

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

**Substantive Order Review Hearing
Friday, 13 March 2026**

Virtual Hearing

Name of Registrant: Anita Mary Colton

NMC PIN: 90Y0027N

Part(s) of the register: Registered Nurse – Sub part 1
RN3: Mental Health Nurse (Level 1) – 17 March 1994

Relevant Location: Cambridgeshire

Type of case: Misconduct

Panel members: Serene Rollins (Chair, Lay member)
Corinne Foy (Registrant member)
Ray Salmon (Lay member)

Legal Assessor: Nigel Ingram

Hearings Coordinator: Bethany Seed

Nursing and Midwifery Council: Represented by Vida Simpeh, Case Presenter

Miss Colton: Not present and written representations provided by Karl Shadenbury, instructed by UNISON

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

Fitness to practise: Impaired

Outcome: **Conditions of practice order (12 months) to come into effect on 30 April 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 Miss Colton was not in attendance and that the Notice of Hearing had been sent to Miss Colton's registered email address by secure email on 30 January 2026.

Ms Simpeh, 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 Miss Colton's right to attend, be represented and call evidence, as well as the panel's power to proceed in her absence.

In light of all of the information available, the panel was satisfied that Miss Colton 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 Miss Colton

The panel next considered whether it should proceed in the absence of Miss Colton. The panel had regard to Rule 21 and heard the submissions of Ms Simpeh who invited the panel to continue in the absence of Miss Colton. She submitted that Miss Colton had voluntarily absented herself. She submitted that Miss Colton has provided written representations, which do not include a request for an adjournment. She submitted that this is a mandatory review of a substantive order, and there is a strong public interest in the expeditious review of this case. She submitted that there is limited unfairness to Miss Colton by proceeding today as she has had the opportunity to attend but has chosen not to do so and has provided representations instead. She submitted that it is fair and proportionate to proceed with the hearing today.

The panel accepted the advice of the legal assessor.

The panel decided to proceed in the absence of Miss Colton. In reaching this decision, the panel considered the submissions of Ms Simpeh, the representations provided on Miss Colton's behalf, and the advice of the legal assessor. It had 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 Miss Colton;
- Miss Colton, through her representative at UNISON, has informed the NMC that she has received the Notice of Hearing and confirmed that she will not be attending today;
- Miss Colton is legally represented, and therefore her decision to not attend the hearing today is an informed decision;
- Miss Colton has provided written representations for the panel to consider today;
- 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.

The panel noted that there is some disadvantage in proceeding in the absence of Miss Colton, notably that she will not be able to respond to the NMC's submissions. However, the panel was of the view that it is in the public interest to continue today as Miss Colton has chosen not to attend. In these circumstances, the panel decided that it is fair, appropriate and proportionate to proceed in the absence of Miss Colton.

Decision and reasons on application for hearing to be held in private

Ms Simpeh made a request that this case be held partly in private on the basis that proper exploration of Miss Colton's case involves some reference to her health. The application was made pursuant to Rule 19 of 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, third party or by the public interest.

The panel determined to go into private session in connection with Miss Colton's health as and when such issues are raised in order to protect her right to privacy.

Decision and reasons on review of the substantive order

The panel decided to confirm the current conditions of practice order for a further 12 months.

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

This is the first review of a substantive conditions of practice order originally imposed for a period of 12 months by a Fitness to Practise Committee panel on 31 March 2025.

The current order is due to expire at the end of 30 April 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) On 28 January 2021 failed to correctly sign medication charts for one or more of the 12 patients shown in schedule 1 below*
- 2) On 28 January 2021,*

- a) *Did not administer Bactroban nasal spray and/or Paracetamol to Patient F*
- b) *Signed Patient F's MAR chart to say that you had administered Bactroban nasal spray and/or Paracetamol to Patient F at 22:00hrs,*
- 3) ...
- 4) *On 30 January 2021 prepared the incorrect dosage of Risperidone for Patient B*
- 5) ...
- 6) *On 5 April 2021 dispensed medication into pots which were on the floor*
- 7) ...

