

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

**Substantive Order Review Hearing
Monday, 2 February 2026**

Virtual Hearing

Name of Registrant: **Kirsty Victoria James**

NMC PIN: 18G0079W

Part(s) of the register: Registered Nurse – Sub Part 1
Adult Nursing - October 2018

Relevant Location: Cheshire

Type of case: Misconduct

Panel members: Rachel Forster (Chair, Lay member)
Oluwasola Falola (Registrant member)
Anica Alvarez Nishio (Lay member)

Legal Assessor: Natalie Byrne

Hearings Coordinator: Peaches Osibamowo

Nursing and Midwifery Council: Represented by Megan Verity, Case Presenter

Mrs James: Not present and unrepresented

Order being reviewed: Suspension order (4 months)

Fitness to practise: Impaired

Outcome: **Striking-off order to come into effect
immediately in accordance with Article 30(2)**

Decision and reasons on service of Notice of Hearing

The panel was informed at the start of this hearing that Mrs James was not in attendance and that the Notice of Hearing had been sent to Mrs James' registered email address by secure email on 29 January 2026. Ms Verity, on behalf of the Nursing and Midwifery Council (NMC), drew the panel's attention to an email sent by Mrs James in response, dated 30 January 2026, in which she confirmed she was happy to waive the 28-day notice period.

Ms Verity 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 James' right to attend, be represented and call evidence, as well as the panel's power to proceed in her absence.

In light of all of the information available, the panel was satisfied that Mrs James has been served with notice of this hearing in accordance with the requirements of Rules 11 and 34. The panel accepted that Mrs James has waived the 28-day notice period.

Decision and reasons on proceeding in the absence of Mrs James

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

Ms Verity submitted that Mrs James acknowledged that she had received the notice of hearing. She submitted that the email correspondence from Mrs James this morning regarding her connectivity issues shows that she is aware that the hearing is taking place

today. She submitted that the connectivity issue is not a new issue, but that it had also been an issue at the substantive hearing. She submitted that Mrs James should have made arrangements to ensure that she was able to attend the hearing knowing that she has internet connectivity issues. Ms Verity submitted that this seems to be a pattern of behaviour and that Mrs James has not engaged in any meaningful way.

Ms Verity submitted that Mrs James has not requested an adjournment. She outlined dates she was available and today was one of the dates suggested by her. Nothing has been raised to suggest that an adjournment will lead to more meaningful engagement as there seems to be a pattern of minimal engagement and disengagement with the process.

Ms Verity submitted that the order must be reviewed before 10 February 2026, when it is due to lapse and that proceeding today was in the interest of both the NMC and Mrs James.

The panel had sight of a series of emails between Mrs James and her case officer and further emails exchanged between Mrs James and the Hearings Co-ordinator this morning. In these emails, Mrs James expresses a wish to attend the hearing and for the panel to review the order. The panel noted that she failed to make herself available to “test” the video-calling software, as offered by the NMC in advance of the hearing. The panel further noted her comments that she would travel to a relative’s accommodation this morning, to ensure a stable internet connection but that there had been no further update from her as to whether she did this or not. Finally, the panel noted that Mrs James had not responded to phone calls, text messages and emails from the Hearings Co-ordinator this morning regarding her attendance at the hearing.

The panel accepted the advice of the legal assessor.

The panel decided to proceed in the absence of Mrs James. In reaching this decision, the panel considered the submissions of Ms Verity and the advice of the legal assessor. It had particular regard to the relevant case law and to the overall interests of justice and fairness to all parties. The panel noted that:

- No application for an adjournment has been made by Mrs James;

- The NMC has taken significant steps to accommodate Mrs James' wish to attend the hearing;
- Mrs James has had limited, sporadic and intermittent engagement with the NMC throughout the regulatory process;
- There is no reason to suppose that adjourning would secure her attendance at some future date;
- No specific mitigation has been provided as to why Mrs James has not attended this hearing;
- There is a strong public interest in the expeditious review of the substantive order; and
- It is also in Mrs James' interest that the substantive order be reviewed today.

In these circumstances, the panel decided that it is fair to proceed in the absence of Mrs James.

Decision and reasons on application for hearing to be held in private

At the outset of the hearing, Ms Verity made a request that this case be held partly in private on the basis that references to Mrs James' health issues be held in private. The application was made pursuant to Rule 19 of the 'Nursing and Midwifery Council (Fitness to Practise) Rules 2004', as amended (the Rules).

