Case Presenter
Mrs Thomas:	Not present and unrepresented at this hearing.
Order being reviewed:	Conditions of practice order (6 months)
Fitness to practise:	Impaired
Outcome:	**Conditions of practice order (6 months) to come into effect on 9 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 Mrs Thomas was not in attendance and not represented, and that the Notice of Hearing had been sent to Mrs Thomas' registered email address by secure email on 3 July 2026.

Ms Fergus-Simms, on behalf of the Nursing and Midwifery Council (NMC), submitted that it had complied with the requirements of Rules 11 and 34 of the 'Nursing and Midwifery Council (Fitness to Practise) Rules 2004', as amended (the Rules).

The panel accepted the advice of the legal assessor.

The panel took into account that the Notice of Hearing provided details of the substantive order being reviewed, the time, date and that the hearing was to be held virtually, including instructions on how to join and, amongst other things, information about Mrs Thomas' right to attend, be represented and call evidence, as well as the panel's power to proceed in her absence.

In the light of all of the information available, the panel was satisfied that Mrs Thomas has been served with notice of this hearing in accordance with the requirements of Rules 11 and 34.

Decision and reasons on proceeding in the absence of Mrs Thomas

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

Ms Fergus-Simms referred the panel to two emails from Mrs Thomas dated 31 July 2026, at 11:55am and 12:09 pm stating the following:

31 July 2026 at 11:55am:

*‘I confirm that I **will not be attending the virtual hearing** on 3 August 2026.*

This has been an extremely difficult decision for me. The fitness to practise process has had a profound impact on [PRIVATE], and I do not feel able to participate in another hearing. The proceedings over the past few years have left me [PRIVATE].

During my previous hearing, I was also [PRIVATE] to observe what appeared to be the NMC representative sleeping during the proceedings. This left me feeling that my case was not being given the attention or respect it deserved. As a result, I have lost confidence that I will receive a fair and impartial hearing, and I do not feel able to place myself before another panel.

I accept that mistakes were made, and I remain genuinely sorry for everything that happened. I have reflected extensively on the events and the impact they have had. However, I no longer have the emotional strength to continue defending myself through repeated hearings.

*I would also like to draw the panel's attention to the attached **Statement of Entry**, which shows that my NMC registration status is recorded as **"Lapsed"**, while also stating that a Conditions of Practice Order is in place.*

I have recently applied for nursing positions, but prospective employers have been unable to locate my PIN on the NMC register because of this status. This has prevented me from obtaining employment as a registered nurse and supporting my family. I am therefore in an impossible position: I cannot practise because my registration appears to have lapsed, yet I remain subject to a Conditions of Practice Order.

My priority is simply to be able to work as a nurse again so that I can provide for my children. I respectfully ask the panel to take this into account when reviewing my case and to clarify my registration status so that I know where I stand.

I appreciate the time and consideration given to my case and thank you for your understanding.’

31 July 2026 at 12:09 pm:

> *'I regret that I am unable to attend this hearing. I also do not have the financial means to instruct a solicitor or legal representative. I respectfully ask the Panel to carefully consider my previous correspondence and all the documents and evidence I have already submitted.'*

Ms Fergus-Simms submitted that it is imperative that the case is heard today in the interest of justice. She submitted that it is in the public interest that there is an expeditious disposal of this case before the expiry of the order, to protect the public and in fairness to Mrs Thomas.

The panel accepted the advice of the legal assessor.

After careful consideration the panel decided to proceed in the absence of Mrs Thomas. In reaching this decision, the panel has considered the submissions of Ms Fergus-Simms, Mrs Thomas' email dated 31 July 2026 and the advice of the legal assessor. It has had particular regard to any relevant case law and to the overall interests of justice and fairness to all parties. It noted that:

- No application for an adjournment has been made by Mrs Thomas;
- Mrs Thomas has only attended one of the previous three hearings
- Mrs Thomas has informed the NMC that she is not attending the hearing and has asked the panel to consider the matters set out in her email in her absence;
- There is no reason to suppose that adjourning would secure her attendance at some future date; and
- There is a strong public interest in the expeditious review of the case.
- The current substantive order runs out on 9 September 2026

The panel is concerned about the comments made by Mrs Thomas in the email dated 31 July 2026, alleging that an NMC representative fell asleep during the last review hearing and stating that she has lost faith in the process. The panel asked

Ms Fergus-Simms for further information and noted that the NMC has not requested nor received any further correspondence from Mrs Thomas and have asked the NMC to investigate this matter internally. The panel noted that this matter was only raised on 31 July 2026 by Mrs Thomas.

Taking all factors into consideration, the panel has decided that it is fair to proceed in the absence of Ms Thomas.

Decision and reasons on review of the substantive order

The panel decided to vary the current conditions of practice order.

