

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

Substantive Hearing

Tuesday, 4 August 2025 – Friday, 7 August 2025

Monday, 11 August 2025

Monday, 16 March 2026 – Friday, 20 March 2026

Monday, 23 March 2026

Virtual Hearing

Name of Registrant: Jean McLeod

NMC PIN: 07I0120S

Part(s) of the register: Registered Nurse – Adult
RNA – 6 September 2010

Relevant Location: Fort William / An Gearasdan

Type of case: Misconduct

Panel members: Mary Idowu (Chair, Lay member)
Patricia Ford (Registrant member)
Raj Chauhan (Lay member)

Legal Assessor: Graeme Henderson

Hearings Coordinator: Aisha Charway (4 – 11 August 2025)
Bethany Seed (16 – 23 March 2026)

Nursing and Midwifery Council: Represented by Nawazish Choudhury, Case
Presenter

Ms McLeod: Present and represented by Jennifer McPhee,
(Anderson Strathern) (4 – 11 August 2025)
Not present and unrepresented (16 – 23 March
2026)

Facts proved by admission: Charges 1b, 3 and 4

Facts proved:

Charges 1a and 2

Fitness to practise:

Impaired

Sanction:

Striking-off order

Interim order:

Interim suspension order (18 months)

Details of charge (as amended)

That you, a registered nurse:

1. On 7 September 2022:
 - a. Stole colleague A's bank card. **[PROVED]**
 - b. Used colleague A's bank card to obtain goods. **[PROVED BY ADMISSION]**
2. Your action at Charge 1(b) was dishonest because you knew you had used Colleague A's bank card to obtain goods. **[PROVED]**
3. Having realised you used Colleague's A bank card, you failed to inform Colleague A and/or your employer that you had used Colleague A's bank card to obtain goods. **[PROVED BY ADMISSION]**
4. Your failure to inform Colleague A and/or your employer was dishonest in that you knew you had used Colleague A's bank card to obtain goods. **[PROVED BY ADMISSION]**

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

Background

On 29 September 2022, the Nursing and Midwifery Council ('NMC') received a referral from Belford Hospital ('the Hospital'). It is alleged that on 7 September 2022 you stole Colleague A's bank card whilst you were working.

It is alleged that you used the bank card at a high-street store to purchase a bottle of perfume. It is alleged that the bank card was used in conjunction with your NHS staff discount card and Blue Light card, which was shown on the receipt obtained by Colleague A from the store. It is alleged that you later placed the bank card back into Colleague A's pocket. The police investigated this matter and sent a report to the Procurator Fiscal's office; however, no criminal proceedings were brought against you.

A disciplinary hearing was held at the Hospital, and you admitted that you used Colleague A's bank card to purchase perfume on 7 September 2022. You stated that you found the card on the changing room floor. As a result of that hearing you were issued a final written warning by your employer NHS Highland, which was issued on 4 April 2023.

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

During your evidence, Mr Choudhury, on behalf of the NMC, asked a question as a result of which you provided details relating to your health.

The panel determined that parts of the case be held in private on the basis that proper exploration of your case involves some reference to your health. The application was made pursuant to Rule 19 of the 'Nursing and Midwifery Council (Fitness to Practise) Rules 2004', as amended (the Rules).

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.

The panel determined to hold parts of your evidence in private as and when such issues relating to your health are raised in order to protect your right to privacy.

Decision and reasons on application to amend the charges

The panel heard an application from Mr Choudhury to amend the charges under Rule 28(1) of the Rules.

The proposed amendment as follows was to add the following new charges:

‘That you a registered nurse:

- 2. Your action at Charge 1(b) was dishonest because you knew you had used Colleague A’s bank card to obtain goods.**
- 3. Having realised you used Colleague’s A bank card, you failed to inform Colleague A and/or your employer that you had used Colleague A’s bank card to obtain goods.**
- 4. Your failure to inform Colleague A and/or your employer was dishonest in that you knew you had used Colleague A’s bank card to obtain goods.’**

Mr Choudhury referred the panel to Rule 28(1) of the Rules which allows charges to be amended having regard to the merits of the case and the fairness of the proceedings. He referred the panel to case of *PSA v NMC and Jozi* [2015] EWHC 764 (Admin) to highlight the fact that the panel is expected to play a proactive role and permit amendments to charges to reflect the conduct that has occurred and avoid undercharging.

Mr Choudhury submitted that the proposed amendment was brought in light of new information that had only been made available recently. He referred to your documentary evidence and stated that you accepted full responsibility of the incident that occurred, and that you fell below the professional standard of a registered nurse. He then directed the panel to your reflective piece where you stated, *‘I accept that I then failed that to respond appropriately to what I had done.’* You had also stated that your conduct *‘fell well below the standard of honesty and integrity required of me and this amounts to dishonesty and*

fraud'. Mr Choudhury then referred to your oral evidence given under oath and submitted that it was necessary for the new charges to be added, and that you accepted that you used your colleague's card. He further indicated that after you noticed that you used the card, that your subsequent conduct was dishonest. Mr Choudhury stated that amendments could not be foreseen by NMC and that, due to new evidence heard these charges are necessary. He invited the panel to consider these new charges.

Mr Choudhury stated that despite denying charge 1a, by your own admission, you should have taken steps to inform the owner of the card and/or your manager. The amendment takes account of this and does not fundamentally alter the mischief of the charge.

Mr Choudhury invited the panel to consider dishonesty in three stages. He submitted that charge 1a should be considered as the theft. He submitted that charge 1b is the use of the card and having used the card knowingly, your conduct was dishonest. He submitted that your choice not to inform anyone about what you had done was also dishonest. Mr Choudhury recognised that it is important for the charges to reflect the evidence given by you, he concluded that it would be unfair to the NMC and undermine the public confidence and trust for these charges to not be considered.

Ms McPhee, on your behalf, submitted that the amendments to the charges were not amendments, but that they were additional charges. She informed the panel that the current charges were put in place by the NMC and that following the interim order the charges were finalised. Ms McPhee invited the panel to refuse the introduction of the additional charges. She then referred the panel to the registrant's bundle and informed the panel that, excluding the first three pages, the NMC had sight of this evidence for over a year. Ms McPhee submitted that the retrospective charging should not occur, just because the regulator has felt that they did not capture the initial charges. Ms McPhee further submitted that this is an injustice and that you should be given adequate notice. Ms McPhee stated that, apart from the first three pages referred to above, all of the evidence provided by witnesses and all documentary evidence before the panel is not new evidence, and therefore the NMC have had ample time to formulate the charges.

Ms McPhee stated that this is not in line with Rule 28 and against Article 6 of the European Convention on Human Rights (ECHR). She further submitted that the proposed amendments of additional charges adds a second tier of dishonesty and extends the scope of the charges which is prejudicial to you. Ms McPhee submitted that it should not be a retrospective amendment to capture the evidence that has now been heard. Ms McPhee stated that it is against the public interest. Ms McPhee submitted that in your oral evidence you were open, honest and candid in answering the allegations. She informed the panel that fair notice has been given by you in an attempt to demonstrate integrity, insight and strengthening of practice and referred the panel to the legal framework set out in Rule 28.

'At any stage before making its findings of fact, in accordance with rule 24(5) or (11), [...] the Fitness to Practise Committee, may amend –
(a) the charge set out in the notice of hearing; or
(b) the facts set out in the charge, on which the allegation is based,
unless, having regard to the merits of the case and the fairness of the proceedings, the required amendment cannot be made without injustice.'

Ms McPhee further submitted that what is proposed is not an amendment to the existing charges, but new charges. She stated that this is not the same as the current misconduct charge and, if an amendment was allowed, you should have the opportunity to answer. Ms McPhee informed the panel that you deny charge 2 and suggested that your failure to act was not dishonest, and it was not your intention to steal. Ms McPhee informed the panel that your position was openly declared in the written evidence provided and the NMC was aware of this since 2022, Ms McPhee stated that this is prejudicial. Ms McPhee has submitted that it is not open to the NMC to penalise you by introducing new charges at this late stage and referred the panel to the case of *R (Dutta) v General Medical Council* [2020] EWHC 1974 (Admin). She highlighted the emphasis on finding of fact to be grounded in evidence and not speculation. She then referred the panel to the case of *Jozi*

and highlighted undercharging at the outset and that the NMC is trying to rectify this mid hearing.

Ms McPhee, under Rule 28, invited the panel to refuse the amendment and that this case should deal with the charges as they were originally presented.

The panel accepted the advice of the legal assessor

The panel considered that there was merit in the submission made by Ms McPhee, that the application for the amendment came late in the day and that, based on the information available, the NMC could have drafted the charges to reflect upon the full spectrum of the evidence and all possible outcomes.

