

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

**Substantive Order Review Hearing**

**Monday 3 June 2024**

Virtual Hearing

**Name of registrant:** Stephen Ward

**NMC PIN:** 06I0195E

**Part(s) of the register:** Registered Nurse – Sub Part 1  
Adult Nursing (21 September 2006)  
  
Nurse independent/supplementary prescriber (30  
September 2015)

**Relevant Location:** Newry, Mourne and Down

**Type of case:** Conviction

**Panel members:** Linda Owen (Chair, Lay member)  
Sara Morgan (Registrant member)  
Oluremi Alabi (Lay member)

**Legal Assessor:** Sean Hamond

**Hearings Coordinator:** Monsur Ali

**Nursing and Midwifery Council:** Represented by Holly Girven, Case Presenter

**Mr Ward:** Not present and not represented at the hearing

**Order being reviewed:** Suspension order (9 months)

**Fitness to practise:** Impaired

**Outcome:** **Suspension order (6 months) to come into  
effect at the end of 12 July 2024 in accordance  
with Article 30 (1)**

## **Decision and reasons on service of Notice of Hearing**

The panel was informed at the start of this hearing that Mr Ward was not in attendance and that the Notice of Hearing had been sent to Mr Ward's registered email address on 16 April 2024. It was also sent to Mr Ward's Royal College of Nursing (RCN) representative on the same day.

Ms Girven, on behalf of the Nursing and Midwifery Council (NMC), submitted that it had complied with the requirements of Rules 11 and 34 of the 'Nursing and Midwifery Council (Fitness to Practise) Rules 2004', as amended (the Rules).

The panel accepted the advice of the legal assessor.

The panel took into account that the Notice of Hearing provided details of the substantive order being reviewed, the time, date, and venue of the hearing and, amongst other things, information about Mr Ward's right to attend, be represented and call evidence, as well as the panel's power to proceed in his absence.

In the light of all of the information available, the panel was satisfied that Mr Ward has been served with notice of this hearing in accordance with the requirements of Rules 11 and 34.

## **Decision and reasons on proceeding in the absence of Mr Ward**

The panel next considered whether it should proceed in the absence of Mr Ward. It had regard to Rule 21 and heard the submissions of Ms Girven who invited the panel to continue in the absence of Mr Ward.

Ms Girven submitted that Mr Ward had voluntarily absented himself. In support of this submission, she referred the panel to the RCN letter dated 30 May 2024 which states:

*'The Registrant will not be attending the hearing, nor will they be represented. No disrespect is intended by their non-attendance. The Registrant has received the*

*notice of hearing and is happy for the hearing to proceed in their absence. The Registrant remains keen to engage with the proceedings.'*

The panel accepted the advice of the legal assessor.

The panel noted that its discretionary power to proceed in the absence of a registrant under the provisions of Rule 21 is not absolute and is one that should be exercised '*with the utmost care and caution*' as referred to in the case of *R v Jones (Anthony William)* (No.2) [2002] UKHL 5.

The panel has decided to proceed in the absence of Mr Ward. In reaching this decision, the panel has considered the submissions of Ms Girven and the advice of the legal assessor. It had particular regard to the factors set out in the decision of *R v Jones* and *General Medical Council v Adeogba* [2016] EWCA Civ 162 and had regard to the overall interests of justice and fairness to all parties. It noted that:

- No application for an adjournment has been made by Mr Ward;
- Mr Ward has informed the NMC via his legal representative that he does not wish to attend the hearing today;
- There is no reason to suppose that adjourning would secure his attendance at some future date;
- There is a strong public interest in the expeditious review of the case.

In these circumstances, the panel has decided that it is fair, appropriate and proportionate to proceed in the absence of Mr Ward.

### **Decision and reasons on application for hearing to be held in private**

Ms Girven made an application that this case be held partly in private on the basis that proper exploration of Mr Ward's case involves reference to his health circumstances. The application was made pursuant to Rule 19.

Ms Girven submitted that it is a matter for the panel to decide whether to hold the entirety of the hearing or parts of the hearing in private.

The panel noted that this was supported by the written representations submitted on behalf of Mr Ward.

The legal assessor reminded the panel that while Rule 19(1) provides, as a starting point, that hearings shall be conducted in public, Rule 19(3) states that the panel may hold hearings partly or wholly in private if it is satisfied that this is justified by the interests of any party or by the public interest.

The panel decided to hold parts of this hearing in private where matters relating to Mr Ward's health are raised. This is to preserve his privacy.

### **Decision and reasons on review of the substantive order**

The panel decided to extend the current suspension order for a period of further six months.

This order will come into effect at the end of 12 July 2024 in accordance with Article 30(1) of the 'Nursing and Midwifery Order 2001' (the Order).

