

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

**Substantive Order Review Hearing
Friday, 13 February 2026**

Virtual Hearing

Name of Registrant: Christie Nonye Okwaraji

NMC PIN: 18B0302E

Part(s) of the register: Registered Nurse - Sub Part 1
19 March 2018

Relevant Location: Royal Free London NHS Foundation
Trust

Type of case: Lack of competence

Panel members: Graham Thomas Gardner (Chair, lay member)
Alison Smalley (Registrant member)
Robert Marshall (Lay member)

Legal Assessor: Michael Bell

Hearings Coordinator: Andrew Ormsby

Nursing and Midwifery Council: Represented by Naa-Adjeley Barnor, Case Presenter

Mrs Okwaraji: Present and unrepresented

Order being reviewed: Conditions of practice order (12 months)

Fitness to practise: Impaired

Outcome: **Conditions of practice order (6 months)**

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

At the outset of the hearing, Ms Barnor, on behalf on the NMC, made a request that this case be held partly in private on the basis that proper exploration of case involves discussion [PRIVATE]. The application was made pursuant to Rule 19 of the 'Nursing and Midwifery Council (Fitness to Practise) Rules 2004', as amended (the Rules).

You did not oppose this application and supported the application [PRIVATE] should be heard in private.

The legal assessor reminded the panel that while Rule 19(1) provides, as a starting point, that hearings shall be conducted in public, 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 as and when [PRIVATE] were raised in order to protect your privacy.

Decision and reasons on review of the substantive order

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

This order will come into effect at the end of 17 February 2026 in accordance with Article 30(1) of the 'Nursing and Midwifery Order 2001' (the Order).

This is the fourth review of a substantive conditions of practice order imposed by a Fitness to Practise Committee panel on 19 October 2021 for a period of 18 months. This was reviewed on 6 April 2023, 9 April 2024, and 24 January 2025 when a conditions of practice order was imposed for a period of 12 months. On 13 January 2026 a review hearing was postponed at your request. On 9 February 2026 a review hearing was postponed due to lack of time.

The current order is due to expire at the end of 17 February 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) Between 20 August 2018 and 17 February 2019, failed to demonstrate the standards of knowledge, skill and experience required to practise safely as a Band 5 nurse in that you:

a) ...

b) on one or more occasion, used incorrect drug codes on medication charts; [PROVED]

c) did not demonstrate that you had knowledge of what each code represented; [PROVED]

d) on one or more occasion, inaccurately recorded drugs on medication charts; [PROVED]

e) on an unknown date, failed to follow instructions to send medication home with a patient despite having received specific instructions from the pharmacy to do so; [PROVED]

f) on an unknown date, transferred a patient to another ward without the patient receiving their medication despite having been given specific instructions not to do so; [PROVED]

g) on an unknown date, incorrectly noted that a patient had self-administered IV medication when they had not; [PROVED]

h) on an unknown date, having been told that a patient's NG tube had come out by accident, failed to re-insert the tube and/or escalate to a colleague; [PROVED]

i) on an unknown date, having received specific instructions on how to perform checks on a syringe driver, failed to complete the required checks during the course of your shift and failed to record the readings; [PROVED]

j) on an unknown date, failed to change a patient's soiled dressing despite having been asked by the patient to do so; [PROVED]

k) on an unknown date, called a patient by the wrong name throughout the

course of the shift; [PROVED]

l) on an unknown date, having been advised by a patient that they were in pain, failed to escalate and seek assistance; [PROVED]

m) on an unknown date, failed to obtain consent from a patient before administering pain relief; [PROVED]

n) on one or more occasion, failed to communicate effectively with colleagues at handovers; [PROVED]

o) on an unknown date, having been told specifically by Colleague 1 how to deal with a challenging clinical scenario, you failed to relay the relevant information to the doctor: [PROVED]

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

The previous effective review panel determined the following with regard to impairment:

The panel noted that the last reviewing panel found that you had developing insight. At this hearing the panel took into account since the last review, you were unable to provide evidence of complying with the conditions of practice order, as a result of your loss of employment and inability to secure another nursing role. This being the case your competency has not been fully assessed as required by the order. It carefully considered the information presented, alongside Mr Joshi and Mr Smith's submissions and your circumstances.