The legal assessor advised the panel that Rule 19(1) provides, as a starting point, that hearings shall be conducted in public. However, Rule 19(3) states that the panel may hold hearings partly or wholly in private if it is satisfied that this is justified by the interests of any party or by the public interest.

The panel determined to go into private session only in connection with Mrs James' health issues as and when such issues are raised in order to protect her privacy.

Decision and reasons on review of the substantive order

The panel decided to replace the current suspension order with a striking off order.

This order will come into effect immediately in accordance with Article 30(2) of the 'Nursing and Midwifery Order 2001' (the Order).

This is an early review of the suspension order imposed on 3 September 2025. Mrs James was made subject to a condition of practice order, imposed for a period of 2 years by a Fitness to Practise Committee panel on 12 September 2023. This was reviewed on 3 September 2025 where the order was replaced with a suspension order imposed for a period of 4 months.

Following this, a striking off order was imposed at the second review of the substantive order on 8 January 2026. This order was due to come into effect on 10 February 2026. However, the panel did not have sight of an email that Mrs James had sent to the NMC prior to the hearing on 8 January 2026 and was informed during the hearing that there had been "no engagement." Consequently, today the panel is reviewing the current order, which is a suspension order for a period of 4 months (as the striking off order imposed on 8 January 2026 has not taken effect).

The charges found proved which resulted in the imposition of the substantive order were as follows:

'That you, a Registered Nurse

1. Accessed Patient B's records without authority and / or clinical reason on 1 August 2020.

2. Accessed Patient C's records without authority and / or clinical reason on one or more of the following dates:

a) 22 October 2019

b) 24 July 2020

c) 1 August 2020

3. Accessed Patient D's records without authority and / or clinical reason on one or more of the following dates:

a) 1 August 2020

b) 2 August 2020

4. Between 24 November 2020 to 25 November 2020 attended work and you subsequently became disorientated whilst on shift as a registered nurse as you:

[...]

k) Left the care home without completing your scheduled shift;

l) Left the care home without adequate nursing cover.

5. Between 22 November 2020 and 23 November 2020 failed to complete evaluation sheets for one or more of the following residents:

a) Resident A

b) Resident C

c) Resident D

[...]

e) Resident F

f) Resident G

g) Resident H

h) Resident I

[...]

j) Resident K

k) Resident L

l) Resident M

6. Between 23 November 2020 and 24 November 2020 failed to complete evaluation sheets for one or more of the following residents:

a) Resident A

b) Resident C

c) Resident D

[...]

e) Resident F

f) Resident G

g) Resident H

h) Resident I

- i) Resident J*
- j) Resident K*
- k) Resident L*
- l) Resident M*

7. Between 24 November 2020 and 25 November 2020 failed to complete evaluation sheets for one or more of the following residents:

- a) Resident A*
- b) Resident C*
- c) Resident D*
- d) Resident E*
- e) Resident F*
- f) Resident G*
- g) Resident H*
- h) Resident I*
- i) Resident J*
- j) Resident K*
- k) Resident L*
- l) Resident M*

8. On 24 November 2020 failed to administer one of more of the following bedtime medication to Resident P:

- a) Actagain*
- b) Laxido*

9. On 24 November 2020 failed to administer one or more of the following bedtime medication to Resident N:

- a) Ventolin*
- b) Paracetamol*
- c) Promazine*
- d) Trimethoprim*
- e) Loperamide*

10. On 24 November 2020 failed to administer one or more of the following bedtime medication to Resident B:

- a) Laxido
- b) Senna
- c) Duloxetine
- d) Lorazepam

11. On 24 November 2020 failed to administer 10mg of controlled drug Zomorph at bedtime to Resident B.

12. On 24 November 2020 failed to ensure that doublebase Gel was administered at bedtime to Resident B.

13. On 24 November 2020 failed to administer one or more of the following bedtime medication to Resident Q:

- a) Latanoprost
- b) Amitriptyline
- c) Apixaban

14. On 24 November 2020 failed to administer one or more of the following bedtime medication to Resident R:

- a) Zapain
- b) Peptac
- c) Senna

15. On 24 November 2020 failed to administer one or more of the following bedtime medication to Resident O:

- a) Peptac;
- b) Salbutamol;
- c) Paracetamol;
- d) Lorazepam.

