

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

**Substantive Meeting
Thursday, 22 January 2026**

Virtual Meeting

Name of Registrant: **Kymberley Ann Finn**

NMC PIN: **17K0664E**

Part(s) of the register: **Nursing, Sub part 1**
Registered Nurse - Adult 24 May 2018

Relevant Location: **Newcastle**

Type of case: **Conviction**

Panel members: **Liz Dux** **(Chair, lay member)**
Anne Murray **(Registrant member)**
Raj Chauhan **(Lay member)**

Legal Assessor: **Robin Hay**

Hearings Coordinator: **Franchesca Nyame**

Facts proved: **Charge 1**

Facts not proved: **None**

Fitness to practise: **Impaired**

Sanction: **Striking-off order**

Interim order: **Interim suspension order (18 months)**

Decision and reasons on service of Notice of Meeting

The panel was informed at the start of this meeting that that the Notice of Meeting had been sent to Miss Finn's registered email address on 18 December 2025.

The panel accepted the advice of the legal assessor.

The panel took into account that the Notice of Meeting provided details of the allegation and that the meeting would be taking place virtually.

In the light of all of the information available, the panel was satisfied that Miss Finn has been served with notice of this meeting in accordance with the requirements of Rules 11A and 34 of the 'Nursing and Midwifery Council (Fitness to Practise) Rules 2004', as amended (the Rules).

Details of charge

That you, a Registered Nurse:

- 1) On 19 September 2024, were convicted of the following offence: a) Conspire to bring/throw/convey a List 'B' prohibited article into/out of a prison.

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

Facts

The charge concerns Miss Finn's conviction and, having been provided with a copy of the certificate of conviction, the panel finds that the Charge 1 is proved in accordance with Rule 31 (2) and (3). These state:

'31.— (2) Where a registrant has been convicted of a criminal offence—

- (a) a copy of the certificate of conviction, certified by a competent officer of a Court in the United Kingdom**

(or, in Scotland, an extract conviction) shall be conclusive proof of the conviction; and

(b) the findings of fact upon which the conviction is based shall be admissible as proof of those facts.

(3) The only evidence which may be adduced by the registrant in rebuttal of a conviction certified or extracted in accordance with paragraph (2)(a) is evidence for the purpose of proving that she is not the person referred to in the certificate or extract.'

The panel noted that Miss Finn had also admitted the charge.

Background

The NMC were informed by a referral from Northumbria Police on 16 April 2024 that Miss Finn had been charged with criminal offences that occurred whilst working as an agency nurse at HMP Durham.

Miss Finn pleaded guilty prior to sentencing for conspiracy to convey a List B prohibited article (mobile phone) into a prison.

Sentencing was held at Newcastle Crown Court on 14 January 2025 and Miss Finn was sentenced to 9 months imprisonment suspended for 18 months, rehabilitation activity requirements and ordered to pay a victim surcharge.

Fitness to practise

Having announced its findings on the facts, the panel then considered whether, on the basis of the fact found proved, Miss Finn's fitness to practise is currently impaired by reason of Miss Finn's conviction. There is no statutory definition of fitness to practise. However, the NMC has defined fitness to practise as a registrant's ability to practise kindly, safely and professionally.

Decision and reasons on impairment

The panel accepted the advice of the legal assessor.

The panel referred to the cases of *Council for Healthcare Regulatory Excellence v (1) Nursing and Midwifery Council (2) Grant* [2011] EWHC 927 (Admin) and *Ronald Jack Cohen v General Medical Council* [2008] EWHC 581 (Admin).

Although Miss Finn admitted impairment, it is for panel to decide whether she is currently impaired. As such, the panel next went on to decide if as a result of the conviction, Miss Finn's fitness to practise is currently impaired. It considered all the documentary information before it when making this decision.

Nurses occupy a position of privilege and trust in society and are expected at all times to be professional. Patients and their families must be able to trust nurses with their lives and the lives of their loved ones. Nurses must make sure that their conduct at all times justifies both their patients' and the public's trust in the profession.

