

Insight and strengthened practice

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Decision makers across our fitness to practise process will always need to consider the level of risk the nurse, midwife or nursing associate presents to members of the public, looking at the facts of the case.

Evidence of the nurse, midwife or nursing associate's insight and any steps they have taken to strengthen their practice will usually be central to deciding whether their fitness to practise is currently impaired. This is because whether fitness to practise is being considered at a final hearing, or at an earlier stage of our process, the events that led to the nurse, midwife or nursing associate being referred to us will usually have happened some time previously.

Before considering the nurse, midwife or nursing associate's insight and any steps they have taken to strengthen their practice, decision-makers should consider the context in which the incident occurred. This is because it may help them to understand what the concerns are with the nurse, midwife or nursing associate's fitness to practise and what sort of steps may be needed to address those concerns.

When assessing evidence of the nurse, midwife or nursing associate's insight and the steps they have taken to strengthen their practice, decision makers will need to take into account the following questions:

- [Can the concern be addressed?](#)
- [Has the concern been addressed?](#)
- [Is it highly unlikely that the conduct will be repeated?](#)

These factors are key points for decision makers to consider, but they are not a definitive test of whether a nurse, midwife or nursing associate's fitness to practise is currently impaired.