

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

**Substantive Order Review Meeting
Monday, 1 July 2024**

Virtual Meeting

Name of Registrant: Innocent Blessed Chirawu

NMC PIN 17B1800E

Part(s) of the register: Registered Nurse – Sub Part 1
Mental Health Nursing – March 2017

Relevant Location: Nottingham

Type of case: Misconduct

Panel members: Alan Greenwood (Chair, lay member)
Sharon Peat (Registrant member)
Robert Fish (Lay member)

Legal Assessor: Peter Jennings

Hearings Coordinator: Hanifah Choudhury

Order being reviewed: Conditions of practice order (9 months)

Fitness to practise: Impaired

Outcome: **Period of order reduced so as to expire on 2 July 2024 under Article 30 (2) and (4);
Suspension order (6 months) to come into effect on expiry of current order in accordance with Article 30 (1)**

Decision and reasons on service of Notice of Meeting

The panel noted that the Notice of Meeting had been sent to both Mr Chirawu's registered email address and another email address used by him on 28 May 2024.

The panel took into account that the Notice of Meeting provided details of the review and that the review meeting would be held no sooner than 1 July 2024 and inviting Mr Chirawu to provide any written evidence seven days before this date.

The panel accepted the advice of the legal assessor concerning the requirements for service of a Notice of Meeting.

In the light of all of the information available, the panel was satisfied that Mr Chirawu has been served with notice of this meeting in accordance with the requirements of Rules 11A and 34 of the Nursing and Midwifery Council (Fitness to Practise) Rules 2004 (as amended) (the Rules).

Decision and reasons on review of the current order

The panel decided to reduce the period of the conditions of practice order so as to end tomorrow, 2 July 2024, in accordance with Article 30(2) and (4) of the Nursing and Midwifery Order 2001 (as amended) (the Order). The panel then made a suspension order for a period of six months. This suspension order will come into effect on 2 July 2024 in accordance with Article 30(1).

This is the sixth review of a substantive conditions of practice order originally imposed for a period of 12 months by a Fitness to Practise Committee panel on 28 June 2021. The order was reviewed on 14 June 2022 when the order was extended for a further six months. The order was reviewed on 13 May 2022 when the order was extended for a further six months. The order was reviewed at a meeting on 23 May 2023 when the order was replaced with a suspension order for three months. The order was then reviewed on 12 July 2023 when the panel decided to extend the suspension order for a further three months. The order was last reviewed on 12 October 2023 when the order was replaced with a conditions of practice order for nine months.

The current order is due to expire at the end of 22 August 2024.

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 22 February 2019, whilst working as the sole nurse in charge of a night shift you:*
 - a) *did not administer a Morphine injection to Resident A as prescribed;*
 - b) *Upon being instructed by Colleague A to explain how you would prepare a Morphine injection and/or following review of Resident A's MAR chart you:*
 - i) *incorrectly selected a 5ml syringe to administer the Morphine injection;*
 - ii) *informed Colleague A that you would administer 2.5ml of Morphine to Resident A when the correct dosage was 0.25ml of Morphine;*
 - iii) *upon being informed by Colleague A that the correct dosage of Morphine was 0.25ml you continued to say that you "would administer 2.5ml of Morphine"; and*
 - c) *Lacked the competency to administer a Morphine injection on your own.*
2. *Between September 2018 and 22 February 2019, you did not inform the senior staff that you did not have the competency to administer Morphine injections on your own.*
3. *[...]*

4. *During a supervision meeting on 9 January 2019, you did not inform Colleague B that you required retraining in administering Morphine injections.*

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

The fifth reviewing panel determined the following with regard to impairment:

'The panel considered whether Mr Chirawu's fitness to practise remains impaired.

Today's panel considered the reflective piece before it. The panel considered it positive Mr Chirawu has re-engaged with the NMC. It determined that Mr Chirawu's reflective piece demonstrates developing insight as he has stated how he would do things differently should a similar situation arise in the future such as escalating matters. However, he does not address issues such as the impact of his actions on patients, their families, his colleagues, the public and the reputation of the nursing profession. Rather, Mr Chirawu's reflective piece focuses more upon the impact to himself and how he has been affected negatively by his experiences. Therefore, the panel was not satisfied that the reflective piece was comprehensive to reflect sufficient insight based on the recommendations made by the previous panel.

