Nursing and Midwifery Council Fitness to Practise Committee

Substantive Order Review Hearing Thursday, 13 June 2024

Virtual Hearing Nursing and Midwifery Council

Name of Registrant:	Sophie Hussain
NMC PIN	14B0033E
Part(s) of the register:	Registered Nurse – Sub Part 1 Mental Health Nursing – 17 March 2014
Relevant Location:	Bradford
Type of case:	Misconduct
Panel members:	Michelle Lee (Chair, registrant member) Jacqueline Metcalfe (Registrant member) Oluremi Alabi (Lay member)
Legal Assessor:	Fiona Barnett
Hearings Coordinator:	Amira Ahmed
Nursing and Midwifery Council:	Represented by Lee Anyene, Case Presenter
Miss Hussain:	Present and not represented
Order being reviewed:	Suspension order (6 months)
Fitness to practise:	Impaired
Outcome:	Striking-Off order to come into effect at the end of 22 July 2024 in accordance with Article 30 (1)

Decision and reasons on review of the substantive order

The panel decided to replace the current suspension order with a striking off order.

This order will come into effect at the end of 22 July 2024 in accordance with Article 30(1) the 'Nursing and Midwifery Order 2001' (the Order).

This is the third review of a substantive suspension order originally imposed for a period of six months by a Fitness to Practise Committee on 23 June 2022. On 16 December 2022 this order was continued for a further 12 months. On 18 December 2023 a reviewing panel imposed a further suspension order for six months.

The current order is due to expire at the end of 22 July 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, whilst working at Steeton Court Nursing Home:

- 1. On 22 May 2019, failed to sign for the administration of Co-Beneldopa to an unknown resident in room 5;
- 2. On 23 May 2019, failed to sign for the administration of the following medication to unknown residents;
 - a. Co-Beneldopa to a resident in room 5;
 - b. Lorazepam to a resident in room 4;
 - c. Thick and easy to a resident in room 7;
 - d. Lactulose to a resident in room 17;

- 3. On 26 May 2019, failed to administer and/or sign for Calogen and Laxido to an unknown resident in room 40;
- 4. On 31 May 2019;
 - a. At 12:00, failed to sign for any of the medication administered to residents;
 - b. At 18:00, failed to sign for the administration of Flucloxacillin to an unknown resident in room 41;
- 5. On 12 June 2019;
 - a. [NOT PROVED]
 - b. Failed to administer Risperidone to an unknown resident in room 18;
- 6. On 22 June 2019, failed to sign for the administration of;
 - a. Thick and easy to Resident A;
 - b. Paracetamol and Lofepramine to Resident F;
- 7. On 9 July 2019, failed to administer a BuTrans pain-relief patch to Resident B;
- 8. On 17 July 2019;
 - a. Left quetiapine, sodium valproate, and a vitamin tablet, the prescribed medication for Resident C, unattended in the presence of Resident C and Resident D;
 - b. Failed to observe Resident C taking said medication;

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

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

'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 your fitness to practise remains impaired.

The panel noted that the last reviewing panel found that you had insufficient insight. At this hearing the panel found it positive that you have started engaging with the NMC. The panel noted your reflective statement, but determined that this was not developed enough to show sufficient insight into your actions and their potential impact. The panel determined that you are at the early stages of developing insight.

In its consideration of whether you have taken steps to strengthen your practice, the panel took into account your evidence that you are keeping up to date through reading. Whilst the panel determined that this is important, it determined that there is no written evidence before it to demonstrate how you have done this and to determine any other ways that you have strengthened your practice. It accepted that this would be hard to do whilst being subject to a suspension order but noted that reviews of some of the reading you have done would have been helpful and any testimonials or references from your previous employer in the healthcare sector or from your role as a support worker would have been beneficial together with any evidence of training undertaken.

The last reviewing panel determined that you were liable to repeat matters of the kind found proved. Today's panel has heard no new information to undermine this. In light of this, this panel determined that you are still 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 your fitness to practise remains impaired.'

