Nursing and Midwifery Council
Fitness to Practise Committee

Substantive Order Review Meeting
Tuesday, 23 June – Wednesday, 24 June 2026

Virtual Meeting

Name of Registrant:	**Jackie Shaw**
NMC PIN:	10G1080E
Part(s) of the register:	RNC: children's nurse, level 1 (5 September 2010) V300: Nurse independent / supplementary prescriber (10 June 2020)
Relevant Location:	Staffordshire
Type of case:	Misconduct
Panel members:	Michelle McBreeze (Chair, Lay member) Alison Hayle (Lay member) Claire Cawley (Registrant member)
Legal Assessor:	Alice Robertson Rickard
Hearings Coordinator:	Emma Hotston
Order being reviewed:	Suspension order (12 months)
Fitness to practise:	Impaired
Outcome:	**Suspension order (12 months) to come into effect on 4 August 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 Ms Shaw's registered email address by secure email on 21 May 2026.

The panel took into account that the Notice of Meeting provided details that the review meeting would be held no sooner than 22 June 2026 and invited Ms Shaw to provide any written evidence seven days before this date.

The panel accepted the advice of the legal assessor.

In the light of all of the information available, the panel was satisfied that Ms Shaw 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 application for meeting to be held in private

At the outset of the meeting, the panel considered the written representations of Ms Shaw's representative at the Royal College of Nursing (RCN) that this case be held either partly or wholly in private on the basis that proper exploration of Ms Shaw's case involves reference to her health. The application was made pursuant to Rule 19 of Nursing and Midwifery Council (Fitness to Practise) Rules 2004, as amended (the Rules).

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.

Whilst the panel was mindful that meetings are conducted in private in any event, it noted its guidance at CMT-4 (last updated 13 January 2023) that if it found Ms Shaw's fitness to practise to be impaired and imposed a sanction, its decision would be published. The panel therefore decided that any references in its decision to Ms Shaw's health should be in private.

Decision and reasons on review of the current order

The panel imposed a suspension order for a period of 12 months.

This order will come into effect at the end of 4 August 2026 in accordance with Article 30(1) of the Nursing and Midwifery Order 2001 (as amended) (the Order).

This is the first review of a substantive suspension order originally imposed for a period of 12 months by a Fitness to Practise Committee panel on 7 July 2025.

The current order is due to expire at the end of 4 August 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:*
>
> *1) On or around 6 September 2023 asked Colleague A to put aside medication set out in Schedule 1 for your personal use.*
>
> *2) Your conduct in Charge 1 was dishonest in that you knew you did not have permission to take medication form the Home for your personal use.*
>
> *AND in light of the above, your fitness to practise is impaired by reason of your misconduct.'*

The original panel determined the following with regard to impairment:

> *'The panel determined that Ms Shaw's fitness to practise is currently impaired.*

In reaching its decision, the panel applied the test set out in the judgment of Mrs Justice Cox in the case of Council for Health Regulatory Excellence v (1) Nursing and Midwifery Council (2) and Grant [2011] EWHC 927 (Admin) in reaching its decision.

…

The panel determined that all four limbs were engaged in this case. It concluded that Ms Shaw's dishonest conduct breached a fundamental tenet of the profession and brought it into disrepute. It also determined that while no actual harm occurred, the behaviour created a future risk to patients by disregarding medicines policies and found that there was limited evidence of insight and absence of remediation which further supports a risk of repetition.

Turning to the observations made by J Silber in the case of Cohen v General medical Council [2008] EWHC 581. The panel found that misconduct, involving dishonesty, is inherently difficult to remediate. There was no evidence before the panel of any remediation or reflection into the failings and there was limited insight shown by Ms Shaw. Therefore, it could not be satisfied that the concerns identified have been remedied and are unlikely to be repeated.

In light of its findings of potential risk of harm in the future, the panel determined that Ms Shaw is currently impaired on the grounds of public protection. It also considered the wider public interest, which includes upholding professional standards and maintaining public confidence in the profession. The panel was of the view that a fully informed member of the public, aware of Ms Shaw's conduct and the lack of remediation, would be concerned if no finding of impairment were made. The panel therefore determined that a finding of impairment was also necessary on public interest grounds.'

The original panel determined the following with regard to sanction:

'…The panel next considered whether placing conditions of practice on Ms Shaw'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 noted that Ms Shaw is currently not working and has intimated that she no longer wishes to practice therefore, the panel could not identify any workable conditions. The panel is also of the view, that the misconduct identified in this case was not something that can be addressed through retraining.

Furthermore, the panel concluded that the placing of conditions on Ms Shaw's registration would not adequately address the seriousness of this case and would not protect the public.

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;
…;
…; and
...

The panel was satisfied that in this case, the misconduct was not fundamentally incompatible with remaining on the register, and brief period of removal would allow Ms Shaw time to reflect, remediate her behaviour and return to nursing should she wish to do so.

It did go on to consider whether a striking-off order would be proportionate but, taking account of all the information before it, and of the mitigation provided, the panel concluded that it would be disproportionate. Whilst the panel acknowledges that a suspension may have a punitive effect, it would be unduly punitive in Ms Shaw's case to impose a striking-off order.

Balancing all of these factors the panel agreed with the CPD that a suspension order would be the appropriate and proportionate sanction.'

Decision and reasons on current impairment

The panel has considered carefully whether Ms Shaw'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 has had regard to all of the documentation before it, including the NMC bundle and the written submissions from Ms Shaw's representatives, which included the following information:

- Ms Shaw's written reflective statement – dated June 2026
- GP letter – dated 14 May 2025.