The panel noted that in his reflective piece Mr Chirawu has identified shortcomings in his practice and the need for these to be rectified. However, the panel was of the view that this does not reduce the risk of repetition materially, without proper recognition and insight into the impact of his misconduct, together with evidence of learning and relevant training. Thus, in light of this, this panel determined that Mr Chirawu is liable to repeat matters of the kind found proved. The panel 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, a finding of continuing impairment on public interest grounds is also required.

For these reasons, the panel finds that Mr Chirawu's fitness to practise remains impaired.'

The fifth reviewing panel determined the following with regard to sanction:

'Having found Mr Chirawu'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 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 Mr Chirawu'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 and the panel wishes to mark that the behaviour was unacceptable and must not happen again.' The panel considered that Mr Chirawu'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. The panel decided that it would be neither proportionate nor in the public interest to impose a caution order.

The panel considered substituting the current suspension order with a conditions of practice order. Despite the seriousness of Mr Chirawu's misconduct, he has started to re-engage with the proceedings since the last review through a reflective piece and there has been evidence produced to show that he has developed some insight

and stated, 'I am more than [sic] willing to learn everything you deem necessary for me to learn', thereby satisfying the panel that a less restrictive approach would now be appropriate.

The panel also noted that Mr Chirawu' in his reflective piece stated, 'Feel free to contact St Magnus hospital regarding every training I undertook while I was there,'. The panel was of the view that Mr Chirawu needs to understand that the persuasive burden is upon him to provide evidence of his current fitness to practise and it is not for the panel to undertake its own enquiries.

The panel therefore concluded that, although it was encouraged that Mr Chirawu has started to re-engage with the NMC, it is mindful of the length of time during which he has not engaged previously. The panel was of the view that Mr Chirawu needs to continue meaningful engagement with his regulator until the next review and take proper regard to his conditions of his practice, as well as the panel's recommendations. This will assist the next panel in its determination of his fitness to practise.

The panel was satisfied that it would be possible to formulate practicable and workable conditions that, if complied with, may lead to Mr Chirawu's unrestricted return to practice and would serve to protect the public and the reputation of the profession in the meantime.

The panel gave consideration as to whether a continuation of the current suspension order or a striking off order would be appropriate in this case but determined given Mr Chirawu's recent engagement with the fitness to practise process, these would be disproportionate in the circumstances.

The panel decided that the public would be suitably protected as would the reputation of the profession by the implementation of the following conditions of practice:

'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 not administer injections or calculate dosages unless directly supervised by another registered nurse until you are signed off as competent to do so by your line manager.*
2. *Before the next review, you must provide a reflective statement focussing on the charges found proved and in particular the impact of your actions on patients, colleagues and the wider public.*
3. *You must work with your line manager to create a personal development plan (PDP). Your PDP must address drug calculations and the administration of injections to a range of patients with different conditions. You must:*
 - a. *Send your NMC case officer a copy of your PDP within 4 weeks of obtaining employment.*
 - b. *Meet with your line manager at least every month to discuss your progress towards achieving the aims set out in your PDP.*
 - c. *Send your NMC case officer a report from your line manager 4 weeks before any review hearing. This report must address and confirm that the monthly meetings have occurred and show your progress towards achieving the aims set out in your PDP.*
4. *You must keep the NMC informed about anywhere you are working by:*
 - a. *Telling your NMC case officer within seven days of accepting or leaving any employment.*
 - b. *Giving your case officer your employer's contact details.*
5. *You must keep the NMC informed about anywhere you are studying by:*
 - a. *Telling your NMC case officer within seven days of accepting any course of study.*

b. Giving your NMC case officer the name and contact details of the organisation offering that course of study.

6. 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.*

7. You must tell your NMC 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.*

8. You must allow your NMC 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 nine months. In determining the length of time of the order the panel took into consideration that Mr. Chirawu is yet to secure employment and, given his recent re-engagement, would need to have time to demonstrate compliance with the conditions.