In its consideration of whether you have taken steps to strengthen your practice, the panel took into account the reflective pieces provided by you dated 23 January 2025 and training courses you have undertaken to strengthen your general skills:

- Time management date 27 March 2024*
- Medication safety refresher 21 November 2024*
- Topic refresher: communicating with colleagues, eye contact, volume, tone, expression, clarity of understanding dated 21 November 2024.*

The last reviewing panel determined that you were liable to repeat matters of the kind found proved. Today's panel took into account the patient harm found proved, adverse patient feedback about care and the absence of information to address the concerns found proved, it determined that you are liable to repeat matters of the kind found proved. The panel was of the view you have not been in clinical practice for several months, there is no evidence of strengthened practice in this case, nor has there been a demonstration of competency in a clinical setting. The panel therefore decided that a finding of continuing impairment is necessary on the grounds of public protection.

The panel has borne in mind that its primary function is to protect patients and the wider public interest which includes maintaining confidence in the nursing profession and upholding proper standards of conduct and performance. The panel determined that, in this case, a finding of continuing impairment on public interest grounds is also required.

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

The previous effective 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 seriousness of the case, and the public protection issues identified, an order that does not restrict your practice would not be appropriate in the circumstances. The SG states that a caution order may be appropriate where 'the case is at the lower end of the spectrum of impaired fitness to practise and the panel wishes to mark that the behaviour was unacceptable and must not happen again.' The panel considered that your lack of competence 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 your 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 you have been unable to comply with conditions of practice due to your current employment status but are engaging with the NMC and willing to comply with any conditions imposed.

The panel was of the view, the concerns found proved, were when you were working unsupervised, and the current conditions of practice order address the need for supervision, and competency to be demonstrated and confirmed before you are signed off, and therefore it was of the view that a further conditions of practice order is sufficient to protect patients and the wider public interest.

The panel was of the view that to impose a suspension order or a striking-off order would at this stage be disproportionate and would not be a reasonable response in the current circumstances of your case. However, the panel note that you have been subject to a conditions of practice order for nearly 3 and a half years. Such an order cannot continue indefinitely.

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 17 February 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 ensure that you are supervised by another registered nurse any time you are working. Your supervision must consist of working at all times on the same shift as, but not always directly observed by another registered nurse until you are assessed as competent in the following areas:

- d) Communication with patients and colleagues including handovers.
- e) Record keeping and documentation.
- f) Prioritisation.

You must be signed off as competent in three consecutive assessments occurring every six weeks utilising a competency assessment framework(s).

2. You must not administer medication without direct supervision from another registered nurse until you are signed off as competent to do so in three further consecutive assessments occurring every six weeks. The assessment must utilise a competency assessment framework and be carried out by a clinical supervisor who is at least Band 6.

3. You must work with a clinical supervisor who is at least Band 6 or above to create a personal development plan (PDP). Your PDP must use competency assessment frameworks to address the concerns about:

- Medicines management.
- Communication with patients and colleagues, including handovers.
- Record keeping and documentation
- Prioritisation.

You must:

c) Send your case officer a copy of your PDP before the next NMC review hearing.

d) Meet with your clinical supervisor who is at least Band 6 or above at least every month to discuss your progress towards achieving the aims set out in your PDP until deemed competent in the aforementioned areas above.

4. You must keep the NMC informed about anywhere you are working by:

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

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

5. You must keep the NMC informed about anywhere you are studying by:

c) Telling your case officer within seven days of accepting any course of study.

d) Giving your case officer the name and contact details of the organisation offering that course of study.

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

f) Any organisation or person you work for.