The panel was concerned that the charges were not drafted in a way to reflect on your version of events. Were the panel to accept your position, it is likely that Charge 1a would be found not proved. Although you have admitted charge 1b, it is unlikely that the erroneous use of a credit card would be classified as misconduct.

This would result in a situation where, despite you accepting in live evidence that your actions following the purchase of perfume was wrong and contrary to professional standards and conduct expected of a nurse, the case would end. The panel considered that such an outcome would be contrary to the public interest.

The panel was satisfied that the amended charges were not unjust to you. The panel was of the view that the actual wording of the charges, and in charge 2, the word dishonest is implied, the panel did not consider that it was unfair or unduly prejudicial to you for these amendments to be accepted.

The panel considered that public confidence and trust in the NMC as a regulator had to be maintained. By not considering the additional charges, it would be construed as undercharging you.

The panel acknowledged the impact of this decision upon you and agreed that you would undoubtedly require further time to seek legal advice and, if appropriate provide further evidence.

The panel was of the view that such an amendment, as applied for, was in the interest of justice. The panel was satisfied that there would be no prejudice to you and no injustice would be caused to either party by the proposed amendment being allowed. It was therefore appropriate to allow the amendment, as applied for, to better reflect the evidence in this case.

Decision and reasons on application to adjourn

Following the panel granting the application to amend the charges, the panel received an application to adjourn the hearing from Ms McPhee.

Ms McPhee submitted to the panel that the amendment involved the introduction of entirely new charges, which went beyond what was originally proposed on the charge sheet. These charges widened the scope of the alleged wrongdoing and attached new duties that were not put to you before.

Ms McPhee informed the panel that you had already given the panel evidence on a narrower case and that you had no notice of the charges and no time to prepare a defence. Ms McPhee suggested to the panel that by not having the opportunity to prepare a defence or gather evidence for the next stage to specifically address the panel, to continue the hearing would be procedurally unfair and prejudicial to you.

Ms McPhee told the panel that fairness of the case requires giving proper notice and a chance to answer the case. She referred the panel to Article 6 (European Convention of Human rights) and Rule 28. She submitted that that these charges are substantially

different from the original charge and that you should have the same time to prepare as you did when the initial charges were put forward to you.

Ms McPhee informed the panel that there is no prejudice to the NMC in granting an adjournment as all of the NMC witnesses have been called would not be inconvenienced by rescheduling, the public is not at risk, and the case can still be heard in full. She submitted that there would be serious prejudice to you if the hearing was to continue, both in fairness and in the perception of justice. Ms McPhee suggested to the panel that the public interest is best served by a process that is fair to both sides. She further suggested that this is not about delaying the case, but about ensuring that the panel reaches a decision on the case that has been properly prepared and properly answered to. Ms McPhee's final submission to the panel was that the adjournment was necessary to allow formal notice to be served, and to ensure that the new allegations can be met in full and fairness is preserved.

In response to Ms McPhee's submission, Mr Choudhury submitted that the NMC objected to the request for an adjournment and invited the panel to refuse the application. Mr Choudhury submitted that this application should be objected as it lacks merit.

Mr Choudhury submitted that the NMC wished for this case to progress to the next stage. He invited the panel to refuse the application and require that submissions to be made on the facts. Although this case was likely to go part heard, it would be better use of time if submissions were made and concluded.

Mr Choudhury objected to an adjournment on the basis that the panel has heard detailed evidence from the NMC witnesses and from you. Mr Choudhury referred to your oral evidence, where you had acknowledged your conduct falling below the standard of a nurse in your actions in that it was dishonest. Mr Choudhury informed the panel that dishonesty is a matter for the panel to consider in these proceedings.

Mr Choudhury informed the panel that it is not for the NMC witnesses to comment on dishonesty, and your state of mind during your conduct. He submitted to the panel that it would be unnecessary for the witnesses to be called back. Mr Choudhury referred the panel to charges 1a and 1b, and that its basis is dishonesty and charge 2 relates to the conducts of 1b. Mr Choudhury put forward to the panel that in respect of charges 3 and 4 that there could be further evidence that you could give in respect of those charges. Mr Choudhury referred the panel to your oral evidence in chief and the panel questions, he referred to the mention of your state of mind at the time of your actions, and that you mentioned that you were [PRIVATE], he also referred to the fact you mentioned that your intention was to speak to your manager when you went back to work.

Mr Choudhury submitted that you would have no need to comment further on your state of mind as to your honesty. He acknowledged that in your evidence you stated that this was a mistake at the beginning, but once you realised you had the wrong card you were in a state of panic. Mr Choudhury referred to Ms McPhee's submission and specifically to further evidence that may need to be obtained in relation to the next stage of the hearing.

Mr Choudhury considered that there was no need for an adjournment during the fact stage of the hearing and he invited the panel, to take into account proportionality of this case. He acknowledged that the importance of the case to you as it relates to your professional practice. Mr Choudhury invited the panel to take into account the principle of proportionality including the potential prejudice to the NMC in relation to time and cost. He noted that there was limited time left and that the hearing would go part heard so there is no need for the adjournment or the recall of witnesses as there would be no benefit in doing so. Mr Choudhury concluded that it was open to you to reflect and provide further evidence in relation to charges 2, 3 and 4 however, he noted to the panel that you have not done so far, and the panel should proceed on the basis that no additional evidence would be provided.

The panel heard and accepted the advice of the legal assessor who referred to Rules 22 and 32 of the Rules.

The panel considered the matter carefully and decided to refuse your application to adjourn at this stage. The panel was concerned that the submissions, made on your behalf, partly contained a rehearsing of the submissions made on the issue of amendment. Beyond reference to Rule 28 and Article 6 (ECHR) the submission was that you needed time to adjust. The panel considered that the factual allegations were not new to you and you had already given evidence on these events. The amended charges were within the scope of the original regulatory concerns, as dishonesty was implied in the charge you were facing.

The panel considered that as you have legal representation, it would be reasonable to expect you to comment on the next stage of the process. It is envisaged that the new charges will be read and that you can admit or deny them. It is also envisaged that you will be able to discuss what further evidence will be required on your behalf.

The panel considered that the proportionate response to your application was to refuse it with the proviso that it would not commence closing submissions for the factual stage on the remaining available day.

The panel gave consideration as to whether or not it should exercise its powers in terms of Rule 22(4) of the Rules. The panel considered whether or not this would be a reason to adjourn.

The panel noted that in your live evidence you stated that you also held a [PRIVATE]. This issue was only raised in your live evidence and did not appear in your provided documentation. The panel considered that it was a matter for you and your legal team to discuss.

Admission of facts

Following the handing down of the panel's determination on the application to adjourn, you were afforded time to consider the determination and take legal advice.

When the panel reconvened, the charges which were introduced in the amendment, were read out. Ms McPhee informed the panel that you admitted charges 3 and 4 and denied charge 2.

Accordingly, the Chair announced that charges 3 and 4 were proved by way of your admissions.

Decisions and reasons on the application for an interim order

Due to the lack of time to conclude this case, the panel invited the parties to make submissions on whether an interim order should be made. The panel was aware that Rule 32(5) of the Rules made it mandatory to consider this issue.

Mr Choudhury informed the panel that the NMC's position was that consideration of an interim order is entirely a matter for the panel. He made no further submissions on this issue.

Ms McPhee invited the panel not to impose an interim order. She submitted that an interim order may only be made if it was necessary for the protection of the public, in the public interest or in your own interest. The panel had to ensure that any order was necessary, proportionate and the least restrictive option available.

Ms McPhee explained that public interest grounds alone required exceptional circumstances and for public protection grounds there had to be a risk of serious immediate harm to the public. It was not enough to impose an order on the latter ground if it was felt to be merely desirable.

Ms McPhee submitted that the charges against you do not engage patient safety and does not engage the public interest. She further submitted that there is no clinical risk, the allegations against you are not of clinical nature and you have continued to work in the same organisation and are practising safely, in the same role for the last three years. She reminded the panel that there have been no concerns raised about you. You had a final written warning which is now historic. This warning in relation to these allegations has now expired, and there have been no misconduct reports on your employment records.

Ms McPhee then informed that panel of the hardship you may face should a suspension order be imposed. You are the sole provider for your household and rely wholly on your nursing income. She suggested to the panel that if an order was necessary, an interim conditions of practice order could be considered. She explained that would provide adequate scrutiny of your practise.