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

Schedule 1

- Patient A*
- Patient B*
- Patient C*
- Patient D*
- Patient E*
- Patient F*
- Patient G*
- Patient H*
- Patient I*
- Patient J*
- Patient K*
- Patient L*
- Patient M*
- Patient N*
- Patient O'*

The original panel determined the following with regard to impairment:

'The panel found limbs a), b) and c) engaged in respect of your past conduct. The panel found that, you placed patients at unwarranted risk of harm in relation to infection prevention and control, not correctly signing MAR charts, and signing MAR charts that you had administered medication when you had not. Your actions breached the fundamental tenets of the nursing profession and brought the reputation of the profession into disrepute.

The panel was satisfied that in respect of the future, limbs a), b) and c) remain engaged.

The panel took the view that misconduct of this sort is capable of remediation. The panel next considered whether your misconduct in this case has been remediated. It took into account the circumstances surrounding the misconduct as well as your previous unblemished record. However, the panel concluded that the misconduct has not been remediated.

In reaching this decision, the panel determined that you showed some insight into the misconduct found proved. However, your reflection is not fully developed to include the impact upon patients, and the wider nursing profession.

The panel took into account your undated reflective statement and the following training certificates:

- *Medication Training for Care issued on 6 November 2022.*
- *Certificate on administering medication awarded on 20 October 2024.*
- *A completion of a one-hour online training course for documentation and record keeping dated 22 March 2025.*

In considering the most recent training certificate entitled 'Documentation and Record keeping' dated 22 March 2025, the panel noted that there were ten learning outcomes of which the panel determined only one to be relevant to the misconduct

found proved. The panel bore in mind that you have not practised as a nurse for nearly four years and have not been able to demonstrate how you have implemented any recent learning into your nursing practice. The panel found that the training courses appear to be limited. There is no training or reflection on the infection prevention and control.

The panel took into account your reference dated 24 October 2024. The panel found this reference of limited value. The author of the reference comments that your 'paths would occasionally cross' and that you did not work together 'per se'. The reference does not detail how you have strengthened your practice following the allegations of your misconduct. The panel determined that given the limited insight and lack of evidence of strengthening of practice, that there remains a high risk of repetition. As such, whilst the panel had no reason to think you could not practise kindly, they were not satisfied that you could practice 'safely and professionally' at present. 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.

The panel determined that a finding of impairment on public interest grounds is also required. In considering the nature of your failings, which included fundamental nursing practice relating to infection prevention and control, medication administration and documentation and record keeping, there was a need to uphold proper standards of behaviour and maintain public confidence in the profession. The panel concluded that members of the public would be concerned if such a finding were not made. Specifically, the panel felt that misconduct of this nature, which has not been remediated, could lead to patients not seeking medical treatment or members of the public being concerned about the care and well-being of vulnerable and or elderly relatives.

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:

'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 is 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 determined that it would be possible to formulate appropriate and practical conditions which would address the failings highlighted in this case. The panel accepted that you would be willing to comply with conditions of practice.

The panel had regard to the fact that these incidents were relatively isolated episodes of misconduct. The panel noted that you previously had an unblemished career for a significant number of years. The panel was of the view that it was in the public interest that, with appropriate safeguards, you should be able to return to practise as a nurse.

Balancing all of these factors, the panel determined that that the appropriate and proportionate sanction is that of a conditions of practice order.

The panel was of the view that to impose a suspension order or a striking-off order would be wholly disproportionate and would not be a reasonable response in the circumstances of your case. A conditions of practice would sufficiently address the public protection concerns and the wider public interest consideration.

Having regard to its findings, the panel has concluded that a conditions of practice order will mark the importance of maintaining public confidence in the profession and will send to the public and the profession a clear message about the standards of practice required of a registered nurse. In addition, the panel considered such an order would support you in returning to safe practise.

When formulating conditions, the panel noted that record keeping is a fundamental part of the administration of medications.

