Nursing and Midwifery Council
Fitness to Practise Committee

Substantive Order Review Hearing
Monday, 21 September 2026

Virtual Hearing

Name of Registrant:	**Carline Reece**
NMC PIN:	96I3419E
Part(s) of the register:	Registered Nurse – Sub Part 1 RNA: Adult Nurse – August 1999
Relevant Location:	Newport
Type of case:	Misconduct
Panel members:	Rachel Cook (Chair, Lay member) Jane Colbourne (Registrant member) Keith Murray (Lay member)
Legal Assessor:	Gerard Coll
Hearings Coordinator:	Elizabeth Fagbo
Nursing and Midwifery Council:	Represented by Ben Edwards, Case Presenter
Mrs Reece:	Not present and unrepresented
Order being reviewed:	Conditions of practice order (12 months)
Fitness to practise:	Impaired
Outcome:	**Conditions of practice order (12 months) to come into effect on 29 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 Reece was not in attendance and that the Notice of Hearing had been sent to Mrs Reece's registered email address by secure email on 21 August 2026.

Mr Edwards, 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 Reece's right to attend, be represented and call evidence, as well as the panel's power to proceed in her absence.

In the light of all of the information available, the panel was satisfied that Mrs Reece 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 Reece

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

Mr Edwards referred the panel to and email from Mrs Reece dated 21 August 2026 which stated the following:

> *'… I am not attending the hearing in September. I am not going renew my registration fee and will not practice as a nurse in the future.*

As a result of the restrictions I lost my job as a nurse and as a consequence of this have not fulfilled my conditions to practice…'

The panel accepted the advice of the legal assessor.

The panel has decided to proceed in the absence of Mrs Reece. In reaching this decision, the panel has considered the submissions of Mr Edwards, the email from Mrs Reece dated 21 August 2026, and the advice of the legal assessor. It has had particular regard to the relevant case law and to the overall interests of justice and fairness to all parties. It noted that:

- In an email dated 21 August 2026 Mrs Reece informed her NMC case officer that she would not be attending this hearing and is content for the hearing to proceed in her absence;
- No application for an adjournment has been made by Mrs Reece;
- There is no reason to suppose that adjourning would secure her attendance at some future date; and
- There is a strong public interest in the expeditious review of the case.

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

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

During the hearing, the panel of its own volition decided, and Mr Edwards agreed that this case be held partly in private on the basis that proper exploration of the email dated 21 August 2026 involved references to Mrs Reece's sensitive and personal matters. The application was made pursuant to Rule 19 of the Rules.

The legal assessor reminded the panel that while Rule 19(1) provides, as a starting point, that hearings shall be conducted in public, Rule 19(3) states that the panel may hold hearings partly or wholly in private if it is satisfied that this is justified by the interests of any party or by the public interest.

The panel determined to go into private as and when such issues relating to Mrs Reece's personal circumstances are raised.

Decision and reasons on review of the substantive order

The panel decided to confirm the current conditions of practice order.

This order will come into effect at the end of 29 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 conditions of practice order originally imposed for a period of 12 months by a Fitness to Practise Committee panel on 30 September 2026.

The current order is due to expire at the end of 29 October 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, whilst employed at Royal Gwent Hospital:

1. On an unknown date, shouted at a visitor in a lift.

2. In relation to Colleague B:

a. Said to Colleague B 'you had better write nothing bad about me or I will give you rubbish off duty' or words to that effect when you became aware Colleague B was asked to make a statement about an incident you were involved in on an unknown date.

b. On an unknown date, shouted at Colleague B stating 'I am the Band 6 and you are the Band 3' or words to that effect.

3. On an unknown date, shouted at Colleague A on one or more occasion.

4. …

5. On an unknown date:

a. Responded 'are you dead' or words to that effect when a patient stated they did not feel very well.

b. Told the patient to 'well stop complaining then' or words to that effect when they responded to your question at charge 5(a) above.

6. When you were informed that a patient was asking when they were going for their operation, as they were hungry, you said 'he's not hungry, he's not in Africa, don't be bossy, you are not a nurse and if the plan changes, he will be told by a nurse' or words to that effect.

7. On an unknown date, when a patient made a request for food, said words to the effect of 'do you think you need that, the size of you'.