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

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

i) Any establishment you apply to (at the time of application), or with which you are already enrolled, for a course of study.

j) Any current or prospective patients or clients you intend to see or care for on a private basis when you are working in a self-employed capacity

7. You must tell your case officer, within seven days of your becoming aware of:

a) Any clinical incident you are involved in.

- b) Any investigation started against you.*
- c) Any disciplinary proceedings taken against you.*

8. You must allow your case officer to share, as necessary, details about your performance, your compliance with and / or progress under these conditions with:

- a) Any organisation with which you volunteer in a nursing capacity.*
- b) Any current or future employer.*
- c) Any educational establishment.*
- d) Any other person(s) involved in your retraining and/or supervision required by these conditions.*

The period of this order is for 12 months.

The conditions of practice order will take effect upon the expiry of the current conditions of practice order, namely the end of 17 February 2025 in accordance with Article 30(1).

[...]

Any future panel reviewing this case would be assisted by:

- Your continued engagement*
- A reflective piece which outlines your insight as to what you have learned from the incidents found proved, backed up with evidence and what action you would take in a similar situation going forward*
- Evidence of your attempts to gain employment in a healthcare setting*

Decision and reasons on current impairment

The panel has considered carefully whether your fitness to practise remains impaired. Whilst there is no statutory definition of fitness to practise, the NMC has defined fitness to practise as a registrant's suitability to remain on the register 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 Barnor on behalf of the NMC, your oral evidence, and your submissions.

Ms Barnor submitted that the position that '*we found ourselves in today*' had not changed since the last effective hearing in January 2025. She stated that, given the absence of adequate remediation and strengthening of practice, it was consequent that the risk of harm and repetition remains, and thus your fitness to practise remained impaired by reason of your lack of competence.

Ms Barnor stated that, should the panel agree with the NMC and determine that your fitness to practise remains impaired, then it was for the panel to decide what action to take, as the NMC was neutral on the question of appropriate sanction.

Ms Barnor did submit however that this case involved serious failings in fundamental nursing skills with reference to working at the basic level of competence. She stated that given the seriousness of the case and risk presented the panel might take the view that revoking the order or imposing a caution would not be appropriate.

Ms Barnor submitted that, upon consideration of relevant NMC guidance on conditions of practice, the panel might take the view that a conditions of practice order remains proportionate and appropriate. She stated that previous panels, most recently in January 2025, had taken the view that there was no evidence of a deep-seated attitudinal or personality problem, and that although there were identifiable areas of your practice in need of assessment and retraining, you had indicated a willingness to respond positively to retraining.

However, Ms Barnor also drew the panel's attention to the fact that you have been subject to a substantive conditions of practice order since October 2021, a fact which was highlighted by the last reviewing panel and stated that orders were not meant to continue indefinitely. She stated that little progress had been made.

Ms Barnor invited the panel to consider what purpose was to be achieved by imposing a suspension order and temporarily removing you from the register.

Ms Barnor submitted that, although this is a lack of competence case and striking off would not usually be an option, the substantive order of conditions has been in place for over two years and was therefore available as an option. She stated that NMC guidance provided that striking off was likely to be appropriate where a registrant has made negligible progress towards addressing issues and has shown limited insight. She further submitted that the lack of progress that you had made now concerns fundamental issues about your professionalism, with specific reference to your ability to practice competently. Therefore, the panel might take the view that a striking off order was now appropriate and proportionate.

Ms Barnor stated that panel might take that view that allowing your registration to lapse with impairment was neither proportionate or appropriate and that revoking the order was not appropriate given that you had not demonstrated that your fitness to practise was no longer impaired.

Ms Barnor concluded by stating that it appeared that your position was that you had undertaken a lot of training in the time intervening since the last review hearing. However, Ms Barnor asserted that the panel cannot consider what it does not have evidence of.

You submitted that you had reflected and had tried your best to prove yourself. You stated that that you were now no longer represented and found things difficult by yourself.