16. On 24 November 2020 failed to ensure that Conotrane cream was administered at bedtime to Resident O.

17. On 24 November 2020 failed to administer one or more of the following bedtime medication to Resident T:

- a) Senna
- b) Travoprost

18. On 24 November 2020 failed to administer one or more of the following bedtime medication to Resident U:

- a) Tegretol;
- b) Paracetamol.

19. On 24 November 2020 failed to administer one or more of the following bedtime medication to Resident D:

- a) Mirtazapine;
- b) Promethazine.

20. On 24 November 2020 failed to ensure that Corsodyl mouthwash was administered to Resident D at bedtime.

21. On 24 November 2020 failed to administer one or more of the following bedtime medication to Resident C:

- a) Senna;
- b) Paracetamol.

22. On 24 November 2020 failed to ensure that Nutilis was administered to Resident C at bedtime.

[...]

24. On 24 November 2020 failed to administer one or more of the following bedtime medication to Resident E:

- a) Paracetamol;
- b) Senna;
- c) Atorvastatin.

25. On 24 November 2020 failed to administer paracetamol bedtime medication to Resident F.

26. On 24 November 2020 failed to ensure that Nutilis was administered at bedtime to Resident F.

27. On 24 November 2020 failed to administer one or more of the following bedtime medication to Resident V:

- a) Paracetamol;
- b) Laxido;
- c) Reletrans.

28. On 24 November 2020 failed to ensure that Actagain was administered at bedtime to Resident V.

29. On 24 November 2020 failed to administer one or more of the following bedtime medication to Resident G:

- a) Senna;
- b) Paracetamol

30. On 23 and/or on 24 November 2020 failed to administer one or more of the following bedtime medication to Resident A:

- a) Atorvastatin;
- b) Carbocisteine;
- c) Amoxicillin

31. On 24 November 2020 failed to administer 5mg and/or 20mg controlled drug Longtec at bedtime to Resident A.

32. On 24 November 2020 failed to administer paracetamol bedtime medication to Resident H.

33. On 24 November 2020 failed to administer one or more of the following bedtime medication to Resident I:

a) *Laxido*;

b) *Paracetamol*.

34. On 24 November 2020 failed to ensure that *Medi Derma-S* barrier cream was administered to Resident I.

35. On 24 November 2020 failed to administer *simvastatin* bedtime medication to Resident W.

36. On 24 November 2020 failed to administer one or more of the following bedtime medication to Resident L:

a) *Paracetamol*;

b) *Senna*.

37. On 24 November 2020 failed to administer one or more of the following controlled drug at bedtime to Resident L:

a) 30mg of *Zomorph*;

b) 10mg of *Oramorph*'

The last reviewing panel in September 2025 determined the following with regard to impairment:

'Today's panel noted that Mrs James had not engaged with the NMC since the substantive hearing nearly two years ago, had allowed her revalidation to expire, and had not provided any evidence that she had complied with the conditions of practice order. It also bore in mind that Mrs James had provided no further evidence of insight or remediation or any new information whatsoever.

*Further, the panel was also mindful of the fact that there was a persuasive burden on Mrs James to prove that she was no longer impaired. The panel also had regard to the case of *Abrahaem v GMC [2008] EWHC 183 (Admin)*, in which Blake J described the procedure as 'an ordered sequence of decision making'. The panel must first address whether fitness to practise is impaired before considering further sanction. In doing so:*

The review has to consider whether all the concerns raised in the original finding of impairment through misconduct have been sufficiently addressed to the Tribunal's satisfaction. In practical terms there is a persuasive burden on the practitioner at a review to demonstrate that he or she has fully acknowledged why past professional performance was deficient and through insight, application, education, supervision or other achievement sufficiently addressed the past impairments.'

In light of this, this panel could not be satisfied that Mrs James is now not liable to repeat matters of the kind found proved. The panel therefore decided that a finding of continuing impairment was necessary on the grounds of public protection.

The panel has also 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. This is because public confidence in the nursing profession would be undermined if no finding of impairment were made in a case involving widespread clinical failings, with no evidence that they had been remedied and whereby the nurse in question continues to present a risk of harm to the public.

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

The last reviewing panel also determined the following with regard to sanction:

'The panel considered that extending Mrs James' conditions of practice order was not appropriate as Mrs James had effectively not engaged with the NMC or provided any evidence of compliance with the order, and, as such, imposing further conditions would not be workable or appropriate.

In the circumstances, the panel determined that an order of suspension was necessary to protect the public and satisfy the public interest.

