

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

**Substantive Order Review Hearing
Tuesday, 6 January 2026**

Virtual Hearing

Name of registrant: Kevin John Brewer

NMC PIN: 9717687E

Part(s) of the register: Registered Nurse – Sub Part 1
Adult Nursing – Level 1 September 2000
30 September 2023

Relevant Location: Somerset

Type of case: Misconduct

Panel members: Richard Youds (Chair, Lay member)
Peter Cowup (Lay member)
Karin Downer (Registrant member)

Legal Assessor: Graeme Dalglish

Hearings Coordinator: Margia Patway

Nursing and Midwifery Council: Represented by Sian Beaven, Case Presenter

Mr Brewer: Not present and unrepresented at the hearing

Order being reviewed: Suspension order (6 months)

Fitness to practise: Impaired

Outcome: **Order to lapse with a finding of impairment upon expiry on 7 February 2026, in accordance with Article 30(1) of the Nursing and Midwifery Order 2001.**

Decision and reasons on service of Notice of Hearing

The panel was informed at the start of this hearing that Mr Brewer was not in attendance and that the Notice of Hearing had been sent to Mr Brewer's registered email address on 1 December 2025.

Further, the panel noted that the Notice of Hearing was also sent to Mr Brewer's representative at the Royal College of Nursing (RCN) on 1 December 2025.

Ms Beaven, 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, dates and venue of the hearing and, amongst other things, information about Mr Brewer's right to attend, be represented and call evidence, as well as the panel's power to proceed in his absence. The panel noted that the hearing date on the witness statement was incorrect but the hearing date on the notice itself was correct.

In the light of all of the information available, the panel was satisfied that Mr Brewer 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 Mr Brewer

The panel next considered whether it should proceed in the absence of Mr Brewer. The panel had regard to Rule 21 and heard the submissions of Ms Beaven who invited the panel to continue in the absence of Mr Brewer. She submitted that Mr Brewer had voluntarily absented himself.

Ms Beaven referred the panel to the letter from Mr Brewer's representative from the RCN dated 23 December 2025 which stated:

'Our member will not be attending the hearing nor will he be represented. Our member has work commitments and no disrespect is intended by his non-attendance. Our member has received the notice of hearing and is happy for the hearing to proceed in his absence. He is keen to engage with the proceedings.'

The panel accepted the advice of the legal assessor.

The panel has decided to proceed in the absence of Mr Brewer. In reaching this decision, the panel has considered the submissions of Ms Beaven, the written submissions made on Mr Brewer's behalf, and the advice of the legal assessor. It has had particular regard to 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 Mr Brewer;
- Mr Brewer's representative informed the NMC that he has received the Notice of Hearing and confirmed he is content for the hearing to proceed in his absence;
- There is no reason to suppose that adjourning would secure his attendance at some future date; and
- There is a strong public interest and it is in the interest of Mr Brewer to expeditiously review this case.

In these circumstances, the panel has decided that it is fair, appropriate and proportionate to proceed in the absence of Mr Brewer.

Decision and reasons on review of the substantive order

The panel decided to allow the current suspension order to lapse with a finding of current impairment.

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

This is the second review of a substantive order originally imposed for a period of 6 months by a Fitness to Practise Committee panel on 17 June 2025. The suspension order followed an earlier 12-month conditions of practice order imposed on 10 July 2024, after the panel determined that Mr Brewer's fitness to practise was impaired. At the review on 17 June 2025, the panel determined that Mr Brewer's fitness to practise remained impaired and replaced the conditions of practice order with a six-month suspension order.

The current order is due to expire at the end of 7 February 2026.

The panel is reviewing the order pursuant to Article 30(1) of the Order.

The charges found proved and admitted were as follows:

- 1) *Between 8 August 2022 and 16 August 2022:*
 - a) *Did not review and / or sign Resident A's daily records.*
 - b) *Did not monitor Resident A's decline in fluids and increased drowsiness.*
 - c) *Did not put in place the New Early Warning Score system for Resident A when it would have been clinically appropriate to do so.*
 - d) *Did not escalate Resident A's decline in fluids and increased drowsiness when it would have been clinically appropriate to do so.*

2) On 12 August 2022, gave Resident A's GP inaccurate information about Resident A's physical health in that you omitted to tell Resident A's GP that Resident A had begun declining food and fluids and sleeping for extended periods of time.