This order will come into effect at the end of 9 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 2 August 2024. The order was reviewed on 30 July 2025 where the substantive conditions of practice order was extended for six months. This was then reviewed on 29 January 2026 where the substantive conditions of practice order was extended for six months.

The current order is due to expire at the end of 9 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, while a registered manager of Care 24X ("the Agency"),

1. Provided the CQC with inaccurate numbers of employees and care packages managed by the Agency. [FOUND PROVED]

2. …

3. Did not ensure staff at the Agency were adequately trained: [FOUND PROVED]

a. Percutaneous Endoscopic Gastrostomy (PEG) care.

b. Catheter care.

c. PRN medication procedures.

d. End of life care.

4. Did not have a proper system in place to ensure: [FOUND PROVED] a. Safe administration and management of medication.

b. Care plans contained adequate risk assessments'

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

'The panel acknowledged that you have undertaken relevant training, that you are maintaining your professional knowledge, and that you are applying aspects of this learning in your current role, including an increased focus on the monitoring and recording of staff training. The panel accepted that these steps are positive and that you have begun to engage constructively with remediation.

However, the panel concluded that you have not yet demonstrated sufficient insight into the impact of your actions on vulnerable service users and on the wider public interest. The panel noted that your evidence focused predominantly on systems, processes and the personal consequences for you, rather than fully addressing how service users were placed at risk or how public confidence in the profession may have been affected. The panel was not satisfied that you clearly articulated what you had learned from the findings made against you or how you would respond differently in comparable circumstances in the future. The panel also identified differences between aspects of your reflective statement and your oral evidence, which limited its confidence that your insight has yet fully developed.

The panel further considered that elements of your evidence appeared to minimise your own responsibility or to focus on the actions of others, and that you expressed

frustration with the regulatory process. The panel concluded that these matters raised concerns about whether you fully accept the findings that were made and about the extent to which attitudinal issues have been addressed. The panel was also not satisfied that you yet demonstrated a sufficiently developed understanding of the role and importance of clinical supervision in maintaining safe practice.

In light of these matters, the panel determined that there remains a risk of repetition. The panel concluded that you have not yet demonstrated sufficient insight or remediation to satisfy it that your fitness to practise is no longer impaired. The panel therefore finds that your fitness to practise remains impaired on public-protection grounds.

The panel also considered the public-interest component of impairment. It determined that, in this case, a finding of continuing impairment is required in order to maintain public confidence in the profession and to uphold proper professional standards. The panel noted the particular importance of public confidence in domiciliary care services, where service users are often highly vulnerable and receive care in their own homes with limited oversight. The panel concluded that a fully informed member of the public would be concerned if no finding of impairment were made in circumstances where your insight remains limited and the risks to vulnerable service users have not yet been fully addressed.

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

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

'The panel next considered whether to impose a caution order. 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 where the panel wishes to mark that the behaviour was unacceptable and must not happen again. The panel concluded that this case is not at the lower end of that spectrum, given the continuing impairment and the risk of repetition that it has identified. The panel therefore decided that a caution order would not be sufficient or proportionate.

The panel then considered whether a further conditions of practice order would be a sufficient and appropriate response. The Panel reminded itself that any conditions imposed must be proportionate, workable and measurable.

The panel determined that appropriate and practical conditions could be formulated which would address the concerns in this case. The panel accepted that you have not been able fully to demonstrate compliance with the existing conditions because of your employment circumstances, but noted your engagement with the NMC and your stated willingness to comply with any conditions imposed.

The panel concluded that a varied conditions of practice order would be sufficient to protect the public and to maintain confidence in the profession. The panel was satisfied that the conditions imposed would manage the identified risks during the period they remain in force.

The panel also considered whether a suspension order or a striking-off order would be appropriate. It concluded that either would be disproportionate at this stage, given the nature of the concerns, the steps you have taken towards remediation, and the panel's view that workable conditions remain capable of addressing the outstanding risks.

Accordingly, the panel determined, pursuant to Article 30(1)(c) of the Order, to impose a further conditions of practice order for a period of six months. This order will take effect on the expiry of the current order, namely at the end of 9 March 2026.

The panel decided to impose the following conditions, which it considered to be appropriate, proportionate, workable and measurable:

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

1. *You must not act as a Registered Manager or Nominated Individual (or equivalent position) in a domiciliary care agency or care or nursing home.*

2. *You must meet with your line manager, clinical supervisor or mentor on a monthly basis for reflective clinical supervision focused on:*
    - *your professional practice*
    - *insight into the findings made against you*
    - *the impact your actions had on service users and the wider public interest*
    - *your ongoing development plans*

    Your line manager, clinical supervisor or mentor should provide a written report which should comment on your:
    - *engagement with clinical supervision*
    - *your insight*
    - *any concerns regarding safe practice*

A copy of these reports must be provided to the NMC in advance of any review hearing.

