

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

**Substantive Order Review Hearing
Friday 20 February 2026**

Virtual Hearing

Name of Registrant: Emelyn Bebet Enad

NMC PIN: 21A1103O

Part(s) of the register: Registered Nurse - Sub part 1
Adult Nurse - January 2021

Relevant Location: Hampshire

Type of case: Misconduct

Panel members: Denford Chifamba (Chair, registrant member)
Samuel Herbert (Registrant member)
Alison McVitty (Lay member)

Legal Assessor: Nigel Ingram

Hearings Coordinator: Rene Aktar

Nursing and Midwifery Council: Represented by Mohsin Malik, Case Presenter

Mrs Enad: Not present and unrepresented at the hearing

Order being reviewed: Suspension order (12 months)

Fitness to practise: Impaired

Outcome: **Suspension order (12 months) to come into effect at the end of 31 March 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 Enad was not in attendance and that the Notice of Hearing had been sent to Mrs Enad's registered email address by secure email on 19 January 2026.

Mr Malik, 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 Enad'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 Mrs Enad 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 Enad

The panel next considered whether it should proceed in the absence of Mrs Enad. The panel had regard to Rule 21 and heard the submissions of Mr Malik who invited the panel to continue in the absence of Mrs Enad. He submitted that Mrs Enad had voluntarily absented herself.

Mr Malik submitted that there had been no engagement at all by Mrs Enad with the NMC in relation to these proceedings and, as a consequence, there was no reason to believe that an adjournment would secure her attendance on some future occasion.

The panel accepted the advice of the legal assessor.

The panel decided to proceed in the absence of Mrs Enad. In reaching this decision, the panel has considered the submissions of Mr Malik, and the advice of the legal assessor. It had regard to relevant case law and to the overall interests of justice and fairness to all parties.

Following Mr Malik's submissions, the panel received an on table reflective document from Mrs Enad.

It then noted that:

- No application for an adjournment has been made by Mrs Enad;
- Mrs Enad has only now engaged with the NMC by submitting a reflective statement today during the course of the hearing;
- This is a mandatory review;
- There is no reason to suppose that adjourning would secure Mrs Enad's attendance at some future date; 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 Mrs Enad.

Decision and reasons on review of the substantive order

The panel decided to confirm the current suspension order.

This order will come into effect at the end of 31 March 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 12 months by a Fitness to Practise Committee panel on 26 February 2025.

The current order is due to expire at the end of 31 March 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:

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1. *On 31 July 2021 during a night shift:*

- a) Fell asleep while feeding Patient A.*
- b) Fell asleep while feeding Patient B.*
- c) Fell asleep while writing up patient notes.*

....

5. *During a nightshift on 31 August/1 September 2021:*

- a) Left Patient C unsupervised in an isolation cubicle.*
- b) Did not ask another member of staff to take over observations of Patient C.*

....

7. *On 2 February 2022:*

- a) Administered the incorrect breast milk to Baby A.*
- b) Failed to tell the nurse in charge and/or doctor you had administered the incorrect breast milk.*

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 determined that limbs a, b and c of Grant are engaged in this case and was satisfied that limb 'd' is not applicable in these circumstances. The panel had no direct evidence of harm in this case. However, in the panel's judgment, Ms Enad's actions in the past put patients at an unwarranted risk of harm. The panel had no evidence of insight, remorse or remediation and noted that Mrs Enad had not provided a comprehensive response to the charges that would lead the panel to find that she no longer poses a risk. The panel was therefore satisfied that Mrs Enad is liable in the future to act in a way that would put patients at an unwarranted risk of harm. Mrs Enad's misconduct brought the profession into disrepute and breached the fundamental professional tenets of preserving safety and practising effectively. There has been no response from Mrs Enad addressing these concerns, as such the panel determined that she is liable in the future to bring the nursing profession into disrepute by breaching fundamental tenets.

The panel had no evidence of insight or remorse. Although this incident occurred almost four years ago, there are limited representations from Mrs Enad addressing the seriousness of her actions or how they negatively impacted the nursing profession. Mrs Enad has not demonstrated an understanding of how her actions put patients at a risk of harm or why her conduct was wrong. Further, the panel noted that she made no mention of how she would handle the situation differently in the future.

The panel acknowledged that Mrs Enad engaged for a short time. [PRIVATE]. The panel had regard to the statements Mrs Enad made at various points throughout her employment at the Trust. [PRIVATE].