The panel considered that a short period of suspension would afford Mrs James the opportunity to re-engage with the NMC, if she wished to do so. The panel also considered that a period of suspension would give Mrs James time to provide reflections on her misconduct and would allow her to undertake further relevant Continuing Professional Development (CPD). Accordingly, the panel determined that a suspension order for a period of four months was the necessary and proportionate sanction to reflect the need for Mrs James to re-engage with the NMC and to demonstrate remediation.

The panel did consider whether it would be appropriate to make a striking off order in light of the complete lack of engagement by Mrs James since the substantive hearing.

However, it decided such a course would be disproportionate at this time, given that the misconduct is remediable, provided Mrs James shows some commitment and a desire to return to nursing.

The panel determined to impose an order of suspension for a period of four months.'

Decision and reasons on current impairment

When reviewing the 4-month suspension order, the panel has considered carefully whether Mrs James' fitness to practise remains impaired. Whilst there is no statutory definition of fitness to practise, the NMC has defined impairment as to whether a nurse can currently practice kindly, safely and professionally. 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 panel on 3 September 2025, this panel has exercised its own judgement as to current impairment.

The panel has had regard to all of the documentation before it, namely the NMC bundle including emails that Mrs James sent to the NMC prior to the second review hearing on 8 January 2026, emails sent subsequent to the review hearing and an email sent by Mrs James on the morning of 2 February 2026. It has taken account of the submissions made by Ms Verity on behalf of the NMC. She submitted that Mrs James has failed to engage with the NMC in a meaningful way and that the burden rests on Mrs James to show that she has remediated her practice through relevant training and reflection to demonstrate that she is currently fit to practise.

Ms Verity submitted that this hearing has been called because the panel did not have all the documentation before it at the last review on 8 January 2026. This document has now been presented to the panel. She submitted that this is a further review of the current substantive order to consider the most appropriate action with all the information before it, before the striking off order is imposed on 10 February 2026.

Ms Verity submitted that the panel must consider whether Mrs James is currently impaired and if so, which sanction is the most appropriate.

Ms Verity referred to the case of *Abrahaem v NMC* [2008] EWHC 183 (Admin). She submitted that the persuasive burden is on the registrant to demonstrate that they fully acknowledge why their past conduct was insufficient and how they have sufficiently addressed their past impairment.

Ms Verity submitted that whilst there has been some engagement regarding hearing arrangements there has been little meaningful engagement regarding updates on Mrs James' practice and her insight on training. The lack of such development or insight may mean that the panel has little difficulty in finding current impairment. Ms Verity submitted that there is no evidence that Mrs James complied with the previous conditions or that she used the short suspension to develop her skills or remediate.

Ms Verity submitted that an order is required to adequately protect the public and in the wider public interest. Ms Verity noted that Mrs James stated that she would like an order 'other than a strike off'. She submitted burden is on Mrs James to prove this.

Ms Verity submitted that there has been no change in Mrs James' circumstances. She submitted that a further suspension order or a striking off order would be the most appropriate sanction.

Ms Verity referred the panel to NMC guidance SAN-3.

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 James' fitness to practise remains impaired.

The panel noted that the last reviewing panel found that Mrs James had insufficient insight. At this hearing the panel has not been provided with any new evidence to demonstrate that Mrs James has taken any steps to remediate her misconduct or strengthen her practice.

The panel acknowledged receipt of the on-table document that it did not have sight of at the last review hearing. It considered this email part of a pattern of sporadic and intermittent expressions of wishes to attend the hearing, rather than meaningful engagement in the process.

The panel noted that there has been no meaningful engagement from Mrs James since the substantive hearing in 2023. She has not submitted any evidence of training or a reflective piece to demonstrate an understanding of how her conduct put patients at risk and how this impacted negatively on the reputation of the nursing profession.

The panel noted that Mrs James did not comply with her initial conditions of practice order imposed in September 2023 and that she has not submitted anything in the intervening years to explain [PRIVATE].

The panel noted that, as a registered nurse, Mrs James has an obligation to cooperate with the NMC as regulator. Given that this is a review hearing, the panel also noted that the burden is on Mrs James to persuade the panel that she has strengthened her practice, reflected on what went wrong and its wider impact and has shown insight. The panel considered that Mrs James has not done this.

The panel therefore found that Mrs James' fitness to practise is impaired on public protection and public interest grounds.

