

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

**Substantive Order Review Meeting
Wednesday, 17 June 2026**

Virtual Meeting

Name of Registrant: Rachel George

NMC PIN: 05L04150

Part(s) of the register: Registered Nurse - Sub part 1
Adult Nursing (December 2005)

Relevant Location: Somerset

Type of case: Lack of competence

Panel members: Wayne Miller (Chair, lay member)
Marilyn Norman (Lay member)
Richard Desir (Registrant member)

Legal Assessor: Elisa Hopley

Hearings Coordinator: Ifeoma Okere

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

Fitness to practise: Impaired

Outcome: **Conditions of Practice Order (12 months) to come into effect upon the expiry of the current order, namely at the end of 26 July 2026, in accordance with Article 30(1)**

Decision and reasons on service of Notice of Meeting

The panel noted at the start of this meeting that the Notice of Meeting had been sent to Mrs George's registered email address by secure email on 6 May 2026.

The panel took into account that the Notice of Meeting provided details of the review and informed Mrs George that the review meeting would be held no sooner than 8 June 2026. The Notice also invited Mrs George to provide any written evidence for consideration by the panel. The panel noted that Mrs George had been given the opportunity to request a hearing but chose not to exercise her right to do so.

The panel accepted the advice of the legal assessor.

In the light of all of the information available, the panel was satisfied that Mrs George 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).

Decision and reasons on review of the current order

The panel decided to extend the current conditions of practice order for a further period of 12 months. This order will come into effect upon the expiry of the current order, namely at the end of 26 July 2026, in accordance with Article 30(1) of the Nursing and Midwifery Order 2001 (as amended) (the Order).

This is the fourth review of a substantive conditions of practice order originally imposed for a period of 18 months by a Fitness to Practise Committee panel on 25 June 2021.

The order was reviewed on 12 December 2022. The reviewing panel determined that Mrs George's fitness to practise remained impaired and confirmed and extended the conditions of practice order for a further period of 12 months.

The order was reviewed again on 20 December 2023. The reviewing panel determined that Mrs George's fitness to practise remained impaired and confirmed and extended the conditions of practice order for a further period of 18 months.

The order was reviewed on 9 June 2025. The reviewing panel determined that Mrs George's fitness to practise remained impaired and confirmed and extended the conditions of practice order for a further period of 12 months.

The current order is due to expire at the end of 26 July 2026.

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

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

'That you, a registered nurse, between 15 October 2018 and 02 January 2019 failed to demonstrate the standards of knowledge, skills and judgment to practise without supervision as a band 5 nurse, in that you:

- 1) On 25 October 2018 administered metformin to patient AL when patient AL's prescription for metformin was on hold.*
- 2) On 04 November 2018 administered 500mg of metformin to patient JT when patient JT was prescribed 1g of metformin.*
- 3) On 05 November 2018 failed to administer losartan to a patient who had been prescribed losartan.*
- 4) On 05 November 2018 administered 50mg of losartan to patient B when patient B was prescribed 100mg of losartan.*
- 5) On 09 November 2018 recorded patient notes in the notes pertaining to the wrong patient.*
- 6) On 17 November 2018 incorrectly documented that a patient had a discoloured bruise when the patient had a grade 3 pressure sore.*

- 7) *On 19 November 2018 incorrectly recorded a patient as being mobile when the patient was immobile and required the use of a hoist.*
- 8) *On 26 November 2018 failed to check a patients' identification before administering medication to the patient.*
- 9) *On 26 November 2018 failed to take and record a patients observations before administering medication to the patient.*
- 10) *On 26 November 2018 signed a patients MAR record to confirm you had administered medication when you had not administered the medication.*
- 11) *On 13 December 2018 incorrectly recorded that you had taken a patients' respiration and oxygen saturation at 13:10 when you had taken the patients' respiration and oxygen saturation at 11:30.*
- 12) *On 18 December 2018 administered ibuprofen gel to a patient without recording the administration of the ibuprofen gel in the patients MAR chart.*

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

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

'The panel has considered carefully whether Mrs George's fitness to practise remains impaired. Whilst there is no statutory definition of fitness to practise, the Nursing and Midwifery Council (NMC) has defined fitness to practise as a registrant's ability to practise 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, including the NMC bundle, written submissions from the RCN and the NMC guidance.

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 George's fitness to practise remains impaired.

The panel took into account the written representations provided by the RCN on Mrs George's behalf. It noted that Mrs George has accepted that her fitness to practise is currently impaired. The panel also noted that Mrs George has ongoing and serious [...] issues that have had a significant impact on her ability to demonstrate progress in addressing the regulatory concerns.