3) On 9 September 2022, when Resident B had been found on the floor with a skin tear:

a) Did not conduct a body check despite the possibility of Resident B having suffered an unwitnessed fall.

b) Did not:

i) clean Resident B's wound with an antiseptic wipe or otherwise.

ii) put Resident B's skin back into place. iii) take a photograph of Resident B's wound when dressing it.

c) Left Resident B on the floor for c.30 minutes.

d) Advised Colleague A to 'leave her on the floor to calm down whilst I go and do patches for other resident's' or words to that effect.

4) On an unknown date, did not document and/ or investigate concerns from Colleague A regarding:

a) A senior member of staff documenting resident's fluids when the resident was not receiving these fluids.

b) Mouthcare being documented for Resident B that had not taken place.

5) On 8 August 2022 after re-dressing Resident C's pressure ulcer did not take a photograph of the wound when it would have been clinically appropriate to do so.

6) On 12 August 2022:

a) *Categorised Resident C's pressure ulcer as a category 1 when it was a category 3 or 4.*

b) *Recorded that Resident C's pressure ulcer had improved when it had deteriorated.*

c) *Did not, when clinically appropriate to do so:*

i) monitor Resident C more closely and / or

ii) change Resident C's dressings more regularly and / or

iii) make a referral to the tissue viability nurse for Resident C.

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

The original panel determined that the charges found proved that amounted to misconduct were only charges 1a, 1c, 2, 4a and 4b, 6a, 6b, 6c(iii).

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

'The panel considered whether Mr Brewer's fitness to practise remains impaired.

This panel noted that the original hearing panel found that Mr Brewer had developing insight which was demonstrated through his reflective statement and that he had made admissions made at the beginning of that hearing. However, the panel noted in an email dated the 23 July 2024 from Mr Brewer's representative, that Mr Brewer is no longer working in a nursing role and appears to be pursuing a new career. He has indicated that he no longer wishes to be a nurse. He has not provided any new information or evidence to demonstrate that his insight has developed further or has taken steps to strengthen his practice.

The panel therefore was of the view that there was a risk or repetition and found impairment on public protection grounds.

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

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

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

'The panel next considered the continuation of the current conditions of practice order. The panel concluded that a conditions of practice order is no longer practicable in this case.

The panel concluded that since the imposition of the conditions of practice order, Mr Brewer has not engaged with the NMC. There is no evidence before the panel to indicate whether Mr Brewer has complied with the conditions of practice imposed at the substantive hearing. Mr Brewer has failed to provide evidence of developing insight or remorse for his behaviour. The panel further noted that Mr Brewer has indicated that he is not practising as a nurse anymore and no longer wishes to. Therefore, the panel is of the view that the conditions of practice is no longer enforceable, measurable, workable or realistic.

The panel went on to consider the imposition of a suspension order. The panel has taken into account that the charges first found proved were serious in nature, and involved vulnerable patients who were placed at unwarranted risk of harm. Mr Brewer's actions were not the result of a one-off isolated incident but took place over the course of a few days in one month.

Accordingly, the panel determined to impose a suspension order for the period of six months.

The panel took into account the NMC's guidance on striking-off orders (SAN-3e). It was of the view that Mr Brewer has failed to engage with the NMC as his regulator and provide information demonstrating how he has strengthened his practice. It was of the view that a continuing review cycle for a registrant who is not engaging or no longer wishes to practice as a nurse serves no purpose. It was of the view that a suspension order would give him another opportunity to engage with the NMC and the fitness to practise process and clarify his intentions in respect of his nursing career. The panel therefore determined that a striking-off order was inappropriate and disproportionate at this time.

Any future panel reviewing this case would be assisted by:

- A statement from Mr Brewer indicating whether it remains his intention not to continue with his nursing practice*
- Engagement with the NMC and attendance at the next review hearing*
- A detailed reflective piece covering the impact of his behaviour on patients, colleagues and the wider public.*

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.'

Decision and reasons on current impairment

The panel has considered carefully whether Mr Brewer's 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 ability to 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 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. It has taken account of the submissions made by Ms Beaven and written submissions from the RCN on Mr Brewer's behalf and the accompanying training certificates.

Ms Beaven outlined the background to this case and referred the panel to the documentary evidence contained within the hearing bundle, including the original substantive decision and the outcome of the previous review.

Ms Beaven submitted that the panel had before it written representations from the RCN and supporting documents. She submitted that Mr Brewer had confirmed that he had changed career into care home management and had no intention of returning to clinical nursing practice.

Ms Beaven submitted that the decision was a matter for the panel. However, she submitted that the panel may consider allowing the existing suspension order to lapse with a finding of current impairment as a pragmatic solution. She submitted that this course of action would result in Mr Brewer being removed from the register, as his registration had already lapsed, and would remove the need for further reviews of an ongoing order.