The panel determined that the following conditions 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. You must only work for a single substantive employer which must not be via a nursing agency or nursing bank.*
- 2. When involved in the administration of medicines, you must be directly observed by another registered nurse at all times until you are assessed as competent to do so independently by your employer. Evidence of the successful completion of this assessment must be sent to the NMC within 7 days of completion.*
- 3. You must ensure that you are supervised by another registered nurse any time you are working. Your supervision must consist of working at all times on the same shift but not always directly observed by another registered nurse.*
- 4. You must have monthly meetings with your line manager, mentor or supervisor to discuss your practice specifically in relation to medication administration, and infection prevention and control.*
- 5. You must send your case officer a report from your line manager, mentor or supervisor addressing your practice in relation to medication administration and infection prevention and control prior to any NMC hearing.*
- 6. You must keep the NMC 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.**

7. *You must keep the NMC 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.*

8. *You must immediately give a copy of these conditions to:*
 - a) *Any organisation or person you work for.*
 - b) *Any employers you apply to for work (at the time of application).*
 - c) *Any establishment you apply to (at the time of application), or with which you are already enrolled, for a course of study.*

9. *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.*

10. *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 with review.'

Submissions on current impairment and sanction

The panel has considered carefully whether Miss Colton'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 representations provided on Miss Colton's behalf. It has taken account of the submissions made by Ms Simpeh on behalf of the NMC. She submitted that the current conditions of practice order should be extended for another 12 months.

Ms Simpeh submitted that Miss Colton has not complied with the conditions of practice order or provided any evidence that she has remedied the concerns found proved by the original panel. Ms Simpeh submitted that Miss Colton [PRIVATE]. However, she further submitted that there is no new information before this panel that Miss Colton has attempted to comply with the conditions of practice order, that she has demonstrated sufficient insight or has taken any steps to strengthen her practice.

Ms Simpeh submitted that there has been no material change in the circumstances of this case. She submitted that there is no sufficient information before this panel that the risks identified by the original panel have been remedied. She submitted that Miss Colton has not demonstrated a period of safe practise for at least four years, and therefore the risk remains. She submitted that Miss Colton, in her written representations, appears to accept that her fitness to practise is currently impaired. She submitted that Miss Colton remains impaired at this time.

Ms Simpeh submitted that Miss Colton wishes to continue practising as a nurse and has taken steps to engage with this regulatory process. She submitted that Miss Colton has been unable to secure employment and [PRIVATE] which have prevented her from complying with the current conditions of practice order. She submitted that this order

remains fair, appropriate and proportionate to address the risks identified in Miss Colton's practice. She submitted that continuing the order for a further 12 months will allow Miss Colton time to provide evidence of compliance with the current conditions, provide an updated reflective piece and demonstrate any relevant further training she has done since the substantive order was imposed.

The panel also had regard to Miss Colton's written representations from her representative. Mr Shadenbury, on Miss Colton's behalf, submitted that she has not yet been able to secure employment as a Registered Nurse, and therefore she has been unable to comply with the current conditions of practice order. Mr Shadenbury submitted that Miss Colton remains committed to returning to safe practice, but at this time, is unable to provide the panel with evidence that she has remedied the concerns found proved by the previous panel.

In relation to sanction, Mr Shadenbury stated that the panel should extend the existing order. He submitted that the current conditions of practice order continues to adequately address the concerns that the previous panel identified in respect of record keeping and infection control. He submitted that an extension of the order will allow Miss Colton to gain employment, remediate the concerns and provide evidence of period of safe practice. He submitted that a further 12 months would be adequate time to uphold the proper professional standards for members of the profession and to give Miss Colton an opportunity to demonstrate she can return to safe practise within a reasonable time period.

Mr Shadenbury submitted that a suspension order would not be appropriate or proportionate as the previous panel determined that Miss Colton's conduct was capable of being addressed, she has demonstrated some insight into her conduct and there is no evidence of any deep-seated attitudinal problems.

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

Decision and reasons on current impairment

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 Miss Colton's fitness to practise remains impaired.

The panel noted that the original panel found that Miss Colton had developing insight. At this hearing, the panel noted that it had no evidence of further insight or reflection. In its consideration of whether Miss Colton has taken steps to strengthen her practice, the panel took into account that Miss Colton has not provided any evidence of further training, testimonials or compliance with her current conditions of practice order. In the absence of any new evidence since the last hearing in respect of Miss Colton's insight or strengthened practice, the panel considered that the risks identified by the previous panel remain a concern.