The panel found that Mrs George has not returned to clinical practice and has therefore been unable to work under supervision or comply with the conditions previously imposed. As such, there is limited opportunity to assess her insight or evidence of remediation. The panel concluded that the situation remains largely unchanged since the last review, and the [...] indicates that her [...] continues to prevent her from engaging with the process in a way that would demonstrate safe and effective practice.

The panel acknowledged that Mrs George has made reasonable efforts to engage with the NMC through her legal representative and has provided updated [...]. It is clear to the panel that she maintains a desire to return to nursing when her [...] allows and has participated in the process as far as her circumstances have allowed.

In the absence of any new evidence of remediation or recent clinical practice and taking into account Mrs George's own acceptance that her fitness to practise remains impaired, the panel could not be satisfied that the risk of repetition has been addressed. It therefore determined that she

remains liable to repeat matters of the kind previously found proved, and concluded 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 George's fitness to practise remains impaired.'

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

'Having found Mrs George'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 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 George'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 George's failings were 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 further extension of the conditions of practice order would remain a sufficient and appropriate response. The panel is mindful that any conditions imposed must be proportionate, measurable and workable.

The panel determined that extending the current conditions of practice order remains the appropriate and proportionate sanction. This will allow Mrs George sufficient time to continue her [...] and [...], as well as the opportunity to return to suitable employment in order to comply with and complete the conditions. The panel noted that Mrs George is considering her options in the future and has asked the panel to extend the current order. While she requested a six-month extension, the panel considered that this timeframe may place undue pressure on her recovery. Accordingly, the panel determined that a longer period would be more appropriate to support her ongoing recovery and provide a realistic opportunity to engage with the conditions and therefore protect the public during this process.

The panel was of the view that a further extension of the conditions of practice order is sufficient to protect patients and the wider public interest, noting as the original panel did, that there was no evidence of deep-seated attitudinal problems.

The panel had regard to the current conditions of practice order. It determined that the current conditions remain workable and practicable, so it was not minded to vary the conditions, as they are currently formulated in a way which sufficiently address the public protection and public interest concerns that remain.

The panel was of the view that to replace the current order with a suspension order would be wholly disproportionate and would not be a reasonable response in the circumstances of Mrs George's case. This is because due to her current [...] she is unable to practise as a registered nurse and suspending her would be punitive and would not give her the opportunity to strengthen her practice.

Accordingly, the panel determined, pursuant to Article 30(1)(c) to further extend the current 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 26 July 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. At any time that you are employed or otherwise providing nursing services, you must place yourself and remain under the supervision of a workplace line manager, mentor or supervisor nominated by your employer, such supervision to consist of:

- a) working at all times on the same shift as, but not necessarily under the direct observation of, a Registered Nurse of Band 5 equivalent or above who is competent in medicines administration.*
- b) At the conclusion of all shifts, your care records are reviewed and countersigned as accurate by Registered Nurse of Band 5 or above. This check must remain in place until such time as your line manager, mentor or supervisor is satisfied and has documented that your record keeping is consistently of a competent standard.*

2. You must work with your line manager, mentor or supervisor (or their nominated deputy) to create a personal development plan designed to address the concerns about the following areas of your practice:

- a) Medication administration*

b) Record keeping

- 3. You must meet with your line manager, mentor or supervisor (or their nominated deputy) at least every month, to discuss the standard of your performance and your progress towards achieving the aims set out in your personal development plan.*
- 4. You must forward to the NMC a copy of your personal development plan within 28 days of the date on which these conditions become effective or the date on which you take up an appointment, whichever is sooner.*
- 5. You must send a report from your line manager, mentor or supervisor (or their nominated deputy) setting out the standard of your performance and your progress towards achieving the aims set out in your personal development plan to the NMC at least 14 days before any NMC review hearing or meeting.*
- 6. You must allow the NMC to exchange, as necessary, information about the standard of your performance and your progress towards achieving the aims set out in your personal development plan with your line manager, mentor or supervisor (or their nominated deputy) and any other person who is or will be involved in your retraining and supervision with any employer, prospective employer and at any educational establishment.*
- 7. You must not carry out medication administration unless directly supervised by a Registered Nurse of Band 6 or a Registered Nurse of Band 5 who is competent in medicines administration including intravenous medication when applicable until deemed competent by your line manager, mentor or supervisor (or their nominated deputy).*
- 8. You must keep us 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.*