In this regard the panel considered the judgment of Mrs Justice Cox in the case of *Grant* in reaching its decision. In paragraph 74, she said:

'In determining whether a practitioner's fitness to practise is impaired by reason of misconduct, the relevant panel should generally consider not only whether the practitioner continues to present a risk to members of the public in his or her current role, but also whether the need to uphold proper professional standards and public confidence in the profession would be undermined if a finding of impairment were not made in the particular circumstances.'

In paragraph 76, Mrs Justice Cox referred to Dame Janet Smith's "test" which reads as follows:

'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/their fitness to practise is impaired in the sense that S/He/They:

- 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*
 - a) *has in the past acted dishonestly and/or is liable to act dishonestly in the future.'*

The panel determined that the second and third limbs of the test above were significantly engaged in this case; Miss Finn's actions and subsequent conviction breached the fundamental tenets of the nursing profession and brought its reputation into disrepute.

In coming to its decision, the panel had regard to the NMC Guidance on '*Impairment*' (Reference: DMA-1 Last Updated: 03/03/2025) in which the following is stated:

'The question that will help decide whether a professional's fitness to practise is impaired is:

"Can the nurse, midwife or nursing associate practise kindly, safely and professionally?"

If the answer to this question is yes, then the likelihood is that the professional's fitness to practise is not impaired.'

The panel took into account the Judge's sentencing remarks which referred to Miss Finn's background and the fact that she was a significant participant in a conspiracy involving several other people to introduce a banned item to a prison. The panel also took into account the fact that Miss Finn was working at the prison as a nurse at the time when the offence was committed. Having been convicted on her own admission of this criminal

offence, the panel considered 'The Code: Professional standards of practice and behaviour for nurses and midwives 2015' ('the Code') to be relevant, particularly the following sections:

'20 *Uphold the reputation of your profession at all times*

To achieve this, you must:

- 20.1 *keep to and uphold the standards and values set out in the Code**
- 20.2 *act with honesty and integrity at all times**
- 20.3 *be aware at all times of how your behaviour can affect and influence the behaviour of other people**
- 20.4 *keep to the laws of the country in which you are practising.'**

The panel considered whether the circumstances which gave rise to the conviction meant that Miss Finn's fitness to practise is currently impaired.

Taking into account Miss Finn's significant breach of trust and her own understanding that what she was doing was illegal, the panel found that maintenance of public confidence in the nursing profession required a finding of impairment as does upholding the proper standards of conduct and behaviour required of a registered nurse. The panel determined that members of the public would be appalled if a registered nurse were not found impaired in circumstances where the nurse had abused their position of trust in this way.

In considering whether the circumstances which gave rise to Miss Finn's conviction were likely to be repeated, the panel found that, whilst these particular circumstances (namely committing an offence whilst working in a prison) were unlikely to be repeated, it had concerns that [PRIVATE] might present a risk of her repeating a breach of her duty of trust when working in another environment. The panel reached this decision in part having received nothing from Miss Finn to indicate any insight or remediation save for her plea of guilty at court and admissions to the NMC.

The panel did not consider Miss Finn's personal circumstances to be relevant to the question of impairment.

For all the above reasons, the panel decided that a finding of impairment is necessary on the grounds of public protection and public interest. The panel therefore found that Miss Finn's fitness to practise is currently impaired.

Sanction

The panel considered this case very carefully and decided to make a striking-off order. It directs the registrar to strike Miss Finn off the register. The effect of this order is that the NMC register will show that Miss Finn has been struck-off the register.

In reaching this decision, the panel has had regard to all the evidence that has been adduced in this case and had careful regard to the Sanctions Guidance (SG) published by the NMC. The panel accepted the advice of the legal assessor.

Representations on sanction

The panel noted that in the Case Management Form, signed by Miss Finn on 24 October 2025, the NMC advised Miss Finn that it would seek the imposition of a striking-off order if it found Miss Finn's fitness to practise currently impaired.

Decision and reasons on sanction

Having found Miss Finn's fitness to practise currently impaired, the panel went on to consider what sanction, if any, it should impose in this case. The panel has borne in mind that any sanction imposed must be appropriate and proportionate and, although not intended to be punitive in its effect, may have such consequences. The panel had careful regard to the SG. The decision on sanction is a matter for the panel independently exercising its own judgement.