8. On unknown dates, told one or more patient that they were not starving, they were not in Africa, and/or to stop exaggerating or words to that effect.

9. Made comments about the appearance of one or more of your colleagues in that you said words to the effect of:

a. They were 'catfishes'

b. They looked lovely outside of work but not so good in work

c. They should wear makeup

10. In relation to Colleague C:

a. …

b. In response to Colleague C stating she was unable to work in the bay with patients with Covid-19 due to their health condition, said words to the effect of 'what is purpose of you being here' and/or 'what am I going to do with you'

11. On an unknown date, whilst on shift, said 'anybody piss me off and I will make their life hell, I mean this as I am not having it, as this is my ward and I'm not going anywhere' or words to that effect.

12. On one or more occasion, held your hand up in a stop gesture and/or walked away from one or more member of staff whilst they were attempting to talk to you.

13. …

14. On an unknown date, told Colleague D that you did not like them and/or did not want them to work on the ward or words to that effect.

15. Your behaviour at any or all of charges 1-14 was:

a. Intimidating and/or

b. …

c. Humiliating and/or

d. Unprofessional

16. On an unknown date, gave a patient's relative the wrong name when they asked for your name after you had an argument with them.

17. …

18. …

19. …

a. …

b. …

20. …

a. …

b. …

21. …

a. …

b. …

22. On dates unknown, did not provide support and/or training to one or more members of your team when requested in that you on one or more occasion:

a. Did not provide support to Colleague D when she asked for it as she progressed through the overseas programme.

b. …

c. …

23. …

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 satisfied that there is no evidence that your conduct caused harm to patients. However, it determined that it had the potential to put patients at unwarranted risk of harm. The panel was therefore satisfied that limb a of Grant is not engaged as to patients in the past but needs to be considered going forward. The panel determined that there is evidence that your behaviour did cause emotional harm to colleagues and limb a is engaged in relation to harm to colleagues in the past and needs to be considered going forward.

The panel determined that your misconduct constituted serious breaches of the fundamental tenets of the profession as you failed to uphold the standards and values of the nursing profession thereby bringing it into disrepute. The panel is therefore satisfied that limbs b and c of Grant were engaged in the past and need to be considered going forward.

The panel considered the factors set out in the case of Ronald Jack Cohen v General Medical Council [2008] EWHC 581 (Admin) and determined that the misconduct is such that it can be addressed. The panel had regard to the documentary and oral evidence you have provided and the submissions of Ms Boesche and Mr Ceasar in determining whether you have in fact addressed your misconduct.

The panel was of the view that given the nature of charges 3, 5(a), 5(b), 7, 8, and 15, the misconduct is remediable.

The panel took into account the testimonials you have provided in your witness statement bundle under '5. CONCLUSION: INSIGHT AND REFLECTIONS'.

One of the testimonials was provided by your current Home Manager dated 26 June 2023, who commented 'Carline is continuing to learn and improve

her nursing skills through reflection.' The panel noted the positive comments in this testimonial but also took into account that it does not indicate that your Home Manager was aware of the regulatory concerns at the time of writing and does not comment on the regulatory concerns under consideration.

A second testimonial was provided by a doctor dated 12 February 2025 who stated 'Nurse Reece in my experience has been providing care and compassionate care to her residents'. The panel noted that this doctor is not based in this nursing home but states 'I regularly attend the nursing home to see my patients and undertake a weekly ward round.' This referenced a test to you being caring and compassionate towards residents. However, there was no evidence that this doctor was aware of the regulatory concerns and it does not specifically address those concerns.

A third testimonial was provided by a student nurse dated February 2025 who stated that you 'approach situations with a calm demeanour' and that you exhibit 'a strong sense of teamwork … helping staff whenever she can'. Again, there was no evidence that this person was aware of the regulatory concerns. However, the testimonial does comment favourably on your approach, helpfulness towards staff and teamworking.

The panel took into account your reflection at the end of your witness statement, in which you stated: 'I strongly believe that my ability to practise safely and effectively has never been compromised.' The panel heard submissions from Mr Ceasar regarding some steps taken by you to address the concerns but the panel has no evidence from you in this regard. The panel was not provided with any evidence of the steps you have taken to address the concerns such as further training. The panel noted from your witness statement '… on times I may have been abrupt in manner, and I apologise for this.' Neither has the panel been provided with any evidence of how you might approach things differently going forward so as to mitigate the risk of repetition. The panel was therefore not reassured that you will

not repeat the conduct as you have not demonstrated any insight into the regulatory concerns.