The original panel determined that Miss Colton was liable to repeat matters of the kind found proved. Today's panel has received no new evidence to suggest that the risk of repetition has been remediated. In light of this, this panel determined that Miss Colton remains liable to repeat matters of the kind found proved. The panel accepted that Miss Colton remains committed to returning to safe and effective practice, that prior to these incidents she had an unblemished record and that she has engaged with the NMC regulatory process. However, the panel was of the view that Miss Colton has not worked as a Registered Nurse for five years and [PRIVATE]. The panel considered that little weight can be attributed to the [PRIVATE] due to its lack of detail in discerning why Miss Colton has been unable to demonstrate further insight or strengthened practice.

The panel therefore decided that a finding of continuing impairment is necessary on the ground 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 considered that as the risks identified by the previous panel have yet to be addressed, a finding of impairment remains necessary to uphold public confidence in the profession and to uphold proper

professional standards. The panel determined that, in this case, a finding of continuing impairment on the public interest ground is also required.

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

Decision and reasons on sanction

Having found Miss Colton'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 Miss Colton's practice would not be appropriate in the circumstances. The panel also noted that Miss Colton has not demonstrated a period of safe practice, or evidence that the clinical risks have been addressed, and therefore a caution order would be inappropriate at this time. 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 Miss Colton'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 imposing a further conditions of practice order on Miss Colton's registration would still be a sufficient and appropriate response. The panel is mindful that any conditions imposed must be proportionate, measurable and workable.

The panel determined that it would be possible to formulate appropriate and practical conditions which would address the failings highlighted in this case. The panel accepted that Miss Colton has been unable to comply with conditions of practice due to their current employment status but is engaging with the NMC and is willing to comply with any conditions imposed.

The panel was of the view that a further 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 and that misconduct found proved was capable of being addressed with conditions of practice. In this case, there are conditions that could be formulated which would protect patients during the period they are in force. The panel was of the view that Miss Colton continues to engage with the NMC process, and therefore the current conditions remain appropriate to address the risks identified by the previous panel.

The panel was of the view that to impose a suspension order or a striking-off order would be wholly disproportionate and would not be a reasonable response in the circumstances of Miss Colton's case because she has provided some evidence of [PRIVATE] which has impacted her ability to demonstrate insight and remediation. The panel bore in mind that that the option to impose a suspension order or a striking-off order would remain as an option for a future reviewing panel if Miss Colton does not demonstrate further insight, remediation, or explain how [PRIVATE] impact on her ability to mitigate the ongoing risks.

Accordingly, the panel determined, pursuant to Article 30(1)(c) to make a 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 30 April 2026. It decided to continue 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. You must only work for a single substantive employer which must not be via a nursing agency or nursing bank.
2. When involved in the administration of medicines, you must be directly observed by another registered nurse at all times until you are assessed as competent to do so independently by your employer. Evidence of the successful completion of this assessment must be sent to the NMC within 7 days of completion.
3. You must ensure that you are supervised by another registered nurse any time you are working. Your supervision must consist of working at all times on the same shift but not always directly observed by another registered nurse.
4. You must have monthly meetings with your line manager, mentor or supervisor to discuss your practice specifically in relation to medication administration, and infection prevention and control.
5. You must send your case officer a report from your line manager, mentor or supervisor addressing your practice in relation to medication administration and infection prevention and control prior to any NMC hearing.
6. You must keep the NMC 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.
7. You must keep the NMC 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.

8. You must immediately give a copy of these conditions to:
 - a) Any organisation or person you work for.
 - b) Any employers you apply to for work (at the time of application).
 - c) Any establishment you apply to (at the time of application), or with which you are already enrolled, for a course of study.

9. 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.

10. 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 the end of 30 April 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 Miss Colton 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.

Any future panel reviewing this case would be assisted by:

- Evidence of Miss Colton's developed insight and reflection;
- Evidence of training certificates, testimonials and steps taken to strengthen her practice;
- If Miss Colton is unable to comply with the current conditions of practice order before the next review, details as to the reason why, (including [PRIVATE]), and how it has impacted on her ability to demonstrate further insight, reflection and strengthened practice;
- Evidence of compliance with the current conditions of practice order.

This will be confirmed to Miss Colton in writing.

That concludes this determination.