The panel considered the context of Mrs Enad's situation [PRIVATE]. [PRIVATE]. However, the panel considered the above as part of the process in deciding Mrs Enad's current fitness to practise.

The panel was satisfied that Mrs Enad's misconduct in the charges found proved are remediable. However, in relation to the charges found proved, the panel determined that there were attitudinal concerns. It was of concern to the panel that Mrs Enad's actions, including falling asleep on numerous occasions; administering

the wrong breastmilk and then throwing the incorrect bottle away without any consideration as to the potential risk; and leaving an extremely vulnerable baby unsupervised in an isolation cubicle, demonstrates a lack of respect for the role and responsibilities that come with being a nurse in relation to patient safety. Those are the attitudinal concerns that, in the panel's view, need to be addressed.

The panel carefully considered the evidence before it in determining whether or not Mrs Enad has taken steps to strengthen her practice. The panel has no evidence of relevant training and no recent reflective statement. Without evidence of remediation, the panel could not be confident that matters of the kind found proved would not be repeated in the future. It therefore concluded that a finding of impairment is necessary on the ground of public protection.

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

The panel determined that, in this case, a finding of impairment is also required on public interest grounds. The panel concluded that a member of the public, fully appraised of the facts of the case, would be concerned if a finding of current impairment were not made.

Having regard to all of the above, the panel was satisfied that Mrs Enad's fitness to practise is currently impaired and that she cannot currently practise kindly, safely and professionally.'

The original panel determined the following with regard to sanction:

'The panel next considered whether placing conditions of practice on Mrs Enad's registration would be a sufficient and appropriate response. The panel is mindful that any conditions imposed must be proportionate, measurable and workable. The panel took into account the SG, in particular:

- *No evidence of general incompetence;*

Whilst the panel was of the view that the misconduct found proved is remediable, the panel determined that there are no practical or workable conditions that could be formulated. The panel considered the nature of the charges in this case [PRIVATE]. [PRIVATE]. The panel had no evidence to indicate Mrs Enad's ability and/or willingness to respond to any retraining. The panel determined that conditions on Mrs Enad's practice could not be monitored or assessed [PRIVATE]. The panel therefore concluded that the placing of conditions on Mrs Enad's registration would not adequately address the seriousness of this case and would not protect the public.

The panel then went on to consider whether a suspension order would be an appropriate sanction. The SG states that suspension order may be appropriate where the misconduct was not fundamentally incompatible with remaining on the register, and that a panel must consider whether a period of suspension would be sufficient to protect patients, public confidence in nurses, midwives or nursing associates, or professional standards.

Having reviewed and considered the NMC guidance, the panel noted that this is not a single instance of misconduct, there is evidence of attitudinal issues, and the panel are not satisfied as to the insight shown by Mrs Enad. For these reasons, the panel seriously considered that a striking-off order may have been the only way to protect the public. However, the panel considered the context and the mitigating factors namely, the fact that Mrs Enad was a newly qualified nurse in the UK; that she had engaged to a limited degree prior to the original hearing date and at the beginning of this hearing; [PRIVATE].

[PRIVATE]. The panel did not have sight of the outcome of the referral. The panel is aware that witnesses in relation to the charges found proved, initially felt that the allegations were to be dealt with in house, although it appears that Mrs Enad resigned prior to the completion of a full investigation.

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

The panel seriously considered whether a striking-off order would be proportionate 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 may have a punitive effect, it would be unduly punitive in Mrs Enad's case to impose a striking-off order.

The panel noted the hardship such an order will inevitably cause Mrs Enad. However, this is outweighed by the public interest in this case.

The panel considered that this order is necessary to mark the importance of maintaining 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 12 months was appropriate in this case to mark the seriousness of the 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. A future panel will have the option to impose a striking-off order.

Any future panel reviewing this case would be assisted by:

- A reflective piece demonstrating understanding the role and importance of a nurse from a public and patient safety perspective.*
- A reflective piece demonstrating an understanding of managing risk to patient safety*
- Testimonials from line manager and/or colleagues.*
- References from paid or voluntary work.*

Evidence of training or development addressing the concerns identified.'

Decision and reasons on current impairment

The panel has considered carefully whether Mrs Enad'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, effectively and 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 took account of the submissions made by Mr Malik.

Mr Malik submitted that Mrs Enad does not address the seriousness of her actions and how it negatively impacted the nursing profession. He submitted that Mrs Enad showed attitudinal concerns that need to be addressed.