In terms of harm to patients, the panel determined that your behaviour has the potential to put patients at risk of emotional harm. You made insensitive and unkind personal comments to vulnerable patients with no insight into the effect of such behaviour on those patients, no meaningful reflection on your behaviour and no real indication of remorse.

In light of all the above and your limited apology, the panel determined that a finding of current impairment is necessary on the grounds of public protection.

The panel bore in mind that the overarching objectives of the NMC; to protect, promote and maintain the health, safety, and well-being of the public and patients, and to uphold and protect the wider public interest. This includes promoting and maintaining public confidence in the nursing and midwifery professions and upholding the proper professional standards for members of those professions.

The panel next considered whether a finding of impairment on public interest grounds is required. The panel considered its findings on impairment on public protection grounds, the seriousness of your breaches of the Code and the need to uphold proper standards and behaviour of the nursing profession. It concluded that for these reasons, a finding of impairment is required on public interest grounds. It concluded that in light of the seriousness of your conduct, public confidence in the profession would be undermined if a finding of impairment were not made in this case. The panel also considered that a finding of impairment was required to uphold proper professional standards in the profession.

Therefore, the panel finds your fitness to practise impaired on the grounds of public interest.'

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 public protection issues identified and the risk of repetition of the misconduct. 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. However, due to the seriousness of the case, the public protection issues identified, the concerns around the risk of repetition of the misconduct, and the lack of insight and remediation, the panel was of the view that 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 there was a risk of repetition. Therefore, a caution order would be inappropriate in view of the issues identified. The panel decided that it would be neither proportionate nor in the public interest to impose a caution order.*
>
> *The panel next considered whether placing conditions of practice on your registration would be a sufficient and appropriate response. The panel is mindful that any conditions imposed must be proportionate, measurable and workable. The panel took into account the SG, in particular:*

- *No evidence of harmful deep-seated personality or attitudinal problems;*
- *No evidence of general incompetence;*
- *Patients will not be put in danger either directly or indirectly as a result of the conditions;*
- *The conditions will protect patients during the period they are in force; and*
- *Conditions can be created that can be monitored and assessed.*

The panel determined that it would be possible to formulate appropriate and practical conditions which would address the failings highlighted in this case.

The panel had regard to the fact that these incidents happened five years ago and that, since then no further incidents has been raised. In addition, you have been working as a registered nurse in the intervening period. Notwithstanding these factors, the panel considered the fact that you have provided limited testimonial evidence, limited reflection and no evidence of relevant training. The panel noted that the reference from your current manager is two years old and your insight into your failings is poor.

The panel was also of the view that conditions of practice order would allow you to continue working as an registered nurse and afford you the opportunity to take steps to address your failings, whilst protecting the public during the period the order is in force.

The panel was of the view that it was in the public interest that, with appropriate safeguards, you should be able to practise as a registered nurse, albeit with restrictions.

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

Having regard to the matters it has identified, the panel has concluded that a conditions of practice order would protect the public, will mark the importance of maintaining public confidence in the profession, and will send to the public and the profession a clear message about the standards of practice required of a registered nurse.

In making this decision, the panel carefully considered the sanction that the NMC was seeking in this case. The panel was of the view that though the

imposition of a suspension order or a striking-off order would protect the public, it would be wholly disproportionate and would not be a reasonable response in the circumstances of your case. The panel was therefore of the view that a suspension order or a striking off order would be punitive and go further than needed to meet the overarching objective of public protection.

The panel noted the potential negative effects a conditions of practice order may have on your career and the likely impact on your reputation. However, it also determined that public protection and public interest considerations outweigh your interests.

The panel determined that the following conditions are appropriate and proportionate in this case:

For the purposes of these conditions, 'employment' and 'work' mean any paid or unpaid post in a nursing, midwifery or nursing associate role. Also, 'course of study' and 'course' mean any course of educational study connected to nursing, midwifery or nursing associates.

1. *You must work with your supervisor or line manager to create a personal development plan (PDP).*

Your PDP must address the concerns about your interactions with patients, colleagues and visitors.