The second reviewing 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 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 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 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 whether a 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 bore in mind the seriousness of the facts found proved at the original hearing and concluded that a conditions of practice order would not adequately protect the public or satisfy the public interest. Whilst the panel determined that your attendance at today's hearing is positive and that you are beginning to develop insight into your actions, it determined that the conditions that would be needed to ensure your safe practice would be extremely rigorous and potentially unworkable. The panel therefore could not be satisfied that a conditions of practice order would adequately protect the public at this time. The panel considered the imposition of a further period of suspension. It was of the view that a suspension order would allow you further time to fully reflect on your previous failings. The panel concluded that a further 6 months suspension order would be the appropriate and proportionate response and would afford you adequate time to further develop your insight and take steps to strengthen their practice. It would also give you an opportunity to approach past and current health colleagues to attest to your honesty and integrity in your workplace assignments since the substantive hearing and would allow you time to demonstrate a good steady work record with your new employer. It considered this to be the most appropriate and proportionate sanction available.

This suspension order will take effect upon the expiry of the current suspension order, namely the end of 22 January 2024 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 revoke the order, or it may confirm the order, or it may replace the order with another order.

Any future panel reviewing this case would be assisted by:

- Continued engagement with the NMC;
- Testimonials from your current employer;
- An up-to-date reflective piece using a recognised model such as Gibbs demonstrating your understanding of the impact of your misconduct on patients, the profession and the wider public;
- Evidence of keeping yourself up to date within the nursing profession;
- Evidence of any training undertaken in your current and past roles since the substantive hearing;'

Decision and reasons on current impairment

The panel has considered carefully whether your fitness to practise remains impaired. Whilst there is no statutory definition of fitness to practise, the NMC say, in the guidance ref DMA-1, that the question that will help decide whether a professional's fitness to practise is impaired is: *"can the nurse, midwife or nursing associate practise kindly, safely and professionally?"* 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. It has taken account of the submissions made by Mr Anyene on behalf of the NMC and the oral evidence provided by you.

Mr Anyene outlined the background to the case.

The panel had regard to your oral evidence. You informed the panel that you are currently working as a Senior Carer. You explained that your current role entails administering medication to patients whilst supervised by a registered nurse. You explained that you have undertaken a medication administration course online. You told the panel that as a prerequisite to the training course you had to undertake basic Maths and English examinations. You explained that the online training course covered how to calculate dosage, dispense, document and safely administer medication.

You told the panel that your future plans are to return to psychiatric nursing. You said that you fully accept that your actions which led to your suspension order were wrong and explained that you were on probation and did not feel supported at the time of the events. You explained that the impact of your actions could have been detrimental to patients at the time. In response to questions from the panel regarding what support you would need in returning to nursing you explained that the support you would need would be like a preceptorship programme where medication administration is supervised and you would need to be signed off as competent before you could undertake medication administration as a sole nurse.

Mr Anyene submitted that there remains a risk of repetition of the facts found proved, and that you have shown a lack of full insight. He submitted that you remain currently impaired on public protection and public interest grounds. He submitted that there is insufficient evidence before the panel of your strengthened clinical practice. He submitted that little

weight should be placed on the medication administration course you have said you have undertaken as you have not provided any evidence of it.

Mr Anyene submitted that it has been nearly two years since the imposition of your first suspension order and you have still been unable to show detailed evidence of strengthening your practice and or any real insight into your failings. Whilst Mr Anyene submitted that the NMC were not inviting the panel to strike you off the NMC register, he did not suggest any particular appropriate sanction and submitted that it is a matter for the panel to decide which sanction to impose.

You submitted that you would like to be allowed back to nursing albeit with support.

The panel heard and accepted the advice of the legal assessor.

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 your fitness to practise remains impaired.