The panel took into account the following aggravating features:

- Miss Finn's serious breach of position of trust and abuse of her public position;
- Lack of evidence in relation to her insight into her failings;
- She was part of a premeditated and planned conspiracy; and

- Her deliberate decision to commit a serious wrongdoing

The panel also took into account the following mitigating features:

- [PRIVATE];
- Her guilty plea at the Crown Court and early admissions to NMC;
- Her positive testimonials;
- Her previous good character; and
- There was no patient harm

The panel first considered whether to take no action but concluded that this would be inappropriate in view of the seriousness of the criminal offence. 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 criminal offence, and the public protection issues identified, an order that does not restrict Miss Finn'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 and the panel wishes to mark that the behaviour was unacceptable and must not happen again.*' The panel considered that Miss Finn's conduct was not at the lower end of the spectrum of seriousness and that a caution order would be inappropriate in view of the seriousness of the criminal offence. The panel decided that it would be neither proportionate nor in the public interest to impose a caution order.

The panel next considered whether placing conditions of practice on Miss Finn's registration would be a sufficient and appropriate response. The panel was of the view that there are no practical or workable conditions that could be formulated given the nature of the charge in this case. Furthermore, the panel concluded that the placing of conditions on Miss Finn's registration would not adequately protect the public or address the public interest and the seriousness of the criminal offence.

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 some of the following factors are apparent:

- *A single instance of misconduct but where a lesser sanction is not sufficient;*
- *No evidence of harmful deep-seated personality or attitudinal problems;*
- *No evidence of repetition of behaviour since the incident;*
- *The Committee is satisfied that the nurse or midwife has insight and does not pose a significant risk of repeating behaviour*

When considering suspension, the panel had in mind the overarching objectives of the NMC which 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, including promoting and maintaining public confidence in the nursing and midwifery professions and upholding the proper professional standards for members of those professions.

The panel then considered the nature of the criminal offence and the likely effect it would have on public confidence in the nursing profession.

In accordance with NMC guidance 'SAN-2: Sanctions for particularly serious cases', the panel considered the seriousness of Miss Finn's behaviour to be at a high level. For this reason, the panel determined that any sanction other than a striking-off order would be disproportionate to the gravity of the offence and insufficient to address public interest concerns. The panel determined that Miss Finn's actions are fundamentally incompatible with her remaining on the register.

When considering a striking-off order, the panel took note of the following paragraphs of the SG:

- *Do the regulatory concerns about the nurse or midwife raise fundamental questions about their professionalism?*

- *Can public confidence in nurses and midwives be maintained if the nurse or midwife is not removed from the register?*
- *Is striking-off the only sanction which will be sufficient to protect patients, members of the public, or maintain professional standards?*

Balancing all these factors and after taking into account all the information before it, the panel determined that the only appropriate and proportionate sanction is a striking-off order. Having regard to the matters it identified, in particular the effect of Miss Finn's actions in bringing the profession into disrepute by adversely affecting the public's view of how a registered nurse should conduct herself, the panel concluded that nothing short of this would be sufficient.

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.

This will be confirmed to Miss Finn in writing.

Interim order

As the striking-off order cannot take effect until the end of the 28-day appeal period, the panel considered whether an interim order is required in the specific circumstances of this case. It may only make an interim order if it is satisfied that it is necessary for the protection of the public, is otherwise in the public interest or in your own interests until the striking-off sanction takes effect.

Decision and reasons on interim order

The panel heard and accepted the advice of the legal assessor.

The panel was satisfied that an interim suspension order is necessary to protect the public and is otherwise in the public interest. The panel had regard to the seriousness of the misconduct and the reasons set out in its decision for the substantive order in reaching the

decision to impose an interim order. It considered that to not impose an interim suspension order would be inconsistent with its earlier findings.

Therefore, the panel imposed an interim suspension order for a period of 18 months.

If no appeal is made, then the interim suspension order will be replaced by the striking-off order 28 days after you are sent the decision of this hearing in writing.

That concludes this determination.