Mr Malik submitted that some reflective pieces have been submitted at a later stage which demonstrated some insight and reflection. He invited the panel to take this into consideration when deliberating.

Mr Malik submitted that Mrs Enad's fitness to practice remains impaired. He submitted that it is a matter for the panel to decide whether she remains impaired.

Mr Malik submitted that imposing no action, or a caution order would be disproportionate. He submitted that there are no practical or workable conditions which could be formulated and that the panel have no evidence to indicate Mrs Enad's ability or willingness to respond to retraining. He submitted that imposing conditions would not adequately address the seriousness of this case.

Mr Malik submitted that Mrs Enad did engage for a limited degree. He submitted that the previous panel determined that a future panel reviewing this case would benefit from a reflective piece demonstrating her understanding and importance of the role from a public and patient perspective, and a reflective piece.

Mr Malik invited the panel to extend the current order for a period of 12 months. He submitted that this order remains necessary and proportionate in the circumstances of this case.

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 Mrs Enad's fitness to practise remains impaired.

The panel noted that the original panel found that Mrs Enad had shown insufficient insight. At this hearing, the panel took into account that there is new evidence from Mrs Enad, which was demonstrated through her reflective piece, where she indicated some developing insight. The panel took into account that the reflective piece also shows some understanding of the importance of her nursing role and that it does speak to some of the concerns at the time.

However, the panel also considered that Mrs Enad's reflective piece does not fully address the concerns around the severity of the risks posed patient safety and there is an element of over relying on external contributing factors which suggests she has not accepted full responsibility for her shortcomings. The panel noted the former panel's findings around underlying attitudinal concerns. The panel also took into account that that there is no evidence of retraining or Continuing Professional Development (CPD) demonstrated in the reflective piece. The panel took into account that Mrs Enad does not state her intention of returning to nursing or that she had undertaken any paid or voluntary work.

In light of this, this panel determined that Mrs Enad 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 Enad's fitness to practise remains impaired.

Decision and reasons on sanction

Having found Mrs Enad'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'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.

The panel then considered the imposition of a caution order but again determined that, due to the seriousness of the case, and the public protection issues identified, an order that does not restrict Mrs Enad'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 Mrs Enad'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 Mrs Enad's registration would be a sufficient and appropriate response. The panel is mindful that any conditions imposed must be proportionate, measurable and workable. The panel bore in mind the seriousness of the facts found proved at the original hearing and concluded that a conditions of practice order would not adequately protect the public or satisfy the public

interest. The panel was not able to formulate conditions of practice that would adequately address the concerns relating to Mrs Enad's misconduct.

The panel has received information that Mrs Enad has not shown a clear indication on where she wants to return to practise as a nurse. In view of Mrs Enad's clear settled intention of returning to nursing, the panel considered that any conditions of practice order would not be workable.

The panel considered the imposition of a further period of suspension. The panel also considered that prior to the panel receiving the reflective piece, the panel were considering an imposition of a striking-off order. However, after seeing some insight and reflection, the panel were mindful that Mrs Enad has taken some steps on understanding the concerns.

The panel was of the view that a suspension order would allow Mrs Enad further time to fully reflect on her conduct. It considered that Mrs Enad's need to gain a full understanding of how her conduct can impact upon the nursing profession as a whole and not just the organisation that the individual nurse is working for. The panel concluded that a further 12 months suspension order would be the appropriate and proportionate response and would afford Mrs Enad adequate time to further develop her insight and take steps to strengthen her practice.

The panel determined therefore that a suspension order is the appropriate sanction which would continue to both protect the public and satisfy the wider public interest. Accordingly, the panel determined to impose a suspension order for the period of 12 months would provide Mrs Enad with an opportunity to engage with the NMC. It considered this to be the most appropriate and proportionate sanction available.

This suspension order will take effect upon the expiry of the current suspension order, namely the end of 31 March 2026 in accordance with Article 30(1).

Before the end of the period of suspension, another panel will review the order. At the review hearing the panel may revoke the order, or it may confirm the order, or it may replace the order with another order.

Any future panel reviewing this case would be assisted by:

- Evidence of any plans to return to nursing in the UK
- Evidence of continuing professional development to address knowledge gaps and keep practice up to date.
- Reflective pieces showing a deeper understanding of the concerns.
- Mrs Enad's attendance at a future hearing.
- Testimonials from line manager and/or colleagues.
- References from paid or voluntary work.

This will be confirmed to Mrs Enad in writing.

That concludes this determination.