You submitted that you had been applying for positions and had received consistent responses from recruiters and had tried to send applications to care homes, and stated that you had completed training courses

You stated that when you inform prospective employers of your conditions of practice order it creates difficulties in securing a position of employment with appropriate supervision.

You concluded by stating that you would like the panel to consider extending your conditions to allow you the opportunity of *'trying harder'* and to ensure that you find a position with appropriate supervision in accordance with the conditions.

Panel decision on impairment

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.

With regard to impairment, the panel had regard to the case of *CHRE v NMC and Grant* [2011] EWHC 927 where Dame Janet Smith's observations in the Fifth Report of the Shipman Inquiry were endorsed. Dame Janet Smith suggested that questions of impairment could be considered in the light of the following considerations:

'Do our findings of fact in respect of the doctor's misconduct, deficient professional performance, adverse health, conviction, caution or determination show that his/her fitness to practise is impaired in the sense that s/he:

- a. has in the past acted and/or is liable in the future to act so as to put a patient or patients at unwarranted risk of harm; and/or*
- b. has in the past brought and/or is liable in the future to bring the medical profession into disrepute; and/or*
- c. has in the past breached and/or is liable in the future to breach one of the fundamental tenets of the medical profession; and/or*
- d. [...].'*

The panel also considered the principles in the case of *Cohen v General Medical Council* [2008] EWHC 581 (Admin):

'It must be highly relevant in determining if a doctor's fitness to practice is impaired that first his or her conduct which led to the charge is easily remediable, second that it has been remedied; and, third, that it is highly unlikely to be repeated.'

The panel considered whether your fitness to practise remains impaired.

Today's panel considered that it had received limited evidence of compliance with the conditions of practice order currently imposed on your registration.

The panel considered that you had demonstrated little insight and noted that it had not received persuasive evidence of strengthening of skills and knowledge, other than online courses undertaken in January 2026.

Further, the panel attached little weight to your assertions, given during oral evidence, that you had made significant efforts at securing appropriate supervised employment to comply with your conditions.

The panel was not convinced of the extent and depths you went to in order to secure appropriate employment and considered that your oral evidence had been vague. It further noted the absence of any testimonials.

However, the panel was mindful of the fact that you were not legally represented and noted that you had stated that you found representing yourself at a Fitness to Practise hearing to be difficult.

The panel considered that you had in the past posed a risk. It considered that you had provided nothing to suggest a strengthening of practice other than training that you claim to have undertaken. Therefore, the panel could not be sure that you do not pose a future risk.

The panel noted that multiple people had been affected by the index incidents involving your lack of competency.

The panel also bore in mind that your failings related to a lack of competency had undermined fundamental tenets of the profession and it had received no evidence that you had corrected or remediated these failings.

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

For these reasons, the panel determined that your fitness to practise remained impaired.

Decision and reasons on sanction

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

In coming to its decision, the panel had regard to its findings on impairment.

It bore in mind that its primary purpose is to protect the public and maintain public confidence in the nursing profession and the NMC as its regulator.

The panel considered that taking no further action would be neither appropriate nor proportionate taking into account the public protection concerns and the need to uphold the wider public interest in this case.

The panel considered that a caution would not be appropriate given the risk of repetition and risk to patients and would not protect the public.

The panel noted that you are currently on the register independent of this order and that your current registration does not lapse until 31 March 2026. It was therefore not open to the panel to consider the order to lapse with impairment.

The panel did consider that your lack of competence was remediable but noted your continued failure to comply with the conditions of practice order currently imposed.

It further considered that the current conditions of practice order was workable and could be complied with, but noted your continued failure to secure suitable supervised employment in order to comply with the conditions.

The panel determined that extending your conditions of practice order could be appropriate but was of the view that you must secure an appropriate position and considered that, if you failed to appropriately engage with the NMC, or continued to fail to provide any evidence of compliance with the order, then, in future, imposing further conditions would not be workable or appropriate.