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

The panel noted that the issue of whether or not to impose an interim order was first considered by an Investigative Committee on 31 October 2022. This Committee noted that the regulatory concerns were that, on 7 September 2022 you took a colleague's bank card and used it to purchase goods. The Investigative Committee were made aware that you admitted that you had used the bank card and you provided a full reflective piece. That Committee considered that, in light of the information before it, the risk of repetition was low. Accordingly, there was no reason to impose an interim order.

This panel considered there was no material change in circumstances. Whilst the case has progressed to a substantive hearing it is yet to make findings in fact. This panel could only conduct a risk assessment based upon the fact that the most serious charges are still the subject of dispute.

The panel considered that the risk of repetition was low since there were no repeated incidents in the duration of the three years since the incident.

The panel noted the support you are receiving from your current employer. It took into account the fact that you are in long standing employment with NHS Highland Board. The panel understood that you have been with your current employer for over 20 years and it is unlikely that you would change your employer.

The panel considered the public interest and took into account the relatively high bar for imposing an interim order on public interest grounds alone. It determined that with the current support you are receiving, a member of the public would not be concerned to find that you are continuing to work unrestricted as you have worked unrestricted for the same health board with no repetition or concerns about you. The panel was aware that the current charges against you would be prevalent on your registration PIN should you decide to work with another employer.

For these reasons the panel has decided not to put an interim order in place as such an order was not necessary for the protection of the public, otherwise in the public interest or in your own interest.

The hearing resumed on Monday 16 March 2026.

Decision and reasons on service of Notice of Hearing

The panel was informed at the start of this hearing that Ms McLeod was not in attendance and that the Notice of Hearing letter had been sent to Ms McLeod's registered email address by secure email on 26 January 2026.

Further, the panel noted that the Notice of Hearing was also sent to Ms McLeod's representative, Ms McPhee, on 26 January 2026.

Mr Choudhury submitted that the NMC had complied with the requirements of Rule 32 of the 'Nursing and Midwifery Council (Fitness to Practise) Rules 2004', as amended (the

Rules). He submitted that the NMC has received correspondence from Ms McPhee, confirming that neither herself nor Ms McLeod will be attending the resuming hearing dates.

The panel accepted the advice of the legal assessor, who confirmed that as this is a resuming hearing, Rule 32 applied and the notice of hearing should have been sent as soon as is practicable, but in any event, it was sent in a reasonable time.

The panel took into account that the Notice of Hearing provided details of the allegation, the time, dates, and that the hearing was to be held virtually, including instructions on how to join and, amongst other things, information about Ms McLeod's right to attend, be represented and call evidence, as well as the panel's power to proceed in her absence. The panel was satisfied that the scheme of Rule 32 had been complied with and that Ms McLeod and her representatives had ample time to prepare for the resumed hearing. It had been confirmed at the previous hearing that the proposed dates were at a time when her representative was available.

In the light of all of the information available, the panel was satisfied that Ms McLeod has been served with the Notice of Hearing in accordance with the requirements of Rule 32.

Decision and reasons on proceeding in the absence of Ms McLeod

The panel next considered whether it should proceed in the absence of Ms McLeod. It had regard to Rule 21 and heard the submissions of Mr Choudhury who invited the panel to continue in the absence of Ms McLeod. He submitted that Ms McLeod had voluntarily absented herself.

Mr Choudhury referred the panel to the documentation from Ms McPhee which included email correspondence between Ms McPhee and the NMC, confirming that neither herself, nor Ms McLeod will be attending the resuming hearing. He submitted that Ms McLeod has indicated that she no longer wishes to engage with the NMC proceedings and that she is

applying for voluntary removal from the NMC register. He submitted that Ms McLeod has made no application for adjournment, and there is no reason to suggest that an adjournment would secure her attendance at a later date. He submitted that there is a public interest in the expeditious disposal of this case, and it would be inconvenient to reschedule this hearing.

Mr Choudhury submitted that there would be limited disadvantage to Ms McLeod if the panel was to proceed today. He submitted that Ms McPhee, who attended the previous dates of the hearing, had cross-examined the NMC witnesses and tested the evidence against Ms McLeod.

The panel accepted the advice of the legal assessor.

The panel noted that its discretionary power to proceed in the absence of a registrant under the provisions of Rule 21 is not absolute and is one that should be exercised '*with the utmost care and caution*' as referred to in the case of *R v Jones (Anthony William)* (No.2) [2002] UKHL 5.

The panel decided to proceed in the absence of Ms McLeod. In reaching this decision, the panel has considered the submissions of Mr Choudhury, the email correspondence from Ms McPhee, and the advice of the legal assessor. It had particular regard to the factors set out in the decision of *R v Jones* and *General Medical Council v Adeogba* [2016] EWCA Civ 162 and had regard to the overall interests of justice and fairness to all parties. It noted that:

- No application for an adjournment has been made by Ms McLeod.
- Ms McLeod, through her representative, has informed the NMC that she has received the Notice of Hearing and confirmed she will not be attending the resuming hearing dates;
- There is no reason to suppose that adjourning would secure her attendance at some future date;

- There is a strong public interest in the expeditious disposal of the case.
- It is also in the interests of Ms McLeod that these proceedings should be concluded within the time allocated for this hearing

There is some disadvantage to Ms McLeod in proceeding in her absence. However, the panel was of the view that any disadvantage is limited, given that all of the evidence has been heard in this case, and Ms McPhee had the opportunity to test the NMC evidence previously. Furthermore, the limited disadvantage is the consequence of Ms McLeod's decision to absent herself from the hearing, waive her right to attend, and/or be represented, and to not provide evidence or make submissions on her own behalf.

In these circumstances, the panel has decided that it is fair to proceed in the absence of Ms McLeod. The panel will draw no adverse inference from Ms McLeod's absence in its findings of fact.

Decision and reasons on facts

The panel noted that Ms McLeod made admissions to charges 1b, 3 and 4 during the course of this hearing. Accordingly, the panel finds charges 1b, 3 and 4 proved in their entirety, by way of Ms McLeod's admissions.

The panel also noted that in the interim period between the first sitting dates and the resuming dates, the NMC received an application for voluntary removal from the NMC register from Ms McLeod.

The panel was advised that the NMC would be making an application for it to consider an application for voluntary removal which had been made on behalf of Ms McLeod and make a recommendation for the Assistant Registrar to consider.

The panel was also advised that it would not be invited to consider the application for voluntary removal until such time as it was appropriate to do so. In these circumstances,

the panel determined that it must make a finding on the facts of this case before it could consider the NMC's submissions on Ms McLeod's application for voluntary removal.

The panel noted that in this application for voluntary removal, admissions to charges 1a and 2, were made on behalf of Ms McLeod. However, the panel noted that the application form itself bears to be one that only a registrant could sign. It noted that the application was sent by Ms McPhee on Ms McLeod's behalf. Accordingly, it could not be construed as an unequivocal admission signed by Ms McLeod.

The panel was of the view that this was an atypical case, in normal cases any admissions to the facts would typically be made in the case management form and involve a ticking of boxes confirming each charge.

A further problem arose out of the nature of charge 1a. It was not clear which version of events Ms McLeod was admitting, and this issue was not clarified in the application form.

The panel bore in mind that Ms McLeod and Ms McPhee were not present at this hearing and had regard to the overall principle of fairness in these proceedings. As such, the panel determined that these supposed admissions could not be considered unequivocal, and neither Ms McLeod nor Ms McPhee were present to clarify this for the panel. Therefore, the panel determined that it was in the interests of justice that it should make its own findings on the outstanding charges, namely charge 1a and 2.

The panel was aware that the burden of proof rests on the NMC, and that the standard of proof is the civil standard, namely the balance of probabilities. This means that a fact will be proved if a panel is satisfied that it is more likely than not that the incident occurred as alleged.

The panel read witness statements and evidence from the following witnesses called on behalf of the NMC:

- Witness 1/Colleague A: Registered Nurse who worked on the same ward as Ms McLeod at the time of the alleged incident and whose bank card was used to make the purchase.
- Witness 2: Hospital Manager at the Hospital at the time of the alleged incident.
- Witness 3: Associate Nurse Director at NHS Highland at the time of the alleged incident.

The panel also heard evidence from Ms McLeod under oath.

Before making any findings on the facts, the panel heard and accepted the advice of the legal assessor, which included reference to the case of *Ivey v Genting Casinos* [2017] UKSC 67 in relation to charge 2.

In respect of charge 1a this was an allegation of theft. In Scotland, the prosecutor does not require to prove theft by producing witness evidence of the actual theft. This is because there is a 'doctrine of recent possession'. This doctrine applies if someone is: found with property that does not belong to them; there is a short time between the accused being found with the goods after they have gone missing and that there are other criminative circumstances, as per the ruling in *Fox v Paterson* 1948 JC 104. It is not a requirement that the owner is permanently deprived of the property (*Milne v Tudhope* 1981 JC 53.)