Ms Beaven submitted that the NMC's position was that Mr Brewer remained impaired on both public protection and public interest grounds. She submitted that, although Mr Brewer demonstrated some developing insight at the time the original conditions of practice order was imposed, he had not returned to clinical practice and had therefore been unable to demonstrate remediation or strengthened practice.

Ms Beaven submitted that there was no new evidence before the panel that altered the position reached at the previous review. She submitted that the burden remained on Mr Brewer to demonstrate that he was no longer impaired and that he had failed to discharge that burden.

The panel also had regard to the written representations and supporting documents submitted on Mr Brewer's behalf by the RCN. These included Mr Brewer's written statement, training certificates, and submissions confirming his acceptance of current impairment and his intention not to return to registered nursing practice.

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 Mr Brewer's fitness to practise remained impaired at the date of this review, having regard to the need to protect the public and to the wider public interest.

The panel had regard to the findings made at the substantive hearing and the outcome of the previous review. The panel noted that actual harm was caused to Resident A, and that Residents B and C were placed at an unwarranted risk of harm. The panel also noted that the misconduct was serious in nature and involved vulnerable residents.

The panel considered whether there had been any material change in circumstances since the previous review. The panel noted that Mr Brewer had not returned to clinical practice since resigning from his nursing role and that there was no evidence of remediation through practice.

The panel considered the training certificates submitted on Mr Brewer's behalf. The panel concluded that the training did not demonstrate sufficient remediation of the concerns that led to the finding of impairment on the basis that the training only constituted the

acquisition of new knowledge and lacked any application in the registered nursing role in which the concerns arose.

The panel considered Mr Brewer's insight and remorse. The panel accepted that Mr Brewer had demonstrated remorse and some insight. However, the panel concluded that his insight remained limited, particularly in relation to the impact of his misconduct on patients, their families, colleagues, the reputation of the profession, and public confidence in the regulatory process.

The panel considered the risk of repetition. In the absence of evidence of strengthened practice, clinical remediation, or safe return to nursing practice, the panel concluded that there remained a real risk of repetition.

The panel concluded that Mr Brewer's fitness to practise remained impaired on public protection grounds.

The panel also considered the public interest. The panel decided that the public would expect a level of conduct such that a registered nurse would act within their scope of practice and seek support when required, to avoid causing harm to residents and provide a high standard of care.

The panel concluded that a finding of current impairment was required to maintain public confidence in the profession and in the regulatory process, and to declare and uphold proper professional standards.

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

Decision and reasons on sanction

Having found Mr Brewer'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 further action or to impose a caution order. However, it concluded that either option would be inappropriate in view of the seriousness of the misconduct found proved and the ongoing public protection and public interest concerns. The panel determined that an order which did not restrict Mr Brewer's practice would not sufficiently address the findings made or maintain public confidence in the profession and the regulatory process.

The panel next considered whether to impose a conditions of practice order. The panel was mindful that any conditions imposed must be proportionate, measurable, and workable. The panel noted that Mr Brewer is not practising clinically and has clearly stated that he does not intend to return to clinical nursing practice. In these circumstances, the panel concluded that it would not be possible to formulate conditions that could be complied with or effectively monitored. The panel therefore determined that a conditions of practice order would not be workable and would serve no useful purpose.

The panel then considered whether to impose a further suspension order. The panel noted that Mr Brewer only remains on the register by virtue of the existing suspension order. The panel also had regard to the written representations submitted on Mr Brewer's behalf by the RCN, in which Mr Brewer confirmed his acceptance of current impairment and his settled intention not to return to nursing practice. The panel concluded that imposing a further suspension order would result in an ongoing cycle of reviews where there was no realistic prospect of remediation or return to practice, and would therefore be disproportionate.

The panel considered whether to impose a striking-off order. The panel concluded that a striking-off order would be disproportionate in the circumstances of this case, taking into

account Mr Brewer's expression of remorse, and his stated intention not to return to the profession. The panel did not consider that the misconduct was fundamentally incompatible with continued registration such that a striking-off order was required.

The panel considered the guidance relating to allowing an order to lapse with a finding of impairment. The panel noted that Mr Brewer's registration is only active because of the substantive order and that allowing the order to lapse with impairment would result in his removal from the register, thereby protecting the public from any future risk. The panel decided that this is an appropriate and proportionate disposal which protects the public and satisfies the public interest, mindful that the purpose of sanction is not to punish.

In accordance with Article 30(1) of the Order, the substantive suspension order will lapse with impairment upon its expiry at the end of 7 February 2026, at which point Mr Brewer's name will be removed from the register.

This will be confirmed to Mr Brewer in writing.

That concludes this determination.