

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

**Substantive Order Review Hearing
Tuesday, 8 September 2026**

Virtual Hearing

Name of Registrant:	Amanda Doe
NMC PIN:	08G2461E
Part(s) of the register:	Registered Nurse Nursing – RNC – October 2008
Relevant Location:	Devon
Type of case:	Misconduct
Panel members:	Nilla Varsani (Chair, Lay member) Christopher Bithell (Lay member) Patience McNay (Registrant member)
Legal Assessor:	Ben Stephenson
Hearings Coordinator:	John Kennedy
Nursing and Midwifery Council:	Represented by Lauren Fullerton, Case Presenter
Ms Doe:	Present and represented by Hannah Saad, instructed by Royal College of Nursing (RCN)
Order being reviewed:	Suspension order (12 months)
Fitness to practise:	Not Impaired
Outcome:	Order to lapse upon expiry in accordance with Article 30 (1), namely 15 October 2026

Decision and reasons on review of the substantive order

The panel found that your fitness to practise is not impaired and decided to allow the current suspension order to lapse at the end of 15 October 2026 in accordance with Article 30(1) of the 'Nursing and Midwifery Order 2001' (the Order).

This is the first review of a substantive suspension order originally imposed for a period of 12 months by a Fitness to Practise Committee panel on 17 September 2025.

The current order is due to expire at the end of 15 October 2026.

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

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

'That you, whilst employed as a Band 6 Nurse at Torbay Hospital:

- 1. On or around 17 November 2022 referred to Colleague A as a "Black Bitch";*
- 2. On dates unknown made one or more of the comments set out in Schedule 1 in relation to Colleague A*
- 3. Your conduct at charge 1 and/or 2 was racially motivated.*

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

Schedule 1

i. Black Bitch

ii. ...

iii. ...'

The original panel determined the following with regard to impairment:

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

In coming to its decision, the panel had regard to the Fitness to Practise Library, and the judgment of Mrs Justice Cox in the case of CHRE v NMC and Grant. The panel considered that limbs a, b, and c of the test set out in Grant are engaged.

The panel finds that patients were put at risk of harm. The panel considered that while no actual harm was caused there was a significant risk of harm. Your comments were made in a public area of the children's ward that could have easily been overheard by patients, including children, young people and their families, or a member of the public. The panel considered that should a patient have heard your comments, especially if they were from an ethnic minority community, it could have negative impact including deterring them from seeking health care in the future and as a result place them at risk of harm. During your oral evidence, you acknowledged that making racist comments presents a risk to patient safety.

The panel also concluded that your misconduct in making two racially motivated comments towards a colleague had breached a fundamental tenet of the nursing profession, relating to promoting professionalism and trust, and brought its reputation into disrepute.

The panel went on to consider whether your misconduct can easily be addressed, whether it has been addressed, and is it highly unlikely to be repeated.

The panel considered that your misconduct is capable of being remediated. However, it noted that using racist words on two occasions indicated an attitudinal problem which may make remediation more difficult.

In considering the extent to which your misconduct has been addressed, the panel took into account all of the evidence before it including the training that you have

undertaken, your wider reading, testimonials, your expressions of regret and remorse, and your reflections.

The panel noted the extensive training you have undertaken in relation to equality and diversity, including antiracism, and how you have endeavoured to apply this in your practice and the wider workplace. In addition, the panel heard that you have carried out self-motivated research into relevant subject areas.

The panel took account of your testimonials, all of which are positive and speak of your good character and capability as a registered nurse. The panel found that the testimonials were from people who knew about the NMC charges and the ongoing fitness to practice process.

During your evidence you told the panel of your genuine regret and remorse for your actions on numerous occasions. Your remorse has not extended to offering or attempting to offer direct apologies to those impacted by your misconduct. You told the panel that at an early stage of the Trust investigation you were instructed not to contact the colleagues affected. Whilst this may have been the case at that time, the panel considered that there may have been scope for you to subsequently offer apologies through the Trust, if appropriate. When pressed on this you told the panel you had sought mediation but that others did not want to engage. However, the panel was of the view that mediation is different to an apology.

