

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

**Substantive Order Review Hearing
Wednesday, 7 January 2026**

Virtual Hearing

Name of Registrant:	Rose Linda Chinwenma Nkemdirim	
NMC PIN:	03I0967O	
Part(s) of the register:	Registered Nurse – Sub part 1 RN1: Adult Nursing – September 2003	
Relevant Location:	Hertfordshire	
Type of case:	Misconduct	
Panel members:	Shubhaa Srinivasan Lauren Harrison Peter Cowup	(Chair, lay member) (Registrant member) (Lay member)
Legal Assessor:	Brett Wilson	
Hearings Coordinator:	Catherine Blake	
Nursing and Midwifery Council:	Represented by Nawazish Choudhury, Case Presenter	
Mrs Nkemdirim:	Not present and not represented at the hearing	
Order being reviewed:	Suspension order (9 months)	
Fitness to practise:	Impaired	
Outcome:	Suspension order (6 months) to come into effect on 8 February 2026 in accordance with Article 30 (1)	

Decision and reasons on service of Notice of Hearing

The panel was informed at the start of this hearing that Mrs Nkemdirim was not in attendance and that the Notice of Hearing had been sent to Mrs Nkemdirim's registered email address by secure email on 27 November 2025.

Further, the panel noted that the Notice of Hearing was also sent to Mrs Nkemdirim's last known representative at the Royal College of Nursing (RCN) on 27 November 2025.

Mr Choudhury, on behalf of the Nursing and Midwifery Council (NMC), submitted that it had complied with the requirements of Rules 11 and 34 of the 'Nursing and Midwifery Council (Fitness to Practise) Rules 2004', as amended (the Rules).

The panel accepted the advice of the legal assessor.

The panel took into account that the Notice of Hearing provided details of the substantive order being reviewed, the time, date and that the hearing was to be held virtually, including instructions on how to join and, amongst other things, information about Mrs Nkemdirim's right to attend, be represented and call evidence, as well as the panel's power to proceed in her absence.

In the light of all of the information available, the panel was satisfied that Mrs Nkemdirim has been served with notice of this hearing in accordance with the requirements of Rules 11 and 34.

Decision and reasons on proceeding in the absence of Mrs Nkemdirim

The panel next considered whether it should proceed in the absence of Mrs Nkemdirim. The panel had regard to Rule 21 and heard the submissions of Mr Choudhury who invited the panel to continue in the absence of Mrs Nkemdirim.

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

referred the panel to the multiple emails it has seen sent to Mrs Nkemdirim's registered email address to confirm her attendance, all of which went unanswered.

Mr Choudhury also referred to the correspondence received from the RCN on 5 January 2026 advising that they no longer represented Ms Nkemdirim.

Mr Choudhury submitted that Mrs Nkemdirim had voluntarily absented herself.

The panel accepted the advice of the legal assessor.

The panel has decided to proceed in the absence of Mrs Nkemdirim. In reaching this decision, the panel has considered the submissions of Mr Choudhury, the record of emails sent to Mrs Nkemdirim's registered email address, and the advice of the legal assessor. It has had particular regard to any 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 Mrs Nkemdirim;
- Mrs Nkemdirim has not engaged with the NMC and has not responded to any of the letters sent to her about this hearing;
- Numerous phone calls that had been made to the Mrs Nkemdirim's mobile and landline phone numbers by the NMC on 6 January 2026, all of which were unanswered;
- Mrs Nkemdirim has not provided a reason for her absence;
- There is no reason to suppose that adjourning would secure her attendance at some future date; and
- There is a strong public interest in the expeditious review of the case.

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

Decision and reasons on review of the substantive order

The panel decided to extend the current suspension order.

This order will come into effect at the end of 8 February 2026 in accordance with Article 30(1) of the 'Nursing and Midwifery Order 2001' (the Order).

This is the first review of a substantive suspension order originally imposed for a period of 9 months by a Fitness to Practise Committee panel on 9 April 2025.

The current order is due to expire at the end of 8 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.

- a) On or about 27 June 2022 disposed of Resident A's 39 morphine tablets without obtaining a countersignature from a second nurse in the controlled drug book.*
- b) On or about 7 July 2022 disposed of Resident A's bottle of morphine liquid without recording it in the controlled drug book.*
- c) On or about 23 July 2022 pre-signed a MAR chart indicating that medication had been administered when it had not.*
- d) On or about 8 September 2023, inaccurately recorded a balance of oxycodone as 80 ml when it should have been 98 ml.*
- e) On or about 19 September 2023, failed to sign on a MAR chart that you had administered medication.*

2. On or about 30 June 2022 amended one or more recorded balance quantities of Resident B's oxycodone

- a) Without recording that you had done so.*
- b) Without recording a rationale for doing so.*

...