3. *You must undertake training and be able to demonstrate how this training has informed your insight, professional behaviour and future decision making in the following areas:*
    a) compassionate leadership;
    b) emotional intelligence;
    c) self-awareness.

4. *You must keep the NMC informed about your employment by:*
    a) notifying your case officer within seven days of accepting or leaving any role; and
    b) providing your employer's contact details.

5. *You must keep the NMC informed about any course of study by:*
   a) notifying your case officer within seven days of accepting a course; and
   b) providing the name and contact details of the organisation providing it.

6. *You must provide a copy of these conditions to:*
   a) any organisation or person you work for;
   b) any prospective employer at the time of application; and
   c) any educational establishment to which you apply or are already enrolled.

7. *You must inform your case officer within seven days of becoming aware of:*
   a) any clinical incident in which you are involved;
   b) any investigation commenced against you; or
   c) any disciplinary proceedings taken against you.

8. *You must allow your case officer to share, as necessary, information about your performance and your compliance with these conditions with:*
   a) any current or future employer;
   b) any educational establishment; and
   c) any person involved in your supervision or retraining.'

Decision and reasons on current impairment

The panel considered whether Mrs Thomas' 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, and written representations from Mrs Thomas. It has taken account of the submissions made by Ms Fergus-Simms on behalf of the NMC.

Ms Fergus-Simms referred the panel to the background of the case. She submitted that it is for the panel to decide whether to continue the current conditions of practise order, replace it or revoke it.

Ms Fergus-Simms submitted that the persuasive burden is on Mrs Thomas to prove that she is no longer impaired. She submitted that Mrs Thomas has not been working as a registered nurse, but has provided a reflective piece.

Ms Fergus-Simms submitted that the previous reviewing panel set out a list of things that Mrs Thomas could provide that would assist this reviewing panel. She submitted that there has not been any evidence of further training being undertaken by Mrs Thomas. Neither has there been any evidence of any regulatory or independent audits relating to the role.

Ms Fergus-Simms submitted that any perceived lapse of registration doesn't appear to be correct and it is not clear how that employer could not find her pin. She submitted that the panel can be assured that Mrs Thomas' pin number is still active on the register.

Ms Fergus-Simms submitted that in any case, it was not clear why Mrs Thomas still hasn't been able to find work and as a result submitted that she remains impaired on public protection and public interest grounds.

Ms Fergus-Simms invited the panel to extend the current conditions of practice order, and that the NMC will in the background work with Mrs Thomas to find out why she could not be found to be on the register by her employer.

The panel had regard to the two emails from Mrs Thomas dated 31 July 2026, as well as a written statement piece, dated 31 July 2026.

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 in its deliberations took into account the submissions of Ms Fergus-Simms and the written reflective statement provided by Ms Thomas.

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

The panel noted that the last reviewing panel found that Mrs Thomas had not yet developed full insight. This panel determined that Mrs Thomas' written reflection demonstrates she has considerably developed her insight and an understanding of the concerns. Mrs Thomas in her reflection accepts personal responsibility and highlights aspects of her practice that should have been done differently. Mrs Thomas has reflected upon the potential impact her actions had on service users, and called it her *'greatest regret'* and that *'exposing people to avoidable risks is unacceptable.'* The panel also considered that Mrs Thomas expressed genuine remorse and noted that she had explained how her future practice would change in relation to governance and communication.

In its consideration of whether Mrs Thomas has taken steps to strengthen her practice, the panel took into account that Mrs Thomas has stated she is currently working in a non-nursing training role, and has undertaken further relevant training. Mrs Thomas in her reflection stated that she has undertaken '*additional learning in medication management, clinical governance, risk assessment, care planning, leadership, PEG care, catheter care, PRN medication procedures and end-of-life care'.* Mrs Thomas stated that as a result of undertaking the training she now understands *'the importance of maintaining accurate competency records, conducting regular audits, reviewing incidents promptly, updating risk assessments following changes in conditions and ensuring that specialist care is delivered only by staff who have demonstrated competence.'* However, no evidence of the training was provided to the panel. The panel did not have any testimonials, references or training certificates before it. Mrs Thomas also stated that she has complied with her conditions and has monthly meetings with her manager, but has not provided any reports to the NMC. Therefore, the panel determined that in the absence of any evidence of training, Mrs Thomas has not yet demonstrated that she has strengthened her practice.

The last reviewing panel determined that Mrs Thomas was liable to repeat matters of the kind found proved. Today's panel has not had sufficient documentary evidence from Mrs

Thomas to demonstrate that she has been complying with her conditions. In light of this, this panel determined that Mrs Thomas is 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 Mrs Thomas' fitness to practise remains impaired.