9. *You must keep us informed about anywhere you are studying by:*

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

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

- a) *Any organisation or person you work for.*
- b) *Any agency you apply to or are registered with for work.*
- c) *Any employers you apply to for work (at the time of application).*
- d) *Any establishment you apply to (at the time of application), or with which you are already enrolled, for a course of study.*
- e) *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*

11. *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.*

12. *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 current or future employer.*
- b) *Any educational establishment.*

- c) *Any other person(s) involved in your retraining and/or supervision required by these conditions.'*

Decision and reasons on current impairment

The panel has considered carefully whether Mrs George's fitness to practise remains impaired. Whilst there is no statutory definition of fitness to practise, the NMC has defined fitness to practise as the ability of a professional on our register to practise as a nurse, midwife or nursing associate safely and effectively 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 had regard to all of the documentation before it, including the NMC bundle and the correspondence received from the Royal College of Nursing (RCN) in February 2026.

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 George's fitness to practise remains impaired.

The panel noted that the last reviewing panel had limited opportunity to assess Mrs George's insight due to her inability to return to practice and demonstrate remediation. The panel carefully considered the information before it and noted that there was no new evidence demonstrating further insight, reflection or remediation since the previous review.

The panel acknowledged that Mrs George has continued to engage with the regulatory process through her representative and has provided updates regarding her [PRIVATE]. The panel noted that Mrs George has not returned to nursing practice and has therefore been unable to work under supervision or comply with the conditions previously imposed. As such, there has been limited opportunity for the panel to assess insight, remediation or

strengthened practice. The panel concluded that the situation remains largely unchanged since the previous review and that Mrs George's [PRIVATE] continue to limit her ability to demonstrate safe and effective practice.

In considering whether Mrs George has taken steps to strengthen her practice, the panel took into account that there was no evidence before it of recent clinical practice or remediation. The panel noted that Mrs George's ongoing [PRIVATE] have prevented her from returning to practice and therefore from demonstrating compliance with the conditions of practice order. Whilst the panel was sympathetic to her circumstances, it concluded that there remained no evidence that the concerns found proved had been addressed.

The panel considered whether there was any evidence that the risk of repetition had reduced since the previous review. It noted that there had been no opportunity for the conditions of practice order to be tested in a clinical setting and no evidence demonstrating that Mrs George is able to practise safely and effectively without restriction. In the absence of evidence of remediation, strengthened practice or compliance with the conditions of practice order, the panel determined that it could not be satisfied that the risk of repetition had been addressed.

The panel therefore determined that Mrs George remains liable to repeat matters of the kind found proved. It concluded that a finding of continuing impairment remains 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 noted that there has been no material change since the last review and that there remains no evidence of remediation, strengthened practice or compliance with the conditions of practice order.

The panel determined that public confidence in the profession and in the regulatory process would be undermined if a finding of impairment were not made in these circumstances. The panel therefore concluded that a finding of continuing impairment remains necessary on public interest grounds.

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

Decision and reasons on sanction

Having found Mrs George'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 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 George'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, but the Committee wants to mark that what happened was unacceptable and must not happen again.'* The panel considered that Mrs George'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 further conditions of practice order would remain a sufficient and appropriate response. The panel was mindful that any conditions imposed must be proportionate, measurable and workable.

The panel acknowledged that Mrs George's inability to comply with the conditions has been significantly affected by her [PRIVATE]. The panel took into account the information provided by the RCN regarding Mrs George's ongoing [PRIVATE] and accepted that these have significantly limited her ability to engage with the conditions of practice order. The panel noted that the RCN are no longer representing Mrs George. The panel also noted that Mrs George continues to consider her future options and may require further time to determine whether she is able to return to nursing practice.

The panel determined that the current conditions remain workable and practicable. The panel was satisfied that they continue to address the public protection concerns identified in this case. The panel considered that a further extension of the conditions of practice order would provide Mrs George with additional time to continue to improve [PRIVATE], seek [PRIVATE] and, if able, return to suitable employment where the conditions can be tested in practice.

The panel was of the view that a further conditions of practice order remains sufficient to protect patients and the wider public interest. The panel noted, as previous panels had done, that there is no evidence of deep-seated attitudinal concerns and that the concerns are capable of remediation.

The panel next considered a suspension order. The panel was of the view that replacing the current order with a suspension order would be wholly disproportionate and would not be a reasonable response in the circumstances of Mrs George's case. The panel noted that, due to her current [PRIVATE], Mrs George is unable to practise as a registered nurse. The panel determined that a suspension order would be punitive and would not provide her with the opportunity to strengthen her practice.