The panel determined that the imposition of a suspension order which would temporarily remove you from the register would not be appropriate.

The panel considered that a continued failure to comply with the conditions of practice order could result in circumstances where a striking off order was now appropriate and proportionate.

Accordingly, the panel determined, pursuant to Article 30(1)(c) to make a conditions of practice order for a period of six months, which will come into effect on the expiry of the current order, namely at the end of 17 February 2026. 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 ensure that you are supervised by another registered nurse any time you are working. Your supervision must consist of working at

all times on the same shift as, but not always directly observed by another registered nurse until you are assessed as competent in the following areas:

- d) Communication with patients and colleagues including handovers.
- e) Record keeping and documentation.
- f) Prioritisation.

You must be signed off as competent in three consecutive assessments occurring every six weeks utilising a competency assessment framework(s).

2. You must not administer medication without direct supervision from another registered nurse until you are signed off as competent to do so in three further consecutive assessments occurring every six weeks. The assessment must utilise a competency assessment framework and be carried out by a clinical supervisor who is at least Band 6.

3. You must work with a clinical supervisor who is at least Band 6 or above to create a personal development plan (PDP). Your PDP must use competency assessment frameworks to address the concerns about:

- Medicines management.
- Communication with patients and colleagues, including handovers.
- Record keeping and documentation
- Prioritisation.

4. You must:

- c) Send your case officer a copy of your PDP before the next NMC review hearing.

d) Meet with your clinical supervisor who is at least Band 6 or above at least every month to discuss your progress towards achieving the aims set out in your PDP until deemed competent in the aforementioned areas above.

5. You must keep the NMC informed about anywhere you are working by:

- c) Telling your case officer within seven days of accepting or leaving any employment.
- d) Giving your case officer your employer's contact details.

6. You must keep the NMC informed about anywhere you are studying by:

- c) Telling your case officer within seven days of accepting any course of study.
- d) Giving your case officer the name and contact details of the organisation offering that course of study.

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

- f) Any organisation or person you work for.
- g) Any agency you apply to or are registered with for work.
- h) Any employers you apply to for work (at the time of application).
- i) Any establishment you apply to (at the time of application), or with which you are already enrolled, for a course of study.
- j) Any current or prospective patients or clients you intend to see or care for on a private basis when you are working in a self-employed capacity

8. You must tell your case officer, within seven days of your becoming aware of:

- a) Any clinical incident you are involved in.
- b) Any investigation started against you.
- c) Any disciplinary proceedings taken against you.

9. You must allow your case officer to share, as necessary, details about your performance, your compliance with and / or progress under these conditions with:

- a) Any organisation with which you volunteer in a nursing capacity.
- b) Any current or future employer.
- c) Any educational establishment.
- d) Any other person(s) involved in your retraining and/or supervision required by these conditions.

The period of this order is for six months.

Before the end of the conditions of practice order, 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:

- Very clear documented evidence of tailored and considered job applications;
- Clear documented evidence of any training you had undertaken, the specific content within these learning packages and how these relate to the concerns raised;
- Up-to-date reflections on any training activities detailing how they have developed your knowledge and understanding and the potential influence this will have on your future practice;
- References/and or testimonials relating to your performance in any environment.
This can include voluntary work or other paid work outside of nursing.

These documents should be submitted 14 days before an future review hearing.

This order will come into effect at the end of 17 February 2026 in accordance with Article 30(1) of the Nursing and Midwifery Order 2001 (as amended) (the Order).

Before the end of the period of the order, a panel will hold a review hearing to see how well you have complied with the order. At the review hearing the panel may allow the

order to expire, further extend the order, or may make an order falling within Article 29(5).

Additionally, you or the NMC may ask for the substantive order to be reviewed early if any new evidence becomes available that may be relevant to the order.

This will be confirmed to you in writing.

That concludes this determination.