The panel considered that you have begun to develop insight into your misconduct but that it is not yet comprehensive. Whilst you are able to articulate some of the potential impact that your misconduct may have had on your colleagues, the panel considered that this was phrased in a way that lacked depth and understanding. In particular in your reflections and oral evidence, you showed little understanding of the power imbalance between you as a band 6 sister and your junior colleagues. In your reflections you stated:

'I wish that if colleagues felt I was speaking out of line that they would have either discussed it with or been able to speak to someone to discuss it with me.'

The panel took the view that this ignores the difficult situation that you placed your colleagues in and shifts responsibility for regulating your own behaviour onto others. It concerned the panel that you did not consider there to be a power imbalance.

The panel took account of your admission to charge 1 and 3, your acceptance of the panel's finding on charge 2 and 3, and the fact that at no stage have you suggested that the alleged words, if said, did not amount to misconduct. The panel regarded these as positive features indicating some insight. However, the panel noted that you denied the allegation at the local investigation stage, claiming that you said "blank bitch". In relation to charge 1, your admission was entered on the basis of the witness evidence, rather than an accepted recollection on your part. Similarly, in accepting the panel's decision on charge 2 at the impairment stage, you told the panel that you did not remember saying the comments, but should have remembered saying them. You said it was "so long down the line" and that it was "hard to understand why" you said it. The panel concluded that whilst you have demonstrated some insight into your misconduct, through your admission to charge 1 and 3, your acceptance of the panel's finding on charge 2 and 3, and your acceptance of misconduct, you have not developed full insight into your actions.

The panel considered the case of PSA v HCPC and Roberts and the submissions made on your behalf that features of your case are similar. However, in contrast to that case the panel finds that your racially motivated comments took place on two occasions, and therefore could not be regarded as an isolated incident, were made in an open area where they could be easily overheard, and there was no immediate admission by yourself such as a self-referral to the Trust or NMC. The panel therefore rejected the submission that your case is similar to that of PSA v HCPC and Roberts.

In light of all the above, particularly your insight, the panel concluded that you have not yet fully remediated your misconduct. Therefore, the panel could not conclude that your misconduct is highly unlikely to be repeated. The panel finds that you are therefore impaired 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 public interest grounds is required because the public would be shocked if a registered nurse who had made racially motivated comments on two occasions in the circumstances of this case was not found to be impaired. This would seriously undermine the public confidence in the nursing profession. Therefore, the panel also finds your fitness to practise impaired on the grounds of public interest.

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

The original panel determined the following with regard to sanction:

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

It then considered the imposition of a caution order but again determined that, due to the seriousness of the case, and the public protection issues identified, an order that does not restrict your practice would not be appropriate in the circumstances. The SG states that a caution order may be appropriate where 'the case is at the lower end of the spectrum of impaired fitness to practise and the panel wishes to mark that the behaviour was unacceptable and must not happen again.' The panel considered that your misconduct was not at the lower end of the spectrum and that a caution order would be inappropriate in view of the issues identified. The panel decided that it would be neither proportionate nor in the public interest to impose a caution order.

The panel next considered whether placing conditions of practice on your registration would be a sufficient and appropriate response. The panel is mindful that any conditions imposed must be proportionate, measurable and workable. The panel took into account the SG, in particular the following which indicate when a conditions of practice order may be appropriate:

- 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.*

Whilst some of these criteria may be engaged in this case, the panel is of the view that there are no practical or workable conditions that could be formulated, given the nature of the misconduct in this case.

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

The panel then went on to consider whether a suspension order would be an appropriate sanction. The SG states that suspension order may be appropriate where some of the following factors are apparent:

- A single instance of misconduct but where a lesser sanction is not sufficient;*
- No evidence of harmful deep-seated personality or attitudinal problems;*
- No evidence of repetition of behaviour since the incident;*
- The Committee is satisfied that the nurse or midwife has insight and does not pose a significant risk of repeating behaviour;*

- ...
- ...

The panel acknowledged that your misconduct was not a single incident but noted that both incidents flow from a relatively short period of your otherwise unblemished career. Consequently while the panel concluded that your misconduct indicated attitudinal concerns it did not characterise these as deep-seated as there was no evidence these were ingrained, or long-standing. There is no evidence of your misconduct being repeated. The panel note that you have taken steps to remediate your misconduct and you have some, albeit incomplete, insight. The panel previously noted that, based on your current insight, it could not be said that your misconduct is highly unlikely to be repeated. However, the panel was of the view that you do not pose a significant risk of repeating your behaviour.

