

# Applying the agreed removal criteria to particular cases

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This section explains how we will consider removal applications in relation to different types of regulatory concerns.

## Health

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Removal is likely to be appropriate where there are concerns about a nurse, midwife, or nursing associate's [health](#), where:

- The regulatory concerns relate to a nurse, midwife, or nursing associate's long-term physical or mental health, and there are no unrelated conduct issues that are likely to result in the Fitness to Practise Committee making a striking-off order; and
- The nurse, midwife, or nursing associate confirms that they don't intend to continue practising and want to be removed from the NMC register. The public interest may be best served by granting a removal application, even if the nurse, midwife, or nursing associate expresses a desire to seek readmission in the future should their health improve;

Or

- The regulatory concerns relate to a nurse, midwife, or nursing associate's conduct or competence, but they wish to remove themselves from the register due to serious ill health. In these circumstances removal may be appropriate before a hearing starts.
- Their serious ill health will be considered as a factor in favour of granting removal, even though it may not be the cause of the concern with their practice.

If a nurse, midwife, or nursing associate is terminally ill, they may be unable to participate in the process. These cases may be better dealt with under our [cancellation of hearings process](#).

## Lack of competence or not having the necessary knowledge of English

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Agreed removal is likely to be appropriate when:

- The regulatory concern relates to [Lack of competence or not having the necessary knowledge of English](#).
- The nurse, midwife, or nursing associate has already stopped practising and doesn't intend to return to practice. Agreed removal is also likely to be appropriate in some circumstances where the nurse, midwife, or nursing associate intends to return to practise in another country where English language skills are not required, or at a time when they have improved their knowledge of English to the required standard.

## Convictions or determinations from another regulatory body

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Cases where the concerns relate to [convictions](#) or [determinations from another regulatory body](#) are less likely to be appropriate candidates for agreed removal if the seriousness of the conduct is fundamentally incompatible with being a registered professional.

## Misconduct

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Where allegations of misconduct are the main concern, a decision to agree removal will need to take into account the overall seriousness of the misconduct.

Where the misconduct is so serious that it's fundamentally incompatible with being a registered professional, the Assistant Registrar is unlikely to agree removal. The Assistant Registrar will take into account our [guidance on seriousness](#), (particularly our guidance on [concerns that are more difficult to put right](#)) as well as our [guidance on sanctions](#), when making their decision.

Agreed removal is unlikely to be appropriate where the concerns involve:

- Deliberately breaching the professional duty of candour by covering up when things have gone wrong, especially if it could cause harm to people receiving care;
- Dishonest conduct involving misuse of power, vulnerable victims, personal financial gain from a breach of trust, direct risk to people receiving care, premeditated, systematic or longstanding deception;
- Abusing their position as a registered nurse, midwife or nursing associate or other position of power to exploit, coerce or obtain a benefit;
- Serious discriminatory conduct such as racism, sexism, homophobia or any other types of discrimination;
- Sexual misconduct, violence or abuse;
- Serious criminal offences (including hate crimes, sexual offences and serious crimes against children or vulnerable people; - see guidance on [specified offences](#)) or crimes resulting in a sentence of imprisonment;
- Deliberately causing harm to people receiving care;
- Being directly responsible (such as through management of a service or setting) for exposing people receiving care to harm or neglect, especially where the evidence shows the nurse, midwife or nursing associate put their own priorities, or those of the organisation they work for, before their professional duty to ensure the safety and dignity of people receiving care;
- Widespread or sustained bullying (especially by senior leaders);
- Leading or fostering poor cultures that put people receiving care at risk of harm.

Where the misconduct is less serious, or could be addressed if the nurse, midwife, or nursing associate did not wish to stop practising, then the Assistant Registrar is more likely to agree to the removal.

## More than one type of concern

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If it's alleged that the nurse, midwife, or nursing associate's fitness to practise is impaired because of more than one type of concern, the Assistant Registrar will need to look at all of the concerns together and decide whether removal is appropriate.

An overall assessment of the seriousness of the concerns will be made, applying each of the relevant considerations above. If the case includes allegations which are likely to result in the Fitness to Practise Committee making a striking-off order, then the Assistant Registrar is unlikely to agree removal.