If the panel makes a finding that the card was found on the floor of the changing room, then there is the prospect of findings of breach of a statutory offence of 'theft by finding'. In terms of Section 67 of the Civic Government (Scotland) Act 1982 there are duties imposed on the finder of lost property:

‘..any person taking possession of any property without the authority of the owner in circumstances which make it reasonable to infer that the property has been lost or abandoned (“a finder”) shall take reasonable care of it and shall without unreasonable delay deliver the property or report the fact that he has taken possession of it to a constable or to any of the persons mentioned in subsection (3) below, giving a description of the property and information as to where it was found.’

In these circumstances, the list of persons mentions in subsection (3) would have included the owner of the card and any hospital employee delegated with the task of taking care of lost property.

It considered the witness and documentary evidence provided by both the NMC and Ms McPhee on Ms McLeod’s behalf.

The panel then considered each of the disputed charges and made the following findings.

Charge 1a)

‘That you, a registered nurse:

1. On 7 September 2022:
 - a. Stole colleague A’s bank card.’

This charge is found proved.

In reaching this decision, the panel took into account the evidence of Colleague A, Witness 2 and Witness 3. The panel also had regard to Ms McLeod’s evidence. The panel noted that there is no witness available in this case that establishes how Ms McLeod came to be in possession of Colleague A’s bank card other than Ms McLeod herself. The panel

first balanced the evidence of the NMC witnesses against the evidence of Ms McLeod in determining the most plausible version of events.

The panel noted that the burden of proof rests on the NMC to establish that Ms McLeod stole Colleague A's bank card. The panel also noted that Colleague A, Witness 2 and Witness 3 could not provide direct, eye-witness evidence that Ms McLeod had physically taken Colleague A's bank card from her jacket pocket in her locker. However, the panel bore in mind that it could make inferences from the evidence presented by the NMC, and compare this with the evidence provided by Ms McLeod.

The panel had serious concerns regarding the credibility of Ms McLeod's evidence but that did not alter the burden of proof which rested with and remained with the NMC.

The panel considered Colleague A's evidence, that upon learning that an unfamiliar transaction had occurred on her bank card, she assumed that she had lost her bank card. Having examined her live evidence carefully she was unable to provide definitive evidence that she left the card in her jacket which had been left in her locker in the changing room. She stated that she only began to consider that something was suspicious when she later found her bank card in her jacket pocket at the end of her shift. Colleague A gave evidence that she went to Superdrug on 8 September 2022 to ask about the transaction and was provided with a receipt which showed that her bank card had been used with a 10% NHS discount and a Superdrug points card which belonged to Ms McLeod.

In light of the fact that the NMC had not produced satisfactory evidence that the card was in a jacket which was left in the locker the panel were not able to make a finding that the card had been removed from there.

The panel noted that although Colleague A was cross examined on the basis that the jacket was on a hanger outside the locker, Ms McLeod's position changed when she gave evidence. She spoke of returning the card to Colleague A's jacket which was inside the locker.

The panel was also concerned that, in her live evidence, Ms McLeod claimed that she also had a [PRIVATE] account.

The panel noted Ms McLeod's evidence that she picked up the bank card and thought it was hers as she had the same one. When asked why she did not check whose card it was, Ms McLeod stated:

"I didn't turn it round. I just seen it and I just picked it up and I thought, oh, someone's lost a card."

When asked why she had not shown her own [PRIVATE] card to the investigators of the incident, Ms McLeod stated:

"No one was never asked and never thought to even show them. [sic]"

The panel noted that at no point during the investigation into this incident, her disciplinary hearing with the Hospital, or during this NMC hearing, did Ms McLeod provide evidence that she had the exact same [PRIVATE] card as Colleague A. The card was described by Colleague A as being 'neon pink'. The panel had invited Ms McLeod to consider producing documentary evidence corroborating her assertion that she held an account with [PRIVATE]. In the absence of corroboration, together with this issue having never been raised earlier the panel formed an adverse view regarding Ms McLeod's credibility.

The panel also considered the evidence of Witness 2 who, in her statement to the police dated 9 September 2022, stated that:

"I was waiting for Jean at 0655 – she appeared at 0715. Asked if she had spoken to Police – "No, No, What had happened?" Asked her to come to my office for me to explain that an allegation had been made and what had happened. She said, "No, wasn't her but she did have a points card and a blue light card" I said Police are

investigating and I couldn't allow her to go to the Ward. [...] 0750ish – When I returned to the office, Jean stated “I found it on the floor, I've never done anything like this before...”

The panel noted that Witness 2 makes no reference to Ms McLeod indicating that this had occurred because she had the same bank card that she had mistaken Colleague A's card for.

The panel also considered that Ms McLeod gave evidence that she had wanted to tell her employer as soon as she returned to work after 7 September 2022 about the incident. However, the panel considered that during the interaction described by Witness 2, Ms McLeod initially continued to deny that she had used Colleague A's bank card.

The panel concluded that Ms McLeod's evidence was inconsistent and was therefore less reliable and credible than the sequence of events put forward by the NMC. The panel noted that Ms McLeod admitted that she picked up the bank card, realised that it was not her own bank card, and then proceeded to use it, albeit in error.

The panel went on to consider whether Ms McLeod's actions amounted to theft by finding of Colleague A's bank card. It had regard to Section 67 Civic Government (Scotland) Act 1982, which confers a duty on the finder of another person's possession(s) to:

'take reasonable care of it and shall without unreasonable delay, deliver the property or report the fact that he has taken possession of it to a constable or to any of the persons mentioned [...] giving a description of the property and information as to where to find it.'

The panel considered that having found Colleague A's bank card on the floor, Ms McLeod had a duty to take reasonable care of it. The panel also considered that upon becoming aware that the bank card was not hers, Ms McLeod had a duty to deliver the property back, or to report her possession of the bank card to its owner, or another responsible

person. There is no reasonable explanation for her not going to reception and handing in the card before she left the Hospital as she was due to be absent from work the following day. She had ceased to take reasonable care of the card once she left the Hospital.

The panel considered that putting the card back into Colleague A's jacket pocket did not constitute returning the card to Colleague A directly. The panel also considered that Ms McLeod could have reported the fact that the card was missing immediately or else handed it over to Colleague A, or to another relevant person at the Hospital. The panel also considered that Ms McLeod could have requested a refund in store or could have provided the cash funds to Colleague A after having used the card.

The panel accepted Ms McLeod's evidence that she became aware of being in possession of Colleague A's bank card on 7 September 2022. The panel considered that Ms McLeod did not work on 8 September 2022, and upon her return to work on 9 September 2022, initially denied any wrongdoing to Witness 2.

The panel was of the view that Ms McLeod breached her duty as the finder of Colleague A's bank card to take reasonable care of it, or to return the item or report her possession of the item within a reasonable time. The panel was of the view that Ms McLeod should have informed the relevant person that she had used the bank card when she "*put it back*" in Colleague A's pocket on 7 September 2022. It bore in mind Ms McLeod's evidence, in particular that when she was asked why she did not make an admission to Witness 2 at the first opportunity to do, she stated:

"I don't know, just not coping with it. There's no other excuse, you know, just didn't know how to handle, how to cope with it. I knew I had time off as well and. Just not facing up to it."

Although Ms McLeod was not prosecuted, let alone convicted, of any crime, the NMC sought to rely upon the fact that the Procurator Fiscal sent a letter to Ms McLeod dated 29 May 2023. In that letter the Fiscal informed Ms McLeod that although the prosecutor was

satisfied that they had sufficient evidence it was decided not to bring proceedings. However, she was warned that if there was a report of similar behaviour she might well be prosecuted.

The panel noted that information about this issue would only remain on the system for a period of two years. As this has expired it will not show on any 'advanced disclosure'.

The panel did not consider the existence of this letter to be of any assistance. It confirmed that there would be no prosecution. Since she was not required to pay a fine, the panel could not interpret the fact that Ms McLeod has not responded to the letter as a confession or acceptance of guilt.

For the avoidance of doubt, the panel paid no regard to the documents submitted on behalf of Ms McLeod in her application for agreed removal. There was documentation relating to further disciplinary issues at the Hospital, but these involved later events which were not relevant to the issues before this panel.

In light of the above, the panel was satisfied that Ms McLeod had stolen Colleague A's bank card by taking possession of the card without the authority of the owner and then failing to take reasonable care or to return it or report it within a reasonable time.

Therefore, the panel determined that charge 1a is proved.