This is the second review of a substantive suspension order originally imposed for a period of 12 months by a Fitness to Practise Committee panel on 14 September 2022. The order was last reviewed on 1 September 2023 and that reviewing panel decided to extend the suspension order for a period of nine months.

The current order is due to expire at the end of 12 July 2024.

The panel is reviewing the order pursuant to Article 30(1) of the Order.

The charges found proved by way of admission which resulted in the imposition of the substantive order were as follows:

*'That you being a registered nurse were convicted on the 20th September 2021 at Newry Crown Court of the following offences, namely that you*

1. *On the 5th March 2019 stole medicines to the value of £299.30 or thereabouts belonging to Gordons Chemists contrary to s. 1 of the Theft Act (Northern Ireland) 1969.*
2. *On the 5th day of March 2019, unlawfully had in your possession a controlled drug of Class B of Schedule 2 of the Misuse of Drugs Act 1971, namely codeine phosphate in contravention of section 5 (1) of the Misuse of Drugs Act 1971 contrary to section 5 (2) of the Misuse of Drugs Act 1971.*
3. *On the 5th day of March 2019, unlawfully had in your possession a controlled drug of Class C of Schedule 2 of the Misuse of Drugs Act 1971, namely diazepam in contravention of section 5 (1) of the Misuse of Drugs Act 1971 contrary to section 5 (2) of the Misuse of Drugs Act 1971.*
4. *On the 3rd May 2019, stole medicines of an unknown value belonging to McNally's Pharmacy contrary to s. 1 of the Theft Act (Northern Ireland) 1969.*
5. *On the 3rd May 2019 unlawfully had in your possession, a controlled drug of Class B of Schedule 2 of the Misuse of Drugs Act 1971, namely codeine phosphate in contravention of section 5 (1) of the Misuse of Drugs Act 1971 contrary to section 5 (2) of the Misuse of Drugs Act 1971.*
6. *On the 9th day of May 2019, stole medicines to the value of £277.25 or thereabouts belonging to McNally's Pharmacy contrary to s. 1 of the Theft Act (Northern Ireland) 1969.*
7. *On the 9th May 2019, unlawfully had in your possession, a controlled drug of Class A of Schedule 2 of the Misuse of Drugs Act 1971, namely morphine sulphate in contravention of section 5 (1) of the Misuse of Drugs Act 1971 contrary to section 5 (2) of the Misuse of Drugs Act 1971.*
8. *On the 9th day of May 2019, unlawfully had in your possession, a controlled drug of Class C of Schedule 2 of the Misuse of Drugs Act 1971,*

*namely diazepam in contravention of section 5 (1) of the Misuse of Drugs Act 1971 contrary to section 5 (2) of the Misuse of Drugs Act 1971.*

*9. On the 9th day of May 2019, unlawfully had in your possession, a controlled drug of Class C of Schedule 2 of the Misuse of Drugs Act 1971, namely tramadol in 16 contravention of section 5 (1) of the Misuse of Drugs Act 1971 contrary to section 5 (2) of the Misuse of Drugs Act 1971.*

*10. Between the 14th day of May 2019 and the 21st day of May 2019, , stole medicines to the value of £155.03 or thereabouts belonging to Meigh Pharmacy contrary to s. 1 of the Theft Act (Northern Ireland) 1969.*

*11. On the 17th day of May 2019 unlawfully had in your possession, a controlled drug of Class A of Schedule 2 of the Misuse of Drugs Act 1971, namely diamorphine in contravention of section 5 (1) of the Misuse of Drugs Act 1971 contrary to section 5 (2) of the Misuse of Drugs Act 1971.*

*12. On the 17th day of May 2019, unlawfully had in your possession, a controlled drug of Class B of Schedule 2 of the Misuse of Drugs Act 1971, namely codeine in contravention of section 5 (1) of the Misuse of Drugs Act 1971 contrary to section 5 (2) of the Misuse of Drugs Act 1971.*

*13. On the 20th day of May 2019, unlawfully had in your possession, a controlled drug of Class C of Schedule 2 of the Misuse of Drugs Act 1971, namely diazepam in contravention of section 5 (1) of the Misuse of Drugs Act 1971 contrary to section 5 (2) of the Misuse of Drugs Act 1971.*

*14. On the 28th May 2019, stole medicines of an unknown value belonging to McNally's Pharmacy contrary to s. 1 of the Theft Act (Northern Ireland) 1969. And in the light of these convictions, your fitness to practise is impaired.'*

The original panel determined the following with regard to impairment:

*'In this regard the panel considered the judgment of Mrs Justice Cox in the case of CHRE v NMC and Grant in reaching its decision. In paragraph 74, she said:*

*'In determining whether a practitioner's fitness to practise is impaired by reason of misconduct, the relevant panel should generally consider not only whether the practitioner continues to present a risk to members of the public in his or her current role, but also whether the need to uphold proper professional standards and public confidence in the profession would be undermined if a finding of impairment were not made in the particular circumstances.'*

