

# Concerns that pose a serious risk to people who use services and would be difficult to put right

Last Updated: 02/02/2021

In this guide

[Overview](#)

[When to refer these concerns to us](#)

---

## Overview

[Back to top](#)

A small number of concerns are so serious that it would be difficult for the nurse, midwife or nursing associate to put right the problems in their practice, the behaviours, or the aspect of their attitude which led to the incidents happening. These concerns may include:

- deliberate harm or prolonged neglect of people who use services
- exploiting people who use services for financial or personal gain, or engaging in relationships with patients in breach of guidance on clear sexual boundaries
- serious dishonesty, such as covering up mistakes, deliberately falsifying records, deliberately obstructing investigations, bullying colleagues who want to raise a concern, or otherwise engaging in activity that is intended to suppress openness about the safety of care
- deliberately using false qualifications or a false picture of employment history which hides patient safety incidents or restrictions on practice
- serious criminal activity, even when not related to care, such as sexual assault, child abuse, or using child pornography
- being directly responsible (such as through managing a service or setting) for exposing patients or people who use services to harm or neglect – especially where the evidence shows the individual put their own priorities, or those of the organisation they work for, before the safety and dignity of people who use services.

## When to refer these concerns to us

[Back to top](#)

This category of concerns should almost always be referred to us as soon as evidence emerges to support the concern, even if this is before your full investigation takes place.

An immediate referral allows us to consider whether an interim order is necessary. This would restrict or suspend the individual's practice while we carry out our investigation.

It's important to note that we can only seek an interim order if the person who makes the referral permits us to disclose the information we've received to the nurse, midwife or nursing associate who has been referred.

If we do put an interim order in place, we'll still need you to complete your investigation and share your findings with us.