Charge 2)

'That you, a registered nurse:

2. Your action at Charge 1(b) was dishonest because you knew you had used Colleague A's bank card to obtain goods.'

This charge is found proved.

In reaching this decision, the panel took into account the evidence of Ms McLeod and the test in /vey for dishonesty. The panel bore in mind that in order to find that Ms McLeod's conduct at charge 1b was dishonest, it would first need to determine what her state of mind was at the time, and then determine whether this was dishonest by the standards of an ordinary, decent person.

Although there was no CCTV footage in the changing room, there was CCTV footage in other parts of the Hospital and in Superdrug. Ms McLeod was seen to leave the Hospital at 09:00 and return at 09:10. The perfume was purchased at 09:06.

The panel noted that Ms McLeod had travelled by bicycle from her work to Superdrug which was in the opposite direction of her journey home. The purpose of this was to buy perfume. She told the panel that she did this because she had run out of perfume and needed to buy more. However, she would not be working the next day and there was no immediate rush to buy perfume.

Although Ms McLeod stated that she was in [PRIVATE] she still then managed to travel back to work to return the bank card back to Colleague A's jacket pocket. The panel did not accept that version of events as truthful. Based on the CCTV evidence of the Hospital and Superdrug the panel was able to draw an inference on the basis that, having found Colleague A's card, Ms McLeod's first reaction was not to return the card to its owner or hand it in to reception. Her first reaction was to cycle to Superdrug, purchase perfume and then return the card into the jacket pocket of the owner without telling anyone. The panel was of the view that it is more likely than not that she deliberately bought perfume using Colleague A's card.

At no point after making the purchase did Ms McLeod make any attempt to return the perfume, replace the cost of the perfume for Colleague A, or report that she had used the incorrect card to either Colleague A, the Superdrug store, or anyone at NHS Highland.

The panel considered that even on Ms McLeod's version of events, once she became aware that she had used the wrong bank card, Ms McLeod made the choice not to correct the mistake.

The panel was of the view that this speaks to Ms McLeod's state of mind at the time of the incident, in that she knew she had used the incorrect bank card and then took steps to conceal that she had done so.

The panel next considered whether by the standards of ordinary people, these actions would be dishonest. The panel bore in mind that Ms McLeod, in her evidence, described that she wanted to tell someone immediately after realising she had used the incorrect bank card. However, the panel noted that Ms McLeod did not alert anyone to the fact that she had used the incorrect card when she returned to her workplace to put the card back in Colleague A's jacket pocket. The panel also noted that Ms McLeod did not contact anyone on 8 September 2022 on her day off to explain what had happened. It further noted that she initially denied any wrongdoing when confronted on the morning of 9 September 2022 by Witness 2. The panel was of the view that there were several instances where Ms McLeod could have informed the relevant people about the alleged mistake. It also considered that there were numerous things that Ms McLeod could have done to correct the alleged mistake, such as requesting a refund or returning the cash to Colleague A. However, Ms McLeod instead returned to work to put the bank card back in Colleague A's pocket.

Ms McLeod stated in evidence that it would be irrational for her to have used Colleague A's card as well as using her own NHS discount card. However, the panel determined that, having regard to her state of mind, this would not result in her being identified. Her only motivation for returning the card must have been that she thought she would escape detection.

In light of the above, the panel was of the view that Ms McLeod's actions were dishonest by the standards of ordinary, decent people. It considered that Ms McLeod's actions in

returning the bank card to her workplace indicate that she was attempting to conceal that she had used the card. The panel considered that it was more likely than not that Ms McLeod left the Hospital with the intention of using the bank card and did so. The panel considered that even if Ms McLeod did not intend to use Colleague A's bank card to purchase the goods, as soon as she became aware of the mistake, she should have disclosed it to Colleague A or her employer.

Therefore, the panel determined that charge 2 is found proved.

Submissions on the timing of the application for voluntary removal

After handing down the panel's findings on the facts, Mr Choudhury informed the panel that he needed to take instructions on whether the panel should consider the matter of the application for voluntary removal from the NMC register, applied for by Ms McLeod prior to the impairment stage or later.

The legal assessor advised the panel that there has been a finding of dishonesty, and a rejection of Ms McLeod's defence, and it is a matter for the panel to determine whether it wished to consider the issue of application for voluntary removal at this stage. The procedure involved is covered by Rule 14 of the Nursing and Midwifery Council (Education, Registration and Registration Appeal Rules) 2004 He informed the panel that the maker of the allegation should be asked their view on the application for voluntary removal, and this information should be before this panel before it makes a decision on what advice to provide the Registrar in respect of the application.

Mr Choudhury submitted that the panel should wait to consider what recommendations it should make to the Registrar in respect of the application for voluntary removal until after it has made its findings on misconduct and impairment. He submitted that it was a matter for the panel to determine when to hear the application bearing in mind that it should not be too disruptive to the hearing to hear it.

Mr Choudhury submitted that the panel should wait until a finding on the matter of misconduct or impairment is made unless there is an urgent reason to do so. He submitted that there are no urgent reasons why the application needs to be considered at this stage. He submitted that the medical evidence provided by Ms McLeod is vague and not of such gravity or seriousness that requires the panel to consider the application at this time.

Mr Choudhury submitted that seven days have been allocated for this hearing, and if the panel was to consider the application at this time, it may disrupt the remainder of this hearing. He submitted that the public interest considerations are not limited to matters of timetabling efficiency but should also consider that the seriousness of the charges found proved and that a finding on misconduct and impairment may be useful for the panel's consideration on the application for voluntary removal. He submitted the panel making a finding on misconduct and impairment would be in the public interest. He submitted that the Assistant Registrar would be assisted by the panel making a finding on misconduct and impairment.

Mr Choudhury submitted that whilst the panel does not have the response from the maker of the allegation (MOA) NHS Highland, it does have the response of Colleague A, who the Assistant Registrar considers is the true MOA.

Mr Choudhury submitted that there is no prejudice to Ms McLeod if the panel hears the application after the panel makes a finding on the question of misconduct and impairment. He submitted that Ms McLeod has decided not to attend this hearing and has not sent a representative on her behalf. He submitted that Ms McLeod was informed in the Notice of Hearing that the application for voluntary removal would be considered during the 16 – 23 March 2026, but it was not specified on which date, or at which stage, this application would be considered by the panel. He told the panel that the NMC's position has not changed as to when this application should be considered by the panel, but rather the NMC's position has been updated upon reflecting on the panel's findings on the facts of this case.

The panel heard the advice of the legal assessor. He informed the panel that under Rule 24 of the Rules, the panel has discretion to exercise its case management powers to determine at what time it considers Ms McLeod's application for voluntary removal.

The panel had regard to the submissions of Mr Choudhury, the advice of the legal assessor, and the NMC Guidance DMA-9 *Agreed removal at hearings* (last updated: 24 April 2023) and CMT – 5b *How we consider removal applications* (last updated: 9 June 2025). The panel bore in mind that at this stage, it does not have before it the communication from NHS Highland outlining their position in respect of Ms McLeod's application for voluntary removal.

The panel noted the NMC Guidance, namely that the panel should consider hearing the application at whatever stage is the least disruptive to the substantive hearing. It further noted that the Assistant Registrar was on standby to consider the panel's recommendation for day three and four of this hearing, and that any delay in the panel's consideration of this application could disrupt the substantive hearing significantly.

The panel considered that these proceedings have been ongoing for four years, and it would be unfair to delay these proceedings any further, especially given that the application was scheduled to be heard on 27 February 2026 but did not go ahead. Ms McLeod had a legitimate expectation that her application to the Registrar would be disposed of as quickly as practicable. The panel also considered that there was no purpose to be served by delaying consideration of Ms McLeod's application until after the impairment stage. The panel considered that the Assistant Registrar had sufficient information and material to inform their decision on the application.

The panel was of the view that it would be of assistance to hear NHS Highland's view on the application for voluntary removal. The panel determined that there was sufficient time for the NMC to seek further communication from NHS Highland, prior to the panel considering the application for voluntary removal. It determined that it would allow further

time for these inquiries to be made, and if unsuccessful, it would proceed to consider the application with a view to provide its recommendation to the Assistant Registrar on day four of this hearing.

On day four of the hearing, the panel received evidence of a response from NHS Highland in respect of the application for voluntary removal prior to considering it providing advice to the Assistant Registrar.

Decision and reasons on the application for voluntary removal

The panel next considered the application for voluntary removal made by Ms McLeod. The panel has had regard to the application documents provided by Ms McLeod, the advice of the legal assessor and the NMC Guidance DMA – 9 *Agreed removal at hearings* (last updated: 24 April 2023) and CMT – 5b *How we consider removal applications* (last updated: 9 June 2025).