At this hearing the panel noted that you have engaged with the proceedings, you gave oral evidence and have answered all questions under cross examination as well as the questions put to you by the panel. The panel took account of the training course in medication administration that you have said you have undertaken but it has received no documentary evidence or evidence of how you applied it to address the misconduct found. It noted that you are still unable to articulate why you did the actions that led to your original suspension order.

The panel noted that you have said your role as a Senior Carer has been helping you in keeping your practice up to date, but the panel has had no evidence of this role such as an offer letter detailing what the role entails. It also noted that as suggested by the previous panel you have not provided any testimonials, reflective piece or written evidence. Whilst recognising the training certificate from the course you have undertaken is not yet

available, it would have been helpful to have some documentary evidence such as an outline and scope of the course.

You stated to the panel that you did not supply a reference from your line manager because you have not informed them of your current suspension order. Recognising that you said you declared your suspension order on your application form the panel were concerned that you did not share this information with your immediate line manager as you thought it was a confidential matter. The panel gave little weight to your explanation that you had been told by a previous employer not to share information about the suspension order with future colleagues. The panel were of the view that this would not have included your direct line manager who could have positively supported your development and your attempts to strengthen your practice.

The panel noted that the previous panel gave you specific areas for you to cover in a reflective piece, but you have not provided a reflective piece. The panel gave you a further opportunity to explain what might be contributing to your misconduct. However, you were unable to provide the panel with any explanation as to what led to the misconduct or a cogent explanation as to why you have not properly grasped the detail of the findings made against you and what you need to do to put them right. The panel determined that you have shown a real lack of insight into your failings.

It was a matter of significant concern for the panel that there has been previous fitness to practice cases against you for similar matters and yet the misconduct in this case occurred within a few months of you returning to unrestricted practice. This is a third review of the suspension order, but you have not yet provided any independent evidence of remediation, any written reflection, or any evidence that you have been keeping up to date with nursing practice. There was no evidence before the panel that you have engaged in any meaningful way with the process of strengthening your practice or engaged with the recommendations of previous panels who have tried to guide you as to how you can demonstrate better practice. Overall, for these reasons the panel concluded that there was a significantly high risk of repetition and 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 your fitness to practise remains impaired.

Decision and reasons on sanction

Having found your 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 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 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 whether a conditions of practice order 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 bore in mind the seriousness of the facts found proved at the original hearing and concluded that a conditions of practice order would not adequately protect the public or satisfy the public interest. Due to your continuing lack of insight and the absence of any independent evidence to demonstrate your improved practice, the panel had no confidence that even stringent conditions would be sufficient to protect the public.

The panel next considered imposing a further suspension order. The panel noted that you have not demonstrated any real insight into your previous failings. It noted that you are currently working in a clinical setting and say you have undertaken a training course in medication administration. However, you have not shown any evidence of this to the panel, for example, confirmation of your course application or evidence of the course modules. The panel was of the view that considerable evidence would be required to show that you no longer posed a risk to the public. This was the third review hearing and given the absence of any cogent evidence of insight and remediation throughout these proceedings, the panel now had no confidence that this will be forthcoming. Its view was that although you show an enthusiasm for nursing and wish to return to practice, you have not grasped the seriousness of the misconduct and the responsibility which falls on you to properly demonstrate that you have remediated it. The panel therefore determined that a further period of suspension would not serve any useful purpose in all the circumstances.

The panel therefore considered a striking off order. It determined that a fully informed member of the public would be concerned if your name were to remain on the nursing register given that there has been repeat fitness to practise findings against you and that ongoing suspensions in these proceedings have not resulted in you being able to demonstrate that you are fit to practise as a registered nurse even with restrictions. The panel was particularly concerned about your failure to assume responsibility for strengthening your practice despite the passage of time.

The panel therefore concluded that in view of the concerns raised above the only appropriate and proportionate sanction that would adequately protect the public and serve the public interest was a striking-off order.

This striking-off order will take effect upon the expiry of the current suspension order, namely the end of 22 July 2024 in accordance with Article 30(1).

This decision will be confirmed to you in writing.

That concludes this determination.