

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

**Substantive Order Review Hearing
Monday, 7 September 2026**

Virtual Hearing

Name of Registrant:	Bernadett Kiralyne Kemenes
NMC PIN:	09H0041C
Part(s) of the register:	Nurses part of the register Sub part 1 RN1: Adult nurse, level 1 (14 August 2009)
Relevant Location:	East Lothian
Type of case:	Misconduct
Panel members:	Serene Rollins (Chair, Lay member) Helen Reddy (Registrant member) Dora Waitt (Lay member)
Legal Assessor:	Paul Hester
Hearings Coordinator:	Khatra Ibrahim
Nursing and Midwifery Council:	Represented by Ruhena Parker, Case Presenter
Mrs Kemenes:	Not present and unrepresented at this hearing
Order being reviewed:	Suspension order (3 months)
Fitness to practise:	Impaired
Outcome:	Suspension order (6 months) to come into effect on 14 October 2026 in accordance with Article 30 (1)

Decision and reasons on service of Notice of Hearing

The panel was informed at the start of this hearing that Mrs Kemenes was not in attendance and that the Notice of Hearing had been sent to Mrs Kemenes' registered email address by secure email on 30 July 2026.

Ms Parker, on behalf of the Nursing and Midwifery Council (NMC), submitted that it had complied with the requirements of Rules 11 and 34 of the 'Nursing and Midwifery Council (Fitness to Practise) Rules 2004', as amended (the Rules).

The panel accepted the advice of the legal assessor.

The panel took into account that the Notice of Hearing provided details of the substantive order being reviewed, the time, date and that the hearing was to be held virtually, including instructions on how to join and, amongst other things, information about Mrs Kemenes' right to attend, be represented and call evidence, as well as the panel's power to proceed in her absence.

In light of all of the information available, the panel was satisfied that Mrs Kemenes has been served with notice of this hearing in accordance with the requirements of Rules 11 and 34.

Decision and reasons on proceeding in the absence of Mrs Kemenes

The panel next considered whether it should proceed in the absence of Mrs Kemenes. The panel had regard to Rule 21 and heard the submissions of Ms Parker who invited the panel to continue in the absence of Mrs Kemenes. She submitted that Mrs Kemenes had voluntarily absented herself.

Ms Parker submitted that there had been no engagement at all by Mrs Kemenes with the NMC in relation to these proceedings and, as a consequence, there was no reason to believe that an adjournment would secure her attendance on some future occasion.

The panel has decided to proceed in the absence of Mrs Kemenes. In reaching this decision, the panel has considered the submissions of Ms Parker, and the advice of the legal assessor. It had particular regard to relevant case law and to the overall interests of justice and fairness to all parties. It noted that:

- Mrs Kemenes has not engaged with the NMC and has not responded to any of the letters or emails sent to her about this hearing;
- No application for an adjournment has been made by Mrs Kemenes;
- There is no reason to suppose that adjourning would secure her attendance at some future date; and
- There is a strong public interest in the expeditious review of this case, as the substantive order expires on 14 October 2026.

In these circumstances, the panel has decided that it is fair to proceed in the absence of Mrs Kemenes.

Decision and reasons on review of the substantive order

The panel decided to extend the suspension order for a period of 6 months.

This order will come into effect at the end of 14 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 3 months by a Fitness to Practise Committee panel on 16 June 2026.

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

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

'That you, a registered nurse:

1. On 28 October 2022, gave Resident E a dose of Tolterodine in the

morning and at lunch time instead of in the morning and evening as prescribed.

2. On 5 February 2023:

- a. ...*
- b. Administered one cap of Isosorbide to Resident D rather than two as required;*
- c. Did not administer prescribed prednisolone to Resident D;*
- d. Did not administer prescribed memantine to Resident F.*

3. On or around 17 June 2023:

- a. Gave Resident A 32 units of insulin instead of 8 units as prescribed;*
- b. Retrospectively amended Resident A's medication records;*
- c. Your actions at 3.b. were dishonest in that you were attempting to conceal that you had made a medication error.*

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

The original panel determined the following with regard to impairment:

'The panel was of the view that with further support and training Mrs Kemenes' behaviour is remediable in relation to the medication administration errors. However the panel determined that due to a lack of significant strengthening of practice for drug administration, there remains a risk of repetition of drug administration errors until she receives the right training and support. In relation to the medication administration failings, the panel therefore concluded that Mrs Kemenes' fitness to practise is currently impaired on public protection grounds.

Regarding insight, the panel considered Mrs Kemenes made admissions and has demonstrated an understanding of how her actions put the residents at a risk of harm. Mrs Kemenes has demonstrated an understanding of why what she did was wrong and how this impacted negatively on the reputation of the nursing profession.

Mrs Kemenes has apologised for her misconduct however the panel was not satisfied that she has sufficiently demonstrated how she would handle stress or personal issues differently in the future, to avoid making similar errors.

The panel carefully considered the evidence before it in determining whether or not Mrs Kemenes has taken steps to strengthen her practice. The panel noted that Mrs Kemenes has not practised as a nurse since June 2023 and has not yet demonstrated any strengthening of her nursing practice.