Decision and reasons on sanction

Having found Mrs Thomas' fitness to practise currently impaired, the panel then considered what, if any, sanction it should impose in this case. The panel noted that its powers are set out in Article 30 of the Order. The panel has also taken into account the 'NMC's Sanctions Guidance' (SG) and has borne in mind that the purpose of a sanction is not to be punitive, though any sanction imposed may have a punitive effect.

The panel first considered whether to take no action but concluded that this would be inappropriate in view of the seriousness of the case. The panel decided that it would be neither proportionate nor in the public interest to take no further action.

It then considered the imposition of a caution order but again determined that, due to the seriousness of the case, and the public protection issues identified, an order that does not restrict Mrs Thomas' 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 Mrs Thomas' 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 further or varied conditions of practice order on Mrs Thomas' 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 would be possible to formulate appropriate and practical conditions which would address the failings highlighted in this case. The panel accepted that Mrs Thomas, has been unable to comply with conditions of practice due to their current employment status but is engaging with the NMC and is willing to comply with any conditions imposed. The panel considered that Mrs Thomas in her written reflections states she has undertaken training required by the conditions but has not provided any evidence of this.

The panel was of the view that a further and varied conditions of practice order is sufficient to protect patients and the wider public interest, noting as the original panel did that there was no evidence of general incompetence, no deep seated attitudinal problems and that the misconduct related to poor judgement rather than clinical competence. In this case, there are conditions that could be formulated which would protect patients during the period they are in force.

The panel was of the view that to impose a suspension order or a striking-off order would be wholly disproportionate and would not be a reasonable response in the circumstances of Mrs Thomas' case at this time. However, the panel noted that a conditions of practice order is not intended to exist indefinitely and orders are imposed with a view to ensure that a professional is able to return to safe practice within a reasonable period of time.

The panel noted the considerable length of time it has taken Mrs Thomas to comply with the conditions to date. However, the panel has concluded that this could be a matter for future reviewing panels to consider very seriously.

Accordingly, the panel determined, pursuant to Article 30(1)(c) to make a conditions of practice order for a period of 6 months, which will come into effect on the expiry of the current order, namely at the end of 9 September 2026. It decided to impose the following varied 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. ‘Course of study’ and ‘course’ mean any course of educational study connected to nursing, midwifery or nursing associates.

1. You must not act as a Registered Manager or Nominated Individual (or equivalent position) in a domiciliary care agency or care or nursing home.

2. You must meet with your line manager, clinical supervisor or mentor on a monthly basis for reflective clinical supervision focused on:
    - your professional practice
    - insight into the findings made against you
    - the impact your actions had on service users and the wider public interest
    - your ongoing development plans

    Your line manager, clinical supervisor or mentor should provide a written report which should comment on your:
    - engagement with clinical supervision
    - your insight
    - any concerns regarding safe practice

A copy of these reports must be provided to the NMC in advance of any review hearing.

3. You must provide tangible evidence of training you have undertaken and be able to demonstrate how this training has informed your insight, professional behaviour and future decision making in the following areas:
    a) Regulatory compliance;
    b) Quality assurance in relation to safe nursing practice;
    c) Clinical governance
    d) Risk assessment

4. You must keep the NMC informed about your employment by:
   a) notifying your case officer within seven days of accepting or leaving any role; and
   b) providing your employer's contact details.

5. You must keep the NMC informed about any course of study by:
   a) notifying your case officer within seven days of accepting a course; and
   b) providing the name and contact details of the organisation providing it.

6. You must provide a copy of these conditions to:
   a) any organisation or person you work for;
   b) any prospective employer at the time of application; and
   c) any educational establishment to which you apply or are already enrolled.

7. You must inform your case officer within seven days of becoming aware of:
   a) any clinical incident in which you are involved;
   b) any investigation commenced against you; or
   c) any disciplinary proceedings taken against you.

8. You must allow your case officer to share, as necessary, information about your performance and your compliance with these conditions with:
   a) any current or future employer;
   b) any educational establishment; and
   c) any person involved in your supervision or retraining.

The period of this order is for six months.

The panel is inviting Mrs Thomas to focus on the future by adhering to the conditions of practice order, which it considers are achievable within the next six months.

This conditions of practice order will take effect upon the expiry of the current conditions of practice order, namely the end of 9 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 Mrs Thomas 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:

- Attendance at the next review hearing;
- Evidence of any further training undertaken;
- A reflective statement which outlines how your learning will inform future practise;
- Evidence from any regulatory or independent audits relating to your role; and
- Continued engagement with the NMC.

This will be confirmed to Mrs Thomas in writing.

That concludes this determination.