Before the end of the period of the order, a panel will hold a review hearing to assess Mr Chirawu's compliance 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:

- *Mr Chirawu's attendance at any future review hearings of this case;*
- *Evidence of any self-directed learning or training Mr Chirawu has undertaken;*
- *Information regarding Mr Chirawu's current employment; and*
- *Evidence of references or testimonials from any paid or unpaid work undertaken by Mr Chirawu.'*

Decision and reasons on current impairment

The panel has considered carefully whether Mr Chirawu's fitness to practise remains impaired. Whilst there is no statutory definition of fitness to practise, the NMC has defined fitness to practise as a registrant's suitability to remain on the register 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 has had regard to all of the documentation before it, including the NMC bundle.

The panel heard and accepted the advice of the legal assessor as to the principles that should govern its approach to the review of a substantive order.

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 noted that the last reviewing panel found that Mr Chirawu had developed some insight in respect of how he would do things differently should a similar situation arise. At this meeting the panel had no new information before it to suggest that Mr Chirawu had understood the potential impact of his actions on patients, their families, his colleagues, the public and the reputation of the nursing profession. The panel was of the view that, although it would take commitment, Mr Chirawu's conduct appears to be remediable but there has been no engagement from Mr Chirawu since the last hearing and no evidence of remediation put before today's panel.

The last reviewing panel determined that Mr Chirawu was liable to repeat matters of the kind found proved. Today's panel has received no information that showed Mr Chirawu had been taking steps to strengthen his practice and remediate the concerns found. Mr Chirawu had provided no evidence of education, training or development to suggest that he had taken steps to improve his practice. In light of this, this panel determined that Mr Chirawu is liable to repeat matters of the kind found proved. The panel 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 both to protect patients and also to meet 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.

For these reasons, the panel finds that Mr Chirawu's fitness to practise remains impaired.

Decision and reasons on sanction

Having found Mr Chirawu'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 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 Mr Chirawu'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 and the panel wishes to mark that the behaviour was unacceptable and must not happen again.'* The panel considered that Mr Chirawu'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. The panel decided that it would be neither proportionate nor in the public interest to impose a caution order.

The panel next considered the continuation of the current conditions of practice order. 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 the fact that he has not engaged with the NMC at all since the last hearing. The panel took into account the lack of engagement from Mr Chirawu in providing information on his compliance with his conditions of practice order and his failure to provide a further reflective piece as required by Condition 2. The panel was of the view that it is part of a nurse's professional responsibility to maintain engagement with the regulator. Mr Chirawu has failed to do so and has shown disregard for the NMC's regulatory process.

On this basis, the panel concluded that a conditions of practice order is no longer the appropriate order in this case and that a further period of conditions would not be adequate to maintain public confidence in the profession and its regulatory process, or to uphold standards.

The panel determined therefore that a suspension order is the appropriate sanction which would both protect the public and satisfy the wider public interest. Accordingly, the panel determined to impose a suspension order for the period of six months which would provide Mr Chirawu with an opportunity to engage with the NMC and provide evidence of

progression through completed training, learning and development and a reflective piece which follows a reflective model designed for healthcare practice. The panel considered this to be the most appropriate and proportionate sanction available.

Although the panel has found on this occasion that it would be disproportionate to strike off, it was mindful that future lack of engagement from Mr Chirawu may leave him at risk that the next reviewing panel will strike him off the register.

Accordingly, the period of the current conditions of practice order will be reduced under Article 30 (2) and (4) so that it expires tomorrow, 2 July 2024. The suspension order will then take effect on the expiry of the conditions of practice order 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 extend the order or make a different order to take effect on its expiry, or it may revoke the order or reduce its length, or it may replace the order with another order.

Any future panel reviewing this case would be assisted by:

- Mr Chirawu's attendance at the review hearing;
- Evidence of any self-directed learning or training Mr Chirawu has undertaken;
- Information regarding Mr Chirawu's current employment; and
- Evidence of references or testimonials from any paid or unpaid work undertaken by Mr Chirawu.
- A reflective piece from Mr Chirawu which follows a reflective model used in healthcare practice, as suggested above.

This will be confirmed to Mr Chirawu in writing.

That concludes this determination.