[PRIVATE] The panel noted that both the substantive hearing and the substantive order review panels noted Mrs James' comments in her reflective piece where she stated:

"I have had a [PRIVATE] in the last six months, which has taken up much of my time. I do however appreciate I could have spent time to keep up to date with training. I apologise for not having used my time more efficiently and completed courses around my failings"

However, the panel noted that Mrs James had allowed her revalidation to expire in October 2021 and she has not sufficiently engaged with the NMC since the substantive hearing.

The last reviewing panel determined that Mrs James was liable to repeat matters of the kind found proved. As this panel has not received information to demonstrate that Mrs James is no longer likely to repeat the past misconduct, the panel was left with no alternative but to determine that Mrs James is still liable to repeat matters of the kind found proved. The panel therefore decided that Mrs James remains currently impaired on the ground 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. Considering the seriousness of the facts found proved at the substantive hearing, the panel determined that in this case, Mrs James' fitness to practise continues to be impaired on the public interest ground.

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

Decision and reasons on sanction

Having found Mrs James' fitness to practise currently impaired, the panel then considered what, if any, order it should make in this case. The panel noted that its powers are set out in Article 30(2) 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 an order is not to be punitive, although any order made may have such an effect.

The panel first considered whether to take no action and let the current suspension order lapse upon expiry on 10 February 2026. However, it concluded that this would be inappropriate in view of the seriousness of the case and it would not protect the public or be in the public interest. The panel decided that it would be neither proportionate nor in the public interest to take no further action.

The panel 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 James' 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 Mrs James' 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 James' registration would be a sufficient and appropriate response. The panel is mindful that any conditions imposed must be relevant, 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 given Mrs James' insufficient engagement. It noted that the original substantive panel had imposed a conditions of practice order with which Mrs James had neither engaged nor complied with.

The panel next considered extending the period of the current suspension order. The panel noted that it has now had sight of the on-table paper that was not presented before the last review. However, it did not find that this information showed that Mrs James has engaged with the regulatory process in a meaningful way. Mrs James has not submitted any evidence to show that she has addressed her misconduct, nor has she explained why she is not able to engage in the process. Further, Mrs James has not demonstrated any insight into her previous failings despite being given a clear guide as to the steps she should take to show her commitment to addressing her impairment. The burden is on Mrs James to show that she has addressed the misconduct and taken steps to reflect and strengthen her practice. She has been given several opportunities to do this, firstly through the conditions of practice order originally imposed in September 2023, then through the suspension order in September 2025, and subsequently after the last review hearing on 8 January 2026. She was given clear guidance as to what documents and evidence would assist a future panel. Taking all this into consideration and given that Mrs James has not engaged at all, the panel determined that a further period of suspension would not serve any useful purpose.

The panel determined that it was necessary to take action to prevent Mrs James from practising in the future and concluded that the only sanction that would adequately protect the public and serve the public interest was a striking-off order. It took into consideration that Mrs James has not complied with the previous conditions imposed and recommendations made by the previous panels. The panel considered the three questions in guidance SAN-3e:

- *Do the regulatory concerns about the nurse, midwife or nursing associate raise fundamental questions about their professionalism?*
- *Can public confidence in nurses, midwives and nursing associates be maintained if the nurse, midwife or nursing associate is not struck off from the register?*
- *Is striking-off the only sanction which will be sufficient to protect patients, members of the public, or maintain professional standards?*

The panel acknowledged that [PRIVATE] and only remains on the register due to the substantive order. However, it was of the view that it was fair and proportionate to replace the current order with a striking off order. Mrs James has a professional obligation to

engage with her regulator and to ensure that her practice is up to date and that she has actively addressed any concerns. The panel acknowledged that the misconduct is remediable, but Mrs James has shown no intent to remedy these concerns. Taken together, this raises fundamental questions about Mrs James' professionalism.

The panel also considered public confidence and professional standards in that Mrs James has not complied with the conditions imposed nor communicated with the NMC since the substantive hearing.

It also noted that a striking off order would remove the administrative burden and cost on the regulator whilst also relieving Mrs James of the burden of prolonging matters given her minimal engagement, that she has not revalidated and has shown no interest in continuing to work as a registered nurse.

The panel determined that this order would provide Mrs James with closure in relation to these matters and allow her to move on from this period in her life. It noted that should Mrs James want to practise as a registered nurse again in the future, after a period of 5 years from the date the striking off order comes into effect, she will be able to make an application for restoration to the NMC register should she wish to do so.

This striking-off order will take effect immediately in accordance with Article 30(2).

This decision will be confirmed to Mrs James in writing.

That concludes this determination.