The panel sent its advice to the Assistant Registrar on day four of this hearing.

The Assistant Registrar refused Ms McLeod's application for voluntary removal.

Fitness to practise

Having reached its determination on the facts of this case, the panel then moved on to consider, whether the facts found proved amount to misconduct and, if so, whether Ms McLeod's fitness to practise is currently impaired. There is no statutory definition of fitness to practise. However, the NMC has defined fitness to practise as a registrant's ability to practise safely and effectively without restriction.

The panel, in reaching its decision, has recognised its statutory duty to protect the public and maintain public confidence in the profession. Further, it bore in mind that there is no

burden or standard of proof at this stage, and it has therefore exercised its own professional judgement.

The panel adopted a two-stage process in its consideration. First, the panel must determine whether the facts found proved amount to misconduct. Secondly, only if the facts found proved amount to misconduct, the panel must decide whether, in all the circumstances, Ms McLeod's fitness to practise is currently impaired as a result of that misconduct.

Submissions on misconduct

In coming to its decision, the panel had regard to the case of *Roylance v General Medical Council (No. 2)* [2000] 1 AC 311 which defines misconduct as a '*word of general effect, involving some act or omission which falls short of what would be proper in the circumstances.*'

Mr Choudhury invited the panel to take the view that the facts found proved amount to misconduct. The panel had regard to the terms of 'The Code: Professional standards of practice and behaviour for nurses and midwives 2015' (the Code) in making its decision.

Mr Choudhury identified the specific, relevant standards where Ms McLeod's actions amounted to misconduct. He identified Sections 20.1, 20.2, 20.3, 20.4, 20.8 of the Code as the standards that Ms McLeod has breached by her conduct. He submitted that this panel has determined that Ms McLeod's actions were dishonest, that it was more likely than not that she intended to use Colleague A's bank card, and that she attempted to conceal that she had used the card.

Mr Choudhury submitted that Ms McLeod's conduct must cross the threshold of seriousness and amount to misconduct. He submitted that in the working environment, namely the female changing rooms where lockers remained unlocked, Colleague A should not have had to worry about her personal belongings. He submitted that Colleague A

described feeling betrayed. He submitted that Ms McLeod breached the trust and confidence expected within the workplace. He submitted that this conduct was extremely serious, despite the small sum spent on Colleague A's bank card. He submitted that the real misconduct was taking the card in the first place, using it, and then trying to conceal it.

Submissions on impairment

Mr Choudhury moved on to the issue of impairment and addressed the panel on the need to have regard to protecting the public and the wider public interest. This included the need to declare and maintain proper standards and maintain public confidence in the profession and in the NMC as a regulatory body. This included reference to the cases of *Council for Healthcare Regulatory Excellence v (1) Nursing and Midwifery Council (2) and Grant* [2011] EWHC 927 (Admin).

Mr Choudhury submitted that all limbs of the test in *Grant* are engaged. He submitted that patients were not put at risk by Ms McLeod's conduct. However, he submitted that the team dynamic was threatened by her actions. He submitted that Ms McLeod has breached fundamental tenets of the nursing profession, namely, to act with honesty and integrity. He submitted that a finding of impairment is necessary on the grounds of public protection and public interest.

Mr Choudhury submitted that whilst these are not clinical concerns, the conduct occurred in a clinical setting. He submitted that a finding on the ground of public protection is required. Mr Choudhury submitted that the panel must find that Ms McLeod is currently impaired. He submitted that Ms McLeod has provided some evidence regarding her level of insight and reflection, however this is insufficient to persuade the panel that she is no longer impaired. He submitted that whilst Ms McLeod has accepted some aspects of her dishonesty, she did not accept that she had stolen Colleague A's bank card, and that using the bank card was dishonest conduct. He submitted that Ms McLeod has not returned the money to Colleague A, and that [PRIVATE] bank reimbursed the money. He

submitted that as a result of this, [PRIVATE] would have suffered a financial loss. He submitted that there is a risk of repetition at this time.

In respect of public interest, Mr Choudhury submitted that a reasonable, well-informed member of the public would be concerned if a finding of impairment is not made. He submitted that the reputation of the NMC as a regulator would be damaged if no finding of impairment is made. He submitted that public confidence in the profession would be undermined if a finding of impairment is not made.

The panel accepted the advice of the legal assessor which included reference to relevant judgments. These included: *Roylance, Cohen v General Medical Council* [2008] EWHC 581 (Admin), *General Optical Council v Clarke* [2018] EWCA Civ 1463 (Admin) and *Towuaghantse v General Medical Council* [2021] EWHC 681 (Admin).

Decision and reasons on misconduct

When determining whether the facts found proved amount to misconduct, the panel had regard to the terms of the Code.

The panel was of the view that Ms McLeod's actions did fall significantly short of the standards expected of a registered nurse, and that Ms McLeod's actions amounted to a breach of the Code. Specifically:

'20 Uphold the reputation of your profession at all times

To achieve this, you must:

20.1 *keep to and uphold the standards and values set out in the Code*

20.2 *act with honesty and integrity at all times, treating people fairly and without discrimination, bullying or harassment*

20.3 be aware at all times of how your behaviour can affect and influence the behaviour of other people

20.4 keep to the laws of the country in which you are practising

21 Uphold your position as a registered nurse, midwife or nursing associate

To achieve this, you must:

...

21.3 act with honesty and integrity in any financial dealings you have with everyone you have a professional relationship with, including people in your care'

The panel appreciated that breaches of the Code do not automatically result in a finding of misconduct. However, the panel was of the view that Ms McLeod's actions were so serious that they cross the threshold into misconduct. The panel was of the view that Ms McLeod would have been able to reasonably foresee the potential harm her actions could cause, and therefore the conduct was serious.

The panel also noted that in Ms McLeod's reflective statement, she accepted that her conduct fell seriously short of the conduct and standards expected of a registered nurse. The panel noted that it has found that numerous parts of the Code have been breached, and there were several acts and omissions in Ms McLeod's conduct that fall short of the higher standards of conduct expected of nurses.

Therefore, the panel found that Ms McLeod's actions did fall seriously short of the conduct and standards expected of a nurse and amounted to misconduct.

Decision and reasons on impairment

The panel next went on to decide if as a result of the misconduct, Ms McLeod's fitness to practise is currently impaired.

In coming to its decision, the panel had regard to the NMC Guidance on *'Impairment'* (Reference: DMA-1 Last Updated: 28 January 2026) in which the following is stated:

'Being fit to practise is not defined in our legislation but for us it means that a professional on our register can practise as a nurse midwife or nursing associate safely and effectively without restriction.'

In this regard the panel considered the test of Mrs Justice Cox in the case of *CHRE v NMC and Grant* in reaching its decision. In paragraph 76:

'Do our findings of fact in respect of the doctor's misconduct, deficient professional performance, adverse health, conviction, caution or determination show that his/her/ fitness to practise is impaired in the sense that S/He:

- a) has in the past acted and/or is liable in the future to act so as to put a patient or patients at unwarranted risk of harm; and/or*
- b) has in the past brought and/or is liable in the future to bring the medical profession into disrepute; and/or*
- c) has in the past breached and/or is liable in the future to breach one of the fundamental tenets of the medical profession; and/or*
- d) has in the past acted dishonestly and/or is liable to act dishonestly in the future.'*

The panel determined that patients were not put at unacceptable risk of harm in the past as a result of Ms McLeod's misconduct. However, the panel was of the view that there is a future risk of harm to patients arising out of the fact that Ms McLeod was dishonest in providing evidence before the panel.

The panel considered that it has found that Ms McLeod's account of the events was dishonest. The panel bore in mind the ruling in *Towuaghantse*, that a registrant's ability to remediate sincerely should be judged by reference to evidence unconnected to their denials of the factual charges, unless the fact-finding decision included findings of blatant dishonesty. The panel acknowledged Ms McLeod's right to put forward a defence for her actions. It had already determined that in her evidence to the panel, Ms McLeod was dishonest. She claimed that she had a credit card which was identical to the one that was used but produced no evidence to confirm this. The panel had already made findings regarding the nature of Ms McLeod's dishonesty at the facts stage and found her evidence to be a deliberate attempt to mislead the panel.