Your PDP should include completion of training which addresses:

- *Working collaboratively.*
- *Interpersonal skills.*
- *Effective communication.*
- *Understanding the importance of empathy.*

2. *You must meet with your supervisor or line manager as a minimum every 3 months to review your PDP and ensure that you are making progress towards aims set in your PDP.*

3. *You must keep a reflective practice profile on interactions with colleagues, patients and visitors.*

4. *You should meet with your supervisor or line manager every 3 months:*

    - *Discuss your reflections in your reflective practice profile on interactions with colleagues, patients and visitors.*
    - *Review any feedback from colleagues, patients and visitors on your behaviour.*

5. *Prior to the review of this order, you must send to your case officer copies of:*
    - *the PDP*
    - *reviews of the PDP undertaken*
    - *evidence of completed training*
    - *records of the supervision meetings held with your supervisor*

    These must be certified by your supervisor / line manager.

6. *You must keep the NMC informed about anywhere you are working by:*
    a) *Telling your case officer within seven days of accepting or leaving any employment.*
    b) *Giving your case officer your employer's contact details.*

7. *You must keep the NMC informed about anywhere you are studying by:*
    a) *Telling your case officer within seven days of accepting any course of study.*
    b) *Giving your case officer the name and contact details of the organisation offering that course of study.*

8. *You must immediately give a copy of these conditions to:*
    a) *Any organisation or person you work for.*
    b) *Any agency you apply to or are registered with for work.*

c) *Any employers you apply to for work (at the time of application).*
d) *Any establishment you apply to (at the time of application), or with which you are already enrolled, for a course of study.*
e) *Any current or prospective patients or clients you intend to see or care for on a private basis when you are working in a self-employed capacity*

9. *You must tell your case officer, within seven days of your becoming aware of:*
   a) *Any clinical incident you are involved in.*
   b) *Any investigation started against you.*
   c) *Any disciplinary proceedings taken against you.*

10. *You must allow your case officer to share, as necessary, details about your performance, your compliance with and / or progress under these conditions with:*
   a) *Any current or future employer.*
   b) *Any educational establishment.*
   c) *Any other person(s) involved in your retraining and/or supervision required by these conditions.*

The period of this order is for 12 months. The panel considered that 12 months is sufficient to mark the public interest in this case, as well as allowing you sufficient time to take steps to address the regulatory concerns.

Before the order expires, a panel will hold a review hearing to see how well you have complied with the order. At the review hearing the panel may revoke the order or any condition of it, it may confirm the order or vary any condition of it, or it may replace the order for another order.

Any future panel reviewing this case would be assisted by:

- *A reflective piece addressing the concerns identified in this determination using a framework such as The GIBBS reflective cycle.*
- *Your attendance at the future review of this order.*
- *Positive up to date testimonials from your employer.'*

Decision and reasons on current impairment

The panel has considered carefully whether Mrs Reece'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 the relevant NMC Guidance (REV-2a) Substantive order reviews last updated on 30 August 2024 and reminded itself that there is a persuasive burden on Mrs Reece at a substantive order review to demonstrate that she has fully acknowledged why her previous conduct was below the standards expected of a nurse and through insight, application, education, supervision or other achievements sufficiently addressed past impairment. 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. It has taken account of the submissions made by Mr Edwards on behalf of the NMC.

Mr Edwards outlined the background of the case and referred the panel to the relevant documents including the original panel's decision. He submitted that there is nothing before the panel to demonstrate that Mrs Reece has strengthened her practice in the intervening period or has engaged in any further training to address the concerns identified. Further, he submitted that there is also no information demonstrating Mrs Reece's compliance with the conditions of practise order.

Mr Edwards submitted that it is a matter for the panel to consider how much weight to attach to the contents in the email from Mrs Reece dated 21 August 2026, in which the following was stated:

> *'… I am not attending the hearing in September. I am not going renew my registration fee and will not practice as a nurse in the future.*
>
> *As a result of the restrictions I lost my job as a nurse and as a consequence of this have not fulfilled my conditions to practice.*
>
> *[PRIVATE].*
>
> *So please pass this onto the panel…'*

He submitted that the NMC is inviting the panel to consider that the circumstances outlined in the email of 21 August 2026 may be a valid reason as to why there are no up-to-date testimonials or further update on Mrs Reece's compliance with the conditions of practice order.