4. *Entered into a Resident's care plan words to the effect that they stayed awake at night watching pornography.'*

The original panel determined that the charges found proved that amounted to misconduct were only charges 1a, 1b, 1c, 1d, 1e, 2a and 2b.

The original panel determined the following with regard to impairment:

'The panel found that residents were put at risk as a result of your misconduct. The panel also found that limbs a, b and c of Grant were engaged. The panel decided that your misconduct had breached the fundamental tenets of the nursing profession and therefore brought it into disrepute.'

The panel considered your bundle of documents when determining the issue of impairment. It noted your positive testimonials and training certificates as well as your medication competency assessment from 2022. It also noted your reflective statement and considered that whilst you showed some remorse, you have not taken full accountability for your actions or reflected fully on what actions you should take to ensure that the same errors do not occur in the future. The panel was of the view that you have a low level of insight into your failings and have repeatedly sought to blame others without taking accountability for your actions.

The panel was satisfied that the misconduct in this case is capable of being addressed. However, it was of the view that there is a risk of repetition of your actions as you have not practised as a nurse in over a year and a half and have not yet demonstrated any strengthening of your nursing practice. The panel therefore decided that a finding of impairment is necessary on the grounds of public protection.

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

The panel concluded that public confidence in the profession and the NMC as its regulator would be undermined if a finding of impairment were not made in this case and therefore also finds your fitness to practise impaired on the grounds of public interest.

Having regard to all of the above, the panel was satisfied that your fitness to practise is currently impaired.'

The original 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 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 placing conditions of practice on your registration would be a sufficient and appropriate response. The panel was mindful that any conditions imposed must be proportionate, measurable and workable. The panel took into account the SG, in particular:

- *No evidence of harmful deep-seated personality or attitudinal problems;*

- *Identifiable areas of the nurse or midwife's practice in need of assessment and/or retraining;*
- *No evidence of general incompetence;*
- *Potential and willingness to respond positively to retraining;*
- *...*
- *Patients will not be put in danger either directly or indirectly as a result of the conditions;*
- *The conditions will protect patients during the period they are in force; and*
- *Conditions can be created that can be monitored and assessed.*

The panel is of the view that any conditions of practice imposed would be so onerous that it would be tantamount to a suspension. Further, the lack of accountability identified, as it relates to colleagues, cannot be adequately addressed by conditions of practice until there has been further reflection and you have demonstrated insight and accountability for your misconduct. The panel was therefore of the view that there are no practical or workable conditions that could be formulated. Furthermore, the panel concluded that the placing of conditions on your registration would not adequately address the seriousness of this case and would not protect the public or be in the public interest.

The panel then went on to consider whether a suspension order would be an appropriate sanction in this case. 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;*
- *...*
- *...*

The panel determined that a suspension order for a period of 9 months was the appropriate and proportionate sanction. The panel considered that this order is necessary to mark the seriousness of the misconduct, the importance of maintaining public confidence in the profession, and to send to the public and the profession a clear message about the standard of behaviour required of a registered nurse. The panel was satisfied that in this case, the misconduct was not fundamentally incompatible with remaining on the register.'

Decision and reasons on current impairment

The panel has considered carefully whether Mrs Nkemdirim'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 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 Mr Choudhury on behalf of the NMC.

Mr Choudhury referred the panel to an email from Mrs Nkemdirim's former representative at the RCN, dated 29 October 2025:

'The registrant has confirmed that she does not wish to return to nursing and has retired.'

Mr Choudhury further referred the panel to the recommendations of the panel at the substantive hearing to provide the following to assist future reviewing panels in assessing her fitness to practice:

- *'A reflective piece demonstrating evidence of fully developed insight, remorse and accountability focussing on the impact of the particular actions found proved by the panel on public protection and the wider public interest'*

- *Included in the reflective piece a reflection on your misconduct as found proved and assurance of what steps you would take to prevent a repetition of this behaviour in the future*
- *Evidence of relevant training in record keeping, medication management and administration including controlled drugs, teamwork and communication*
- *Evidence of keeping up with nursing practices'*

Mr Choudhury informed the panel that Mrs Nkemdirim has not submitted any of these.

Mr Choudhury referred the panel to the information in the bundle that Mrs Nkemdirim's registration fee expired on 30 November 2023. He submitted that the current substantive order is keeping Mrs Nkemdirim on the Register.

Mr Choudhury referred to NMC Guidance REV-2h regarding removal from the register when there is a substantive order in place. He reminded the panel of its powers at this review, and that it is open to the panel to allow the current order to lapse at which point Mrs Nkemdirim would be automatically removed from the register with impairment.