The panel took into account the training Mrs Kemenes has undertaken (which pre-dated the relevant incidents) and the three reflective accounts written by her addressing her misconduct. In this regard, panel considered that each time there were drug errors and omitted medication, Mrs Kemenes recognised the risk of harm, but only after the fact and without much foresight. However, the panel determined that this aspect of the misconduct moving forward could be addressed with stringent employer supervision, training and further reflection to ensure similar errors are not repeated. However, the panel decided that a finding of impairment is necessary on the grounds of public protection in relation to the drug administration errors.

Turning to the dishonesty finding, the panel considered Mrs Kemenes' reflective pieces and noted that she took full responsibility for her actions and stated that she had learnt from her mistakes. She recognised that her actions would have resulted in a loss of trust in her by patients, patients' relatives and colleagues, and a lot of trust in the profession as a whole. The panel took account that there is no other evidence before it of Mrs Kemenes acting dishonestly throughout her career. Ms Decourt in her statement commented positively that Mrs Kemenes usually acted honestly. The panel was therefore of the view that this incident of dishonesty was out of character and the subsequent proceedings will have taught Mrs Kemenes a significant lesson, and it therefore appeared highly unlikely that Mrs Kemenes would attempt to falsify clinical records in the future.

The panel bore in mind 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 did not consider that the medication errors involved in charges 2 and 3a required a finding of current impairment on wider public interest grounds. They took place on two shifts and in some instances were understandable errors, capable of being remedied. Although there remains a risk of repetition, and therefore the panel has found impairment on public protection grounds, it did not consider that these drug administration errors were sufficiently serious to require a finding of impairment on the wider public interest grounds.

The panel determined, however, that a finding of impairment on public interest grounds is required in relation to Mrs Kemenes' dishonesty in amending a resident's medical records in an attempt to conceal that she had made a medication error. The panel concluded that public confidence in the profession would be undermined if a finding of impairment were not made in this case in relation to the dishonesty, to maintain proper standards and maintain public confidence in the profession and the NMC as its regulatory body. The panel therefore also finds Mrs Kemenes' fitness to practise impaired on the grounds of public interest.

Having regard to all of the above, the panel was satisfied that Mrs Kemenes' fitness to practise is currently impaired:

- In relation to the medication errors (charges 2 and 3a), on public protection grounds alone*
- In relation to the dishonesty (charges 3b and 3c) on public interest grounds alone'*

The original panel determined the following with regard to sanction:

'The panel next considered whether placing conditions of practice on Mrs Kemenes' 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: 28/01/2026) 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 considered that it would be possible to formulate relevant, proportionate and workable conditions if this case involved only the clinical failings in respect of medication administration. However, it considered that the dishonesty in this case, although one-off, spontaneous and unlikely to be repeated, was sufficiently serious in character, involving an attempt to cover up a clinical error, that a conditions of practice order would be inadequate to mark the seriousness of the misconduct and satisfy the wider public interest considerations.

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: 28/01/2026) 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.'*

*The panel had regard to the NMC sanctions guidance 'Sanctions for the highest risk cases' Reference: SAN-4 (Last Updated 28/01/2026) and specifically noted the provisions within the guidance in relation to honesty. In particular it referred to the case of *Lusinga v NMC* [2017] EWHC 1458 (Admin) which states that 'not all dishonesty is equally serious' and that dishonest conduct would generally be less serious in cases of:*

- One-off incidents*
- Spontaneous conduct*
- Professionals who have behaved dishonestly can engage with the Committee to:*
 - Show that they feel remorse*
 - Recognise that they acted in a dishonest way*

- *Explain, with evidence, how this will not happen again.*

The panel was of the view that these factors were alive in Mrs Kemenes' case. It relied on the evidence in Mrs Kemenes' reflective statement of 31 July 2023 demonstrating remorse and acknowledging that she knew she had broken trust. The panel also bore in mind that this was an isolated incident of dishonesty which appeared to be out of character and at a time of personal stress. The panel also acknowledged the reference within the guidance to it being:

'...very unlikely that a sanction less than suspension will be proportionate to findings of dishonesty. Conditions of practice are unlikely to be an appropriate sanction, because dishonesty is an attitudinal concern which cannot easily be mitigated by conditions.'

The panel was satisfied that in this case, the misconduct was not fundamentally incompatible with remaining on the register, however there is a need to mark that it is unacceptable to amend a medical record in an attempt to conceal a medication error which could have had serious consequences for the resident.

In making this decision, the panel carefully considered the submissions of NMC in relation to the six-month with review suspension order sanction that it was seeking in this case. The panel recognise that it is an attitudinal concern however determined that it is not deep-seated and unlikely to be repeated. The panel determined that Mrs Kemenes needs time to demonstrate how she would act differently to ensure she is able to conduct herself in a pressurised situation in future. The panel therefore decided that a three-month suspension order is the appropriate and proportionate sanction to mark the seriousness of the dishonesty and discharge the public interest element in this case.'