Ms Shaw's representatives submitted [PRIVATE]. This has significantly impacted on her ability to provide additional supporting documentation for this review hearing.

Ms Shaw's representatives further submitted that Ms Shaw is not currently working due to the suspension order. At this stage, Ms Shaw is [PRIVATE] and does not intend to return to nursing.

Ms Shaw's representatives invited the panel to continue the suspension order in its current form to allow Ms Shaw to have the time required to [PRIVATE] and to further reflect and address the panel's recommendations.

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 Ms Shaw's fitness to practise remains impaired. The panel noted that the persuasive burden is on Ms Shaw to demonstrate that she is no longer impaired and was of the view that she has not discharged this burden.

The panel had regard to the written statement provided by Ms Shaw's representative. It noted [PRIVATE] which have impacted her ability to provide a detailed reflection and additional supporting documentation for this review hearing.

The panel also had regard to [PRIVATE].

In its consideration of whether Ms Shaw has taken steps to strengthen her practice and gain further insight, the panel took into account that Ms Shaw has attempted to undertake a training course on medication management despite not being currently employed, however it noted Ms Shaw's explanation that she was unable to complete this training due to [PRIVATE].

The panel noted that whilst it is positive that Ms Shaw has attempted to complete relevant training in medication management, it had insufficient new evidence before it today to suggest that she had strengthened her practice and developed further insight into her actions. The panel considered that in Ms Shaw's written reflection, whilst she had demonstrated some remorse, this insight remained limited and she had not currently demonstrated sufficient insight into her conduct and the impact it had on patients, colleagues and the nursing profession.

The panel had regard to the original panel's finding that '*there was no evidence before it of any remediation or reflection into the failings and there was limited insight shown by Ms Shaw. Therefore, it could not be satisfied that the concerns identified have been remedied and are unlikely to be repeated*.'

Today's panel noted that as Ms Shaw has faced difficulties in providing additional supporting documentation for this review hearing and has not worked in a nursing role since September 2023, it has limited new information before it from Ms Shaw since the order was imposed to suggest that she has addressed the areas of regulatory concern. It further noted that Ms Shaw's engagement with proceedings has been limited. Therefore, the panel was not satisfied at this time that Ms Shaw has provided sufficient evidence to demonstrate that she has addressed the areas of regulatory concern and is able to practice safely and effectively. Accordingly, the panel's findings remained the same as the original panel in that it could not be satisfied that the concerns identified have been remedied and are unlikely to be repeated.

However, the panel recognised that [PRIVATE] has impacted her ability to provide additional supporting documentation for this review hearing and being able to comply with the previous panel's recommendations.

The panel had regard to [PRIVATE].

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 both public protection and public interest grounds is required. Accordingly, the panel finds that Ms Shaw's fitness to practise remains impaired.

Decision and reasons on sanction

Having found Ms Shaw'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.

In its considerations, the panel gave careful regard to the seriousness of Ms Shaw's misconduct but also took account of [PRIVATE] and recognised that she has attempted to

abide with the recommendations made by the previous panel but faced difficulties due to [PRIVATE].

The panel had further regard to the submissions of Ms Shaw's representative, which stated that '*a continuation of the current order, would be appropriate in this case. This would give our member time to [PRIVATE] and give her time to further reflect and address the panel's recommendations'*.

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 public protection issues identified, a caution order 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 Ms Shaw'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 Ms Shaw'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 CPD agreement and concluded that a conditions of practice order would not adequately protect the public or satisfy the public interest. The panel noted that concerns relating to dishonesty are difficult to remediate and was not able to formulate conditions of practice that would adequately address the concerns relating to Ms Shaw's misconduct.

The panel next considered the imposition of a further period of suspension. It noted the previous panel's reasons as to why a suspension order was appropriate, and agreed. Whilst the panel was mindful that Ms Shaw had stated that she does not intend to return to

nursing practice due to [PRIVATE], it was of the view that a period of further suspension would provide Ms Shaw with further time to [PRIVATE], and as her representative has indicated, she may wish to return to practice if [PRIVATE]. A further period of suspension would also give her time to reflect on her misconduct and to comply with the panel's recommendations. The panel concluded that a further 12 months suspension order would be the appropriate and proportionate response and would afford Ms Shaw adequate time for the progress envisaged at the original substantive hearing to be achieved.

The panel was of the view that to impose a striking-off order would not be appropriate at this time, given that the current reason for Ms Shaw's lack of detailed reflection and strengthening of practice appears to be due to [PRIVATE] rather than an unwillingness to engage.

The panel also considered allowing the order to lapse with a finding of impairment, which would have the effect of removing Ms Shaw from the register when the current order expires. It was mindful of the guidance at REV-2h, which indicates that if a suspension order is unlikely to result in the return to safe unrestricted practice within a reasonable period of time, it should ensure that the professional is removed from the register. However, it was satisfied that it had not yet reached the stage where removal from the register was necessary or proportionate, as this is the first review of the order and [PRIVATE].

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 to impose a suspension order for the period of 12 months would provide Ms Shaw with an opportunity to engage with the NMC and provide evidence of compliance with the panel's recommendations. 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 4 August 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:

- Evidence of Ms Shaw's engagement with the NMC;
- Evidence of further insight into the misconduct and its impact on colleagues, the profession and public confidence;
- Evidence of remediation, further reflection or any steps taken by Ms Shaw to strengthen her practice;
- Any testimonials from any employer, whether in nursing or not;
- [PRIVATE];
- A clear statement of Ms Shaw's intentions in relation to returning to nursing.

This will be confirmed to Ms Shaw in writing.

That concludes this determination.