The panel determined that Ms McLeod's account was untruthful. The panel considered that it was more likely than not that Ms McLeod knew that the bank card was not hers, and that she proceeded to use it. The panel also found that she subsequently attempted to conceal that she had used Colleague A's bank card initially when confronted on 9 September 2022. The panel considered that whilst Ms McLeod has a right to deny any dishonesty, her evidence to the panel during this hearing was "*blatantly dishonest*," and therefore the panel determined that she remains likely to be dishonest in the future. The panel was of the view that Ms McLeod's propensity for dishonest conduct had the potential to put patients at risk of harm in the future.

In addition, the panel had before it further evidence that, in October 2025 an incident occurred where Ms McLeod was sent home from work due to being under the influence of alcohol. The panel was of the view that Ms McLeod's attendance at work whilst unfit to carry out her duties put patients at risk of harm. Ms McLeod provided a reflective statement with regard to this incident where she accepted that she had turned up for work whilst unfit to do so.

The panel was of the view that Ms McLeod's misconduct had breached and was liable in the future to breach the fundamental tenets of the nursing profession and therefore

brought and was liable in the future to bring its reputation into disrepute. It was satisfied that confidence in the nursing profession would be undermined if its regulator did not find charges relating to dishonesty extremely serious. The panel considered that honesty and integrity are core values expected of registered nurses, and that patients must be able to trust nurses to deliver the appropriate care and can be held accountable when they do something wrong.

The panel had already made a finding of dishonesty in the past and determined that there was a risk of repetition in the future. Therefore, the panel determined that all four limbs of the test in *Grant* are engaged.

Regarding insight, the panel considered that Ms McLeod made some admissions at this hearing and has identified in her reflective statement that what she did was wrong and how this impacted negatively on the reputation of the nursing profession, her colleagues and patients. However, the panel was not satisfied that Ms McLeod has demonstrated sufficient insight or reflection into her misconduct at this time. The panel noted that Ms McLeod has demonstrated some further training in areas of her clinical competence, however it was of the view that this did not directly relate to the charges found proved. The panel considered that in Ms McLeod's reflective statement, she stated that she had completed some online modules relating to honesty and integrity. However, in her live evidence, she explained this was an error and she had not actually completed these modules. The panel also noted that Ms McLeod has not taken steps to return the money to Colleague A or the bank.

The panel was not satisfied that the misconduct in this case is easily remediable. The panel considered that the dishonesty charges potentially demonstrate a deep-seated attitudinal issue, which can be very difficult to put right. The panel acknowledged that this was an isolated incident, and that prior to this incident, Ms McLeod had a long, unblemished career as a nurse. The panel also considered that since the incident in September 2022 and until October 2025, Ms McLeod worked without restriction and no further incidents occurred.

The panel bore in mind the ruling in *Clarke*, specifically that a registrant's desire to retire should be considered of little consequence. The focus of this panel had to be on Ms McLeod's fitness to practise as a registered nurse. The panel considered that Ms McLeod has not demonstrated fully developed insight and reflection into her dishonesty or evidence of remediation. The panel also noted that it does not have sufficient evidence before it relating to the concerns about Ms McLeod's attendance at work when unfit to carry out her duties, or any relevant medical evidence which may, or may not, explain this behaviour. Therefore, the panel considered that the risk of repetition, and subsequent risk of harm, remains.

In light of this, the panel was of the view that a finding of current impairment is necessary on the ground 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 determined that a finding of impairment on the ground of public interest is required because Ms McLeod's dishonest conduct raises questions about her ability to practise safely and effectively. The panel had no evidence before it of what Ms McLeod might do differently in the future, and therefore it could not be satisfied that the concerns have been appropriately addressed. The panel was of the view that a reasonable, well-informed member of the public would be concerned if Ms McLeod were permitted to practise without restriction, given the ongoing public protection concerns. The panel considered the charges relating to dishonesty are particularly serious, and members of the public would expect registered nurses to be held high standards of honesty and integrity at all times. In addition, the panel concluded that public confidence in the profession would

be undermined if a finding of impairment were not made in this case and therefore also finds Ms McLeod's fitness to practise impaired on the ground of public interest.

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

Sanction

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

In reaching this decision, the panel has had regard to all the evidence that has been adduced in this case and began by having regard to the NMC Guidance on '*The sanctions available*' (Reference: SAN-2 Last Updated: 28 January 2026).

The panel accepted the advice of the legal assessor.

Submissions on sanction

Mr Choudhury informed the panel that in the Notice of Hearing, dated 26 January 2026, the NMC had advised Ms McLeod that it would seek the imposition of a striking off order if it found Ms McLeod's fitness to practise currently impaired.

Mr Choudhury submitted that there were a number of aggravating factors in this case, such as a significant breach of trust between colleagues and in what is supposed to be a safe place at work. He submitted that there was no reimbursement of the money to Colleague A, and any apologies were made very late in the process. He submitted that Ms McLeod also attempted to conceal her misconduct from Colleague A. He invited the panel to have regard to the correspondence from Colleague A, detailing the impact of this incident on her.

Mr Choudhury submitted that other than this incident, Ms McLeod had a long, unblemished career. He submitted that the stolen amount of money was comparatively low, but this does not excuse the action of the theft itself. He submitted that Ms McLeod has demonstrated some insight and remorse. He submitted that these mitigating factors were not sufficient to mitigate the aggravating factors.

Mr Choudhury submitted that taking no further action or imposing a caution order would not be appropriate given the seriousness of this case and would not uphold proper standards of conduct. He submitted that this case is not on the lower end of the spectrum of seriousness and therefore these sanctions are inappropriate. Mr Choudhury submitted that a conditions of practice order would not be appropriate. He submitted that this panel has found that this misconduct is not easily remediable, and there is evidence of some deep-seated attitudinal concerns. He submitted that Ms McLeod has provided some evidence of further clinical training, but that this is not a clinical competence case and that there are no practicable or workable conditions that could be imposed to address the issue of dishonesty.

Mr Choudhury submitted that a suspension order would not mark the seriousness of this case. He submitted that a striking off order is the only appropriate sanction in this case. He submitted that this case is so serious, that only a striking off order is proportionate. He submitted that a striking off order would mark the seriousness of the misconduct, would protect the public and would uphold the proper standards of conduct. He submitted that a striking off order would mark the importance of maintaining public confidence in the profession.

Mr Choudhury submitted that Ms McLeod did previously engage with these NMC proceedings and was represented throughout the previous hearing dates. He submitted that her non-attendance at the resuming dates should not be held against her. He also submitted that Ms McLeod has indicated that she wishes to retire from nursing, however this panel cannot be satisfied that she will not change her mind if she remains on the NMC

register. He submitted that whilst there may be some potential financial hardship caused by striking Ms McLeod off the register, this does not outweigh the panel's need to protect the public.

The panel accepted the advice of the legal assessor.

Decision and reasons on sanction

Having heard Mr Choudhury's submissions, the panel went on to consider what sanction, if any, it should impose. The panel has borne in mind that any sanction imposed must be appropriate and proportionate and, although not intended to be punitive in its effect, may have such consequences. The decision on sanction is a matter for the panel independently exercising its own judgement.

The panel took into account the following aggravating features:

- Abuse of trust in the workplace;
- Dishonesty of theft through finding of Colleague A's bank card, and initial concealment of her misconduct, demonstrating some premeditation in respect of her choices following the theft;
- Pattern of misconduct between 7 – 9 September 2022, without evidence of any steps taken to make things right;
- Dishonesty in giving evidence to the panel;
- Limited insight and remediation;
- Evidence of deep-seated attitudinal issues;
- Ms McLeod had no means of knowing what effect this unauthorised expenditure would have on Colleague A's finances and the potential for not being able to meet bills such a mortgage/rent and/or overdraft issues;
- Personal financial gain; and
- New concern arising in October 2025 which was admitted by Ms McLeod, demonstrating a risk of harm to patients which aggravates the initial concern raised.

The panel also took into account the following mitigating features:

- A previously unblemished career as a nurse;
- Some early admissions of some of the facts;
- Has made some apologies to Colleague A in her reflective statement and during this hearing, albeit the panel considered this belated; and
- Worked between September 2022 and October 2025 without incident, although the panel gave this limited weight, given the seriousness of the further serious concerns raised in October 2025.

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.