Mr Edwards submitted that the NMC invite the panel to find Mrs Reece's fitness to practise remains impaired as there is nothing before the panel to demonstrate strengthened practice or that she is able to practise safely and effectively at this time. He submitted that if the panel finds that Mrs Reece's fitness to practise remains impaired, then it should go on to consider the appropriate sanction to impose. He submitted that the type of sanction is a matter for the panel to consider.

The panel heard and accepted the advice of the legal assessor. He directed the panel to the guidance on impairment and sanction, and specifically the NMC guidance on allowing a substantive order to lapse.

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 Reece's fitness to practise remains impaired.

The panel noted that the original panel found that Mrs Reece's behaviour in the charges found proved had the potential to put patients at risk of emotional harm and that she had no insight into the effect of such behaviour on those patients, no meaningful reflection on her behaviour and no real indication of remorse. At this hearing the panel took into account that Mrs Reece is currently not practising as a nurse due to having lost her job following the imposition of the conditions of practice order. The panel had no evidence before it to suggest that Mrs Reece been able to comply with the conditions or address the concerns identified by the original panel.

The panel considered that the concerns identified in this case involved findings of the intimidating and/or humiliating and/or unprofessional behaviour by Mrs Reece to patients and colleagues. The panel noted that the original substantive panel had determined that there was a risk of repetition and potential risk of emotional harm towards patients and colleagues. This panel had received no evidence which would undermine this assessment. Therefore, in the absence of any evidence of developing insight or remediation, the panel determined that there remains a risk of repetition and that a finding of impairment remains 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 required.

The panel determined that the conduct found proved breached fundamental tenets of the nursing profession and involved important issues concerning intimidation, humiliation and/or unprofessional behaviour. In the absence of sufficient insight and remediation, the panel considered that public confidence in the profession and in the NMC as a regulator would be undermined if Mrs Reece were permitted to return to unrestricted practice.

The panel therefore determined that Mrs Reece's fitness to practise remains impaired on both public protection and public interest grounds.

Decision and reasons on sanction

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

The panel first considered whether to take no action but concluded that this would be inappropriate in view of the seriousness of the case, the public protection issues identified and the misconduct. 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 that an order that does not restrict Mrs Reece's 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, but the Committee wants to mark that what happened was unacceptable and must not happen again.'* The panel considered that Mrs Reece's misconduct was not at the lower end of the spectrum and that a caution order would be inappropriate in view of the issues identified. As referenced above, the misconduct involves intimidating and/or humiliating and/or unprofessional behaviour from Mrs Reece towards patients and colleagues The panel decided that it would be neither proportionate nor in the public interest to impose a caution order.

The panel next considered whether imposing a further conditions of practice order on Mrs Reece's registration would still be a sufficient and appropriate response. The panel is mindful that any conditions imposed must be proportionate, measurable and workable. The panel bore in mind the seriousness of the facts found proved by the original panel in September 2025.

It took into account, the email from Mrs Reece to the NMC dated 21 August 2026. Firstly, it noted that at the time the order was imposed Mrs Reece had been employed as a registered nurse. However, on 9 October 2025, she informed the NMC that she had lost

her job due to the conditions of practice order. The panel accepted that Mrs Reece had been subject to the conditions for 12 months but has not been able to comply with the conditions due to being unemployed and is therefore, not currently practising as a nurse.

Secondly, the panel also took into account the exceptionally tragic circumstances that Mrs Reece has faced, [PRIVATE]. The panel were of the view that this may have prevented her from actively seeking employment and complying with the current conditions of practice order. The panel were of the view that the concerns in this case were capable of remediation and returning to safe practice. In fairness, given Mrs Reece current circumstances, the panel considered that it was appropriate to allow Mrs Reece further opportunity to obtain employment and comply with the conditions of practice.

The panel determined that the current formulated conditions remain appropriate and practical conditions which would address the failings highlighted in this case.

The panel was of the view that a further conditions of practice order is sufficient to protect patients and the wider public interest, noting as the original panel did that there was no evidence of general incompetence, no deep seated attitudinal problems, and that the misconduct related to poor judgement rather than clinical competence. In this case, there are conditions that could be formulated which would protect patients during the period they are in force.