Decision and reasons on current impairment

The panel has considered carefully whether Mrs Kemenes's fitness to practise remains impaired. Whilst there is no statutory definition of fitness to practise, the NMC has defined fitness to practise as the ability of a professional on our register to practise as a nurse,

midwife or nursing associate safely and effectively without restriction. In considering this case, the panel has carried out a comprehensive review of the order in light of the current circumstances. Whilst it has noted the decision of the last panel, this panel has exercised its own judgement as to current impairment.

The panel had regard to all of the documentation before it, including the NMC bundle. It has taken account of the submissions made by Ms Parker on behalf of the NMC. She took the panel through the background of the case, and submitted that it is a matter for the panel to determine whether Mrs Kemenes' fitness to practise is currently impaired.

Ms Parker submitted that Mrs Kemenes has not worked as a nurse since 2023, nor has she evidenced completion of CPD for some time. She also submitted that Mrs Kemenes may require further strengthening of practice to demonstrate she is no longer impaired. She further submitted that the short suspension order imposed at the original substantive meeting may have addressed any public interest concern, and at this time, a conditions of practice order may be appropriate. She also submitted that Mrs Kemenes' registration expired on 31 August 2024, and that should the panel allow the order to expire, Mrs Kemenes' registration will automatically lapse. She invited the panel to impose whatever sanction it deems most appropriate and proportionate.

The panel accepted the advice of the legal assessor.

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

The panel considered whether Mrs Kemenes's fitness to practise remains impaired.

The panel noted that the original substantive panel did not have any information from Mrs Kemenes regarding her practice. At this hearing, the panel had no new information to suggest there had been any development in Mrs Kemenes' insight into her dishonesty or the concerns raised. It further noted that Mrs Kemenes has not been engaging with the NMC proceedings, and that no documents were provided to today's reviewing panel.

Further, no evidence has been placed before the panel as to the steps Mrs Kemenes has taken to strengthen her practice. The panel determined that in the absence of any new information, there remains a risk of repetition, and a risk of harm to patients. It therefore decided that a finding of continuing impairment is necessary on the grounds of public protection.

The panel has borne in mind that its primary function is to protect patients and the wider public interest which includes maintaining confidence in the nursing profession and upholding proper standards of conduct and performance. The panel determined that, in this case, Mrs Kemenes has not demonstrated that she is able to practise safely and effectively without restriction, and that a finding of continuing impairment on public interest grounds is also required.

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

Decision and reasons on sanction

Having found Mrs Kemenes' fitness to practise currently impaired, the panel then considered what, if any, sanction it should impose in this case. The panel noted that its powers are set out in Article 30 of the Order. The panel has also taken into account the 'NMC's Sanctions Guidance' (SG) and has borne in mind that the purpose of a sanction is not to be punitive, though any sanction imposed may have a punitive effect.

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

It then considered the imposition of a caution order but again determined that, due to the seriousness of the case, and the public protection issues identified, an order that does not restrict Mrs Kemenes' practice would not be appropriate in the circumstances, as there remains a risk to the public. The SG states that a caution order may be appropriate where *'the case is at the lower end of the spectrum of impaired fitness to practise, but the Committee wants to mark that what happened was unacceptable and must not happen again.'* The panel considered that Mrs Kemenes' misconduct was not at the lower end of

the spectrum and that a caution order would be inappropriate in view of the issues identified. The panel decided that it would be neither proportionate nor in the public interest to impose a caution order.

The panel next considered whether a conditions of practice on Mrs Kemenes' registration would be a sufficient and appropriate response. The panel is mindful that any conditions imposed must be proportionate, measurable and workable. The panel bore in mind the seriousness of the facts found proved at the original hearing and concluded that a conditions of practice order would not adequately protect the public or satisfy the public interest. Mrs Kemenes has not engaged with the proceedings, and there is no evidence that she has taken on the recommendations of the original substantive panel. The panel therefore was not satisfied that if it were to formulate conditions of practice, she would engage with them. The panel was not able to formulate workable conditions of practice that would adequately address the concerns relating to Mrs Kemenes' dishonesty.

The panel considered the imposition of a further period of suspension. It was of the view that given Mrs Kemenes has not engaged with the NMC's processes, a suspension order would be most appropriate and would allow her further time to fully reflect on her previous failings and dishonesty. The panel therefore concluded that a further 6 month suspension order would be the appropriate and proportionate response and would afford Mrs Kemenes sufficient time to develop her insight, remediation and take steps to strengthen her nursing practice.

This suspension order will take effect upon the expiry of the current suspension order, namely the end of 14 October 2026 in accordance with Article 30(1).

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

Any future panel reviewing this case would be assisted by:

- A reflective piece demonstrating further reflection on the incidents and her dishonesty;

- Evidence of private study or other remedial steps to strengthen practice;
- References from any employment, whether in a healthcare setting or otherwise, including testimonials as to Mrs Kemenes' honesty;
- Training in relation to safe drug administration and record keeping; and
- Engagement with the next review hearing.

This will be confirmed to Mrs Kemenes in writing.

That concludes this determination.