The panel considered that given the attitudinal concerns identified and the seriousness of your misconduct as it relates to discrimination, there is a need to declare and uphold proper standards of the nursing profession and at a least a period of suspension is therefore necessary.

The panel went on to consider whether a striking-off order would be appropriate; however, taking account of all the information before it, including your efforts at remediation, training, positive testimonials and previous good character, the panel concluded that such an order would be disproportionate in the circumstances of this case.

In light of all of this the panel concluded that a striking-off order would be disproportionate, and a period of suspension is sufficient to protect the public, maintain the public confidence, and permit you the opportunity to address the concerns of insight that the panel earlier identified as lacking.

The panel noted the hardship such an order will inevitably cause you. However, this is outweighed by the public interest in this case.

The panel determined that a suspension order for a period of one year is appropriate in this case to mark the seriousness of your misconduct, maintain public confidence, and send out a strong message as to the professional standards expected of registered nurses.

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

Any future panel reviewing this case would be assisted by:

- *Your attendance at the review*
- *Evidence of your further reflection and developed insight*
- *Any other information you think may help a future review panel'*

Decision and reasons on current impairment

The panel has considered carefully whether your 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 documentation you provided. It has taken account of the submissions made by Ms Fullerton on behalf of the NMC, and Ms Saad, on your behalf.

Ms Fullerton provided that panel with the background of the case and what the previous panel identified as the concerns. She initially reserved her position until Ms Saad made submissions. In light of all the information provided by you and the submissions on your behalf Ms Fullerton later submitted that you have provided an extensive amount of relevant training courses and developed reflection. She submitted that the NMC adopted a

neutral position as to current impairment or any order in light of the remorse, insight, and strengthening of practice you have demonstrated.

Ms Saad submitted that your fitness to practise is no longer impaired and that a further order is therefore no longer necessary. She submitted that since the substantive order was imposed you have completed a significant number of training and reflective pieces covering topics of racism, and Equality Diversity and Inclusion, and these are before the panel in the documentation. She referred to positive testimonials from your current colleagues, who were made aware of the NMC charges found proved, which speak to the high level of insight that you have demonstrated into your misconduct. Ms Saad submitted that you are fully remorseful for your conduct and are committed to continuing to reflect on what you have learned and ensure you do not repeat the actions again.

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

In reaching its decision, the panel was mindful of the need to protect the public, maintain public confidence in the profession and to declare and uphold proper standards of conduct and performance.

The panel considered whether your fitness to practise remains impaired.

The panel noted that the original panel had identified your attendance at any hearing, and evidence of further developed insight and reflection as areas that you should focus on.

The panel noted that you have attended this hearing and have provided a substantial bundle of training certificates, reflections, and testimonials from colleagues.

The panel had sight of the extensive training courses you have completed within the past 12 months. It noted that these are not merely surface level courses but are highly relevant and in depth courses that you have sought out to assist you in strengthening your practice. The panel noted that as well as attending and completing these course you have also provided a reflection on your learning in each course and how to apply it to your nursing practice. You have further strengthened this by remaining employed in a non-patient facing area of the NHS and have provided testimonials from your current line manager, and

colleagues, which speak to how you have sought to apply the principles of inclusion and anti-racism in your work. The panel had sight of your apology emails made to the affected parties and your sincere remorse.

The panel considered that this is evidence of the developed and sustained insight identified by the previous panel. It considered that you have not merely done the training course and reflection shortly before the review but that it has been a sustained and prolonged training and reflection you have done over the past 12 months.

In light of this, this panel determined that you are now not likely to repeat matters of the kind found proved. The panel therefore decided that a finding of continuing impairment is not necessary on the grounds of public protection.

The panel has borne in mind that its primary function is to protect patients and the wider public interest which includes maintaining confidence in the nursing profession and upholding proper standards of conduct and performance. The panel determined that, in this case, a finding of continuing impairment on public interest grounds is also not required.

For these reasons, the panel finds that, although your to practise was impaired at the time of the incidents, given all of the above, your fitness to practise is not currently impaired.

In accordance with Article 30(1), the substantive suspension order will lapse upon expiry, namely the end of 15 October 2026.

The panel decided to allow the order to continue for the full 12 months originally imposed to mark the seriousness of the misconduct.

This will be confirmed to you in writing.

That concludes this determination.