The panel next considered a caution order and had regard to the NMC Guidance on 'Caution order' (Reference: SAN-2b Last Updated: 28 January 2026) in which the following is stated:

'A caution is only appropriate if the Committee has decided there's no risk to the public or to people using services that requires the professional's practice to be restricted. This means 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 McLeod's actions were not at the lower end of the spectrum, and it found that there is a risk of repetition and risk of harm to the public. The panel also noted that there is a strong public interest in this case, and in particular a need to uphold proper standards of conduct and maintain public confidence in the profession. The panel therefore determined that a sanction that does not restrict Ms McLeod practise

would not protect the public. The panel also determined 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 Ms McLeod's registration would be appropriate. The panel is mindful that any conditions imposed must be relevant, proportionate, workable and measurable. The panel had regard to the NMC Guidance on '*Conditions of practice order*' (Reference: SAN-2c Last Updated: 28 January 2026) and had regard to the following factors:

- *'no evidence of deep-seated personality or attitudinal problems*
- *identifiable areas of the professional's practice in need of assessment and/or retraining*
- *competence cases where there is a realistic likelihood that the concerns about their practice can be resolved*
- *potential and willingness to respond positively to retraining (this should be based on specific evidence provided by the professional)*
- *insight into any health problems, alongside willingness to abide by conditions relating to a medical condition, treatment and supervision*
- *people using services will not be put at risk either directly or indirectly as a result of the conditions*
- *conditions can be created that can be monitored and assessed.'*

The panel is of the view that there are no relevant, proportionate, workable or measurable conditions that could be formulated, given the nature of the charges in this case. The misconduct identified in this case was not something that can be easily addressed through retraining. The panel considered that there are no conditions that can be formulated or that are measurable that would address Ms McLeod's deep-seated attitudinal issues, or her ability to be open and honest. Furthermore, the panel concluded that the placing of conditions on Ms McLeod's registration would not adequately address the seriousness of this case and would not protect the public. The panel was of the view that placing conditions on Ms McLeod's practice would not mark the public interest in this case, as

they would not uphold proper standards of conduct or maintain public confidence in the profession.

The panel went on to consider whether a suspension order is appropriate in this case. The panel had regard to the NMC Guidance on ‘*Suspension order*’ (Reference: SAN-2d Last Updated: 28 January 2026) in which the following factors on when a suspension order may be appropriate are set out:

- *‘the impairment is very serious but not fundamentally incompatible with continuing to be a registered professional*
- *an outcome less severe than strike-off would still satisfy the over-arching objective.’*

The panel also had regard to the key considerations as set out in the NMC Guidance to weigh up before imposing a suspension. It noted the following list of circumstances that may make a suspension order an appropriate sanction:

- *‘the charges found proved are at the most serious end of the spectrum and call into question the professional’s suitability to continue practising, either currently or at all*
- *while it is possible that the professional could be fit to practise in future, only a period out of practice would be sufficient to allow them to fully strengthen their practice through reflection, the development of their professional skills and / or development of insight and remediation*
- *there is a risk to the safety of people using services if the professional were allowed to continue to practise even with conditions*
- *what went wrong is so serious that public confidence in the profession and professional standards could not be maintained if the professional were able to continue practising without stopping for a period of time*
- *despite the seriousness of what happened, the professional has engaged in the proceedings and has shown at least some meaningful insight which evidences a realistic possibility that they will continue to develop this insight, address their concerns and return to practice.’*

Whilst the panel acknowledged that the risks identified could be managed by Ms McLeod being temporarily removed from the register, it considered that it would not be sufficient to uphold public confidence in the profession and maintain professional standards due to the seriousness and nature of the facts found proved. The panel noted that a temporary suspension from the NMC register would address the public protection concerns, however the panel had to be satisfied that there would be some progress for a reviewing panel to monitor.

Given Ms McLeod's limited insight and remorse, together with no evidence of training and development, the panel considered that there is no realistic possibility that she would address the concerns to such a level where she could return to practise safely. The panel noted that there is some evidence of deep-seated attitudinal concerns that have not yet been addressed. The panel noted that there were discrepancies in her evidence, which this panel determined was blatant dishonesty. The panel was of the view that this demonstrates a repeated pattern of dishonest misconduct, and therefore the concerns are ongoing. The panel noted that there remains a risk to the public, and that the public interest would not be satisfied by Ms McLeod's temporary removal from the register.

The panel bore in mind that Ms McLeod has disengaged from these proceedings and has demonstrated her intention to retire from practice. The panel was of the view that there were no directions or guidance it could make that would assist Ms McLeod in returning to safe practise within a reasonable time frame.

In this particular case, the panel determined that a suspension order would not be a sufficient, appropriate or proportionate sanction.

In considering a striking-off order, the panel had regard to the NMC Guidance on '*Sanctions for the highest risk cases*' (Reference SAN-4 Last Updated: 28 January 2026). The panel considered that these concerns are particularly serious, in light of Ms McLeod's repeated dishonest conduct, and given that there was personal financial gain and no steps

to put this right were taken by Ms McLeod. The panel considered that this poses questions about Ms McLeod's suitability to remain on the NMC register. The panel was of the view that due to Ms McLeod's limited insight, remorse and remediation, and given that she is unlikely to re-engage with these proceedings, public confidence in the profession could not be maintained with a suspension order.

Having regard to all of the above, the panel determined that this case falls within the definition of being a '*highest risk case*'. The panel had regard to the following considerations as set out in the NMC Guidance entitled '*Striking-off order*' (Reference: SAN-2e Last Updated; 28 January 2026):

- *Do the charges found proved raise fundamental questions about their professionalism?*
- *Can public confidence in the profession be maintained if the professional is not removed from the Register?*
- *Is there any amount of insight and reflection which could keep people receiving care and members of the public safe, maintain public confidence in the profession, and uphold professional standards?*
- *Is there a realistic prospect that, after suspension, the professional will have gained insight and strengthened their practice such that the risk they pose will have reduced?*

The panel found that the charges found proved raise fundamental questions about Ms McLeod's professionalism. It considered that public confidence in the profession cannot be maintained without removing Ms McLeod from the register. The panel was of the view that a considerable amount of insight and reflection would be required to satisfy a reviewing panel that people receiving care and members of the public would be safe. The panel considered that there is not a realistic prospect that after a period of suspension, that Ms McLeod would have gained enough insight and strengthened her practice such that the risk she poses will have reduced.

Ms McLeod's actions were significant departures from the standards expected of a registered nurse, and are fundamentally incompatible with her remaining on the register. The panel was of the view that the findings in this particular case demonstrate that Ms McLeod's actions were serious and to allow her to continue practising would not protect the public and would undermine public confidence in the profession and in the NMC as a regulatory body.

Balancing all of these factors and after taking into account all the evidence before it during this case, the panel determined that the appropriate and proportionate sanction is that of a striking-off order. Having regard to the effect of Ms McLeod's actions in bringing the profession into disrepute by adversely affecting the public's view of how a registered nurse should conduct herself the panel has concluded that nothing short of this would be sufficient in this case. The panel considered that Ms McLeod's misconduct is so serious that it is fundamentally incompatible with continuing to be a registered professional.

The panel acknowledged the potential financial hardship this order may have on Ms McLeod, but it determined that the public interest outweighed hers in this instance.

The panel considered that this order was necessary to mark the importance of maintaining public confidence in the profession, and to send to the public and the profession a clear message about the standard of behaviour required of a registered nurse.

This will be confirmed to Ms McLeod in writing.

Interim order

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

Submissions on interim order

The panel took account of the submissions made by Mr Choudhury. He submitted that an interim order is necessary to protect the public during any potential appeal period and is otherwise in the public interest. He submitted that there remains a risk of repetition and a risk of harm, and therefore an interim order is necessary. He further submitted that the public interest is engaged, and an interim order is otherwise necessary to uphold public confidence in the profession and maintain high professional standards.

Mr Choudhury submitted that an interim suspension order is the appropriate and proportionate interim order to protect the public and meet the public interest in this case. He submitted that there are no workable, practicable or measurable conditions that could be formulated to address the public protection concerns or the public interest. He confirmed that the interim suspension order would be necessary for 18 months.

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

Decision and reasons on interim order

The panel was satisfied that an interim order is necessary for the protection of the public and is otherwise in the public interest. The panel had regard to the seriousness of the facts found proved and the reasons set out in its decision for the substantive order in reaching the decision to impose an interim order. The panel considered it would be inconsistent with its previous findings regarding the ongoing public protection and public interest concerns if it were not to impose an interim order.

The panel concluded that an interim conditions of practice order would not be appropriate or proportionate in this case, due to the reasons already identified in the panel's determination for imposing the substantive order. The panel noted that the concern from October 2025 increased the level of risk of harm to the public. The panel considered Ms

McLeod's intention to retire was of little consequence, as the risk of harm and repetition remains. The panel was of the view that public confidence in the profession would be damaged if Ms McLeod's practise is not restricted in light of this panel's findings. The panel considered that an interim suspension order is necessary to protect the public and meet the public interest during any period of appeal. The panel therefore imposed an interim suspension order for a period of 18 months due to the seriousness of this case and the public protection issues identified.

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

That concludes this determination.