The panel also considered a striking-off order. The panel determined that such an order would be disproportionate. The concerns relate to lack of competence, are remediable in nature and are not fundamentally incompatible with continued registration.

Accordingly, the panel determined, pursuant to Article 30(1)(c), to extend the current conditions of practice order for a further period of 12 months, which will come into effect upon the expiry of the current order, namely at the end of 26 July 2026.

The panel determined that a further extension of the conditions of practice order remains the appropriate and proportionate sanction and is sufficient to protect patients and the wider public interest.

The panel had regard to the current conditions of practice order and determined that the existing conditions remain workable and practicable. The panel was not minded to vary the conditions, as they remain appropriately formulated to address the public protection and public interest concerns that continue to arise in this case. It therefore determined that the conditions should remain unchanged and continue as set out below:

'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. At any time that you are employed or otherwise providing nursing services, you must place yourself and remain under the supervision of a workplace line manager, mentor or supervisor nominated by your employer, such supervision to consist of:
 - a) working at all times on the same shift as, but not necessarily under the direct observation of, a Registered Nurse of Band 5 equivalent or above who is competent in medicines administration.
 - b) At the conclusion of all shifts, your care records are reviewed and countersigned as accurate by Registered Nurse of Band 5 or above. This check must remain in place until such time as your line manager, mentor or supervisor is satisfied and has documented that your record keeping is consistently of a competent standard.
2. You must work with your line manager, mentor or supervisor (or their nominated deputy) to create a personal development plan designed to address the concerns about the following areas of your practice:
 - a) Medication administration
 - b) Record keeping
3. You must meet with your line manager, mentor or supervisor (or their nominated deputy) at least every month, to discuss the standard of your performance and your progress towards achieving the aims set out in your personal development plan.
4. You must forward to the NMC a copy of your personal development plan within 28 days of the date on which these conditions become effective or the date on which you take up an appointment, whichever is sooner.
5. You must send a report from your line manager, mentor or supervisor (or their nominated deputy) setting out the standard of your performance and your progress

towards achieving the aims set out in your personal development plan to the NMC at least 14 days before any NMC review hearing or meeting.

6. You must allow the NMC to exchange, as necessary, information about the standard of your performance and your progress towards achieving the aims set out in your personal development plan with your line manager, mentor or supervisor (or their nominated deputy) and any other person who is or will be involved in your retraining and supervision with any employer, prospective employer and at any educational establishment.
7. You must not carry out medication administration unless directly supervised by a Registered Nurse of Band 6 or a Registered Nurse of Band 5 who is competent in medicines administration including intravenous medication when applicable until deemed competent by your line manager, mentor or supervisor (or their nominated deputy).
8. You must keep us informed about anywhere you are working by:
 - a) Telling your case officer within seven days of accepting or leaving any employment.
 - b) Giving your case officer your employer's contact details.
9. You must keep us informed about anywhere you are studying by:
 - a) Telling your case officer within seven days of accepting any course of study.
 - b) Giving your case officer the name and contact details of the organisation offering that course of study.
10. You must immediately give a copy of these conditions to:
 - a) Any organisation or person you work for.
 - b) Any agency you apply to or are registered with for work.
 - c) Any employers you apply to for work (at the time of application).
 - d) Any establishment you apply to (at the time of application), or with which you are already enrolled, for a course of study.
 - e) 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

11. 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.

12. 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 current or future employer.
- b) Any educational establishment.
- c) Any other person(s) involved in your retraining and/or supervision required by these conditions

The period of this order is for 12 months.

This conditions of practice order will take effect upon the expiry of the current conditions of practice order, namely at the end of 26 July 2026, in accordance with Article 30(1).

Before the end of the period of the order, a panel will hold a review hearing to see how well Mrs George has complied with the order. At the review hearing the panel may revoke the order or any condition of it, it may confirm the order or vary any condition of it, or it may replace the order for another order.

The panel determined that the existing conditions should remain unchanged.

Any future panel reviewing this case would be assisted by:

- Evidence of Mrs George's continued engagement with the NMC.
- An update regarding Mrs George's [PRIVATE], including any relevant [PRIVATE] addressing her ability to return to nursing practice.
- Evidence of compliance with the conditions of practice order.
- A reflective piece demonstrating insight into the concerns found proved.
- Evidence of professional development undertaken.
- Up to date professional references in respect to any work undertaken, whether paid or unpaid including any role as a Health Care Assistant.
- An indication of Mrs George's future career intentions.

This will be confirmed to Mrs George in writing.

That concludes this determination.