Taking into account the panel's view that it is possible that the misconduct highlighted in this case can be addressed by a conditions of practice order, that Mrs Reece unexpectedly lost her employment as a nurse in October 2025 and Mrs Reece's exceptional personal circumstances, the panel considered if fair and proportionate to impose a further conditions of practice order.

The panel considered a suspension order but was of the view that to impose a suspension order would be wholly disproportionate and would not be a reasonable response to the exceptional circumstances of Mrs Reece's situation.

The panel considered, in the context of Mrs Reece's exceptional personal circumstances, a conditions of practice order for a period of 12 months to be a reasonable period to

enable Mrs Reece to form a settled view in relation to her nursing career and, if appropriate, to apply for a nursing role and to demonstrate compliance with the conditions of practice order.

Accordingly, the panel determined, pursuant to Article 30(1)(c) to make a conditions of practice order for a period of 12 months, which will come into effect on the expiry of the current order, namely at the end of 29 October 2026. It decided to impose the following conditions which it considered are appropriate and proportionate in this case:

For the purposes of these conditions, 'employment' and 'work' mean any paid or unpaid post in a nursing, midwifery or nursing associate role. Also, 'course of study' and 'course' mean any course of educational study connected to nursing, midwifery or nursing associates.

1. You must work with your supervisor or line manager to create a personal development plan (PDP).

   Your PDP must address the concerns about your interactions with patients, colleagues and visitors. Your PDP should include completion of training which addresses:

   - Working collaboratively.
   - Interpersonal skills.
   - Effective communication.
   - Understanding the importance of empathy.

2. You must meet with your supervisor or line manager as a minimum every 3 months to review your PDP and ensure that you are making progress towards aims set in your PDP.

3. You must keep a reflective practice profile on interactions with colleagues, patients and visitors.

4. You should meet with your supervisor or line manager every 3 months:

- Discuss your reflections in your reflective practice profile on interactions with colleagues, patients and visitors.
- Review any feedback from colleagues, patients and visitors on your behaviour.

5. Prior to the review of this order, you must send to your case officer copies of:
    - the PDP
    - reviews of the PDP undertaken
    - evidence of completed training
    - records of the supervision meetings held with your supervisor

    These must be certified by your supervisor / line manager.

6. You must keep the NMC informed about anywhere you are working by:
    a. Telling your case officer within seven days of accepting or leaving any employment.
    b. Giving your case officer your employer's contact details.

7. You must keep the NMC informed about anywhere you are studying by:
    a. Telling your case officer within seven days of accepting any course of study.
    b. Giving your case officer the name and contact details of the organisation offering that course of study.

8. You must immediately give a copy of these conditions to:
    a. Any organisation or person you work for.
    b. Any agency you apply to or are registered with for work.
    c. Any employers you apply to for work (at the time of application).
    d. Any establishment you apply to (at the time of application), or with which you are already enrolled, for a course of study.
    e. Any current or prospective patients or clients you intend to see or care for on a private basis when you are working in a self-employed capacity

9. You must tell your case officer, within seven days of your becoming aware of:

a. Any clinical incident you are involved in.
b. Any investigation started against you.
c. Any disciplinary proceedings taken against you.

10. You must allow your case officer to share, as necessary, details about your performance, your compliance with and / or progress under these conditions with:
    a. Any current or future employer.
    b. Any educational establishment.
    c. Any other person(s) involved in your retraining and/or supervision required by these conditions.

The period of this order is for 12 months. The panel considered that 12 months is sufficient to allow Mrs Reece sufficient time to consider whether she wishes to continue with her nursing career. If so, this time will allow Mrs Reece to take the practical steps necessary to obtain employment and address the regulatory concerns.

This conditions of practice order will take effect upon the expiry of the current conditions of practice order, namely the end of 29 October 2026 in accordance with Article 30(1).

Before the end of the period of the order, a panel will hold a review hearing to see how well Mrs Reece has complied with the order. At the review hearing the panel may revoke the order or any condition of it, it may confirm the order or vary any condition of it, or it may replace the order for another order.

Any future panel reviewing this case would be assisted by:

- A reflective piece addressing the concerns identified in this determination using a framework such as The GIBBS reflective cycle.
- Your attendance at the future review of this order.
- Positive up to date testimonials from your employer.

This will be confirmed to Mrs Reece in writing.

That concludes this determination.