Mr Choudhury noted that this is the first review of the order, and that Mrs Nkemdirim has not been subject to the order for such a period that her unwillingness to engage is overt.

Mr Choudhury submitted that the NMC's position at this stage is neutral, and that it is a matter for the panel to determine whether they consider it likely that Mrs Nkemdirim can return to safe and unrestricted practice within a reasonable timeframe.

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 Nkemdirim's fitness to practise remains impaired.

The panel noted that the original panel found that Mrs Nkemdirim had insufficient insight. At this hearing the panel has no information before it to suggest that Mrs Nkemdirim's insight has improved since the substantive hearing. This panel also noted that Mrs Nkemdirim did not take accountability for her actions at the substantive hearing, and so could not be satisfied that her levels of insight had altered given her lack of engagement.

Similarly, in its consideration of whether Mrs Nkemdirim has taken steps to strengthen her practice, the panel noted that Mrs Nkemdirim has not provided any evidence of additional training, and it has seen no indication from Mrs Nkemdirim of her intentions to return to practice.

The original panel determined that Mrs Nkemdirim was liable to repeat matters of the kind found proved. Today's panel has heard no new information to suggest that there has been any change in circumstances, and no evidence has been provided to suggest that the risk of repetition has been mitigated. In light of this, this panel determined that a finding of continuing impairment is necessary on the grounds of public protection.

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

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

Decision and reasons on sanction

Having found Mrs Nkemdirim'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 REV-2h and has borne in mind that the purpose of a sanction is not to be punitive, though any sanction imposed may have a punitive effect.

The panel first considered whether to take no action but concluded that this would be inappropriate in view of the seriousness of the case. The panel decided that it would be neither proportionate nor in the public interest to take no further action.

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 Mrs Nkemdirim'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 Mrs Nkemdirim's misconduct was not at the lower end of the spectrum and that a caution order would be inappropriate in view of the issues identified. The panel decided that it would be neither proportionate nor in the public interest to impose a caution order.

The panel next considered whether a conditions of practice on Mrs Nkemdirim's registration would be a sufficient and appropriate response. The panel is mindful that any conditions imposed must be proportionate, measurable and workable. The panel bore in mind the seriousness of the facts found proved at the original hearing and concluded that a conditions of practice order would not adequately protect the public or satisfy the public interest. The panel was not able to formulate conditions of practice that would adequately address the concerns relating to Mrs Nkemdirim's misconduct.

The panel took into account the correspondence from the RCN on Mrs Nkemdirim's behalf on 29 October 2025 indicating that she wished to be removed from the register. The panel noted that the RCN no longer represents Mrs Nkemdirim, so cannot confirm this position at today's hearing. In view of this correspondence, and Mrs Nkemdirim's lack of engagement, the panel considered that any conditions of practice order would not be workable and would serve no useful purpose.

The panel considered a further period of suspension. It was of the view that extending the suspension order would allow Mrs Nkemdirim further time to fully reflect on her previous failings, or to otherwise explicitly express her intention to be removed from the register. The panel bore in mind that this is the first instance of Mrs Nkemdirim not engaging with NMC proceedings. The panel therefore concluded that extending the suspension order by

a further 6-months would be the appropriate and proportionate response and would afford Mrs Nkemdirim adequate time to indicate a desire to be removed from the register, or otherwise take steps towards remediating her practice.

The panel determined therefore that a suspension order is the appropriate sanction which would continue to both protect the public and satisfy the wider public interest. Accordingly, the panel determined that further 6-month period of suspension would provide Mrs Nkemdirim with an opportunity to engage with the NMC and make her future intentions regarding whether she intends to continue as a registered nurse clear. It considered this to be the most appropriate and proportionate sanction available.

This suspension order will take effect upon the expiry of the current suspension order, namely the end of 8 February 2026 in accordance with Article 30(1).

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

Any future panel reviewing this case would be assisted by a clear indication from Mrs Nkemdirim regarding whether she wishes to be removed from the register.

If, however, Mrs Nkemdirim intends to return to practice, any future reviewing panel would be assisted by:

- A reflective piece demonstrating evidence of fully developed insight, remorse and accountability focussing on the impact of the particular actions found proved by the panel on public protection and the wider public interest
- Included in the reflective piece a reflection on your misconduct as found proved and assurance of what steps you would take to prevent a repetition of this behaviour in the future
- Evidence of relevant training in record keeping, medication management and administration including controlled drugs, teamwork and communication
- Evidence of keeping up with nursing practices

This will be confirmed to Mrs Nkemdirim in writing.

That concludes this determination.