*In paragraph 76, Mrs Justice Cox referred to Dame Janet Smith's "test" which reads as follows:*

*'Do our findings of fact in respect of the doctor's misconduct, deficient professional performance, adverse health, conviction, caution or determination show that his/her/their fitness to practise is impaired in the sense that S/He/They:*

*a) has in the past acted and/or is liable in the future to act so as to put a patient or patients at unwarranted risk of harm; and/or'*

*b) has in the past brought and/or is liable in the future to bring the medical profession into disrepute; and/or*

*c) has in the past breached and/or is liable in the future to breach one of the fundamental tenets of the medical profession; and/or*

*d) has in the past acted dishonestly and/or is liable to act dishonestly in the future.'*

*The panel did not identify any evidence that the actions leading to your conviction resulted in patient harm. However, it determined that your conduct has breached*

*the fundamental tenets of the nursing profession and therefore brought its reputation into disrepute. The panel was satisfied that confidence in the nursing profession would be undermined if its regulator did not find charges relating to a conviction and dishonesty extremely serious.*

*The panel considered that you have developing insight into your actions and it noted that you have apologised to the GP practice where the charges arose. The panel noted that you have been engaging with the NMC process and have provided evidence of good testimonials which speak highly of your clinical skills. The panel also took into account your detailed reflective piece in which you cite the NMC code of conduct.*

*The panel is of the view that when considering whether there is a risk of repetition it must take account of the fact that your Probation Order imposed in November 2021 is for a duration of three years, and you still have more than two thirds of it to serve. [PRIVATE] The panel therefore decided that a finding of impairment is necessary on the grounds of public protection.*

*The panel has found that the actions leading to your convictions represented breaches of the Code, as submitted by Mr Edwards. The panel took these breaches into account when considering impairment.*

*The panel bore in mind that the overarching objectives of the NMC are to protect, promote and maintain the health, safety and well-being of the public and patients, and to uphold/protect the wider public interest, which includes promoting and maintaining public confidence in the nursing and midwifery professions and upholding the proper professional standards for members of those professions. The panel therefore determined that, in this case, a finding of impairment on public interest grounds was also required.*

*Having regard to all of the above, the panel was satisfied that your fitness to practise is currently impaired.'*

The original panel determined the following with regard to sanction:



*'Having found your fitness to practise currently impaired, the panel went on to consider what sanction, if any, it should impose in this case. The panel has borne in mind that any sanction imposed must be appropriate and proportionate and, although not intended to be punitive in its effect, may have such consequences. The panel had careful regard to the SG. The decision on sanction is a matter for the panel independently exercising its own judgement.*

*The panel took into account the following aggravating features:*

- *Your abuse of your position as a nurse prescriber*
- *Multiple incidents over a period of time*
- *There was an element of premeditation to your actions.*

*The panel also took into account the following mitigating features:'*

- *The detailed positive testimonials*
- *[PRIVATE]*
- *Your proactive nature in getting volunteer work and gaining a senior position.*
- *Your detailed reflective piece*
- *Your written apology to the GP of the practice where the charges arose.*

*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 panel next considered whether placing 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 is of the view that there are no practical or workable conditions that could be formulated, given the nature of the charges in this case. The panel determined that your conviction was not something that can be addressed through retraining.*

*Furthermore, the panel concluded that the placing of conditions on your registration would not adequately address the seriousness of this case and would not protect the public or meet the wider public interest.*

*The panel then went on to consider whether a suspension order would be an appropriate sanction. The SG states that suspension order may be appropriate where some of the following factors are apparent:*

- No evidence of harmful deep-seated personality or attitudinal problems;*
- No evidence of repetition of behaviour since the incident;*

*The panel was satisfied that in this case, your actions were not fundamentally incompatible with remaining on the register. The panel noted that you are a skilled practitioner and determined that there is a public interest in returning a nurse with this level of experience to the profession.*

*It did go on to consider whether a striking-off order would be proportionate but, taking account of all the information before it, and of the mitigation provided, the panel concluded that it would be disproportionate. Whilst the panel acknowledges that a suspension may have a punitive effect, it would be unduly punitive in your case to impose a striking-off order.*

*Balancing all of these factors the panel has concluded that a suspension order would be the appropriate and proportionate sanction.*

*The panel noted the hardship such an order will inevitably cause you. However, this is outweighed by the public interest in this case. The panel considered that this order is necessary to mark the importance of maintaining public confidence in the profession, and to send to the public and the profession a clear message about the standard of behaviour required of a registered nurse.*

*In making this decision, the panel carefully considered the submissions of Mr Edwards in relation to the sanction that the NMC was seeking in this case. However, the panel considered that in light of your engagement and proactive steps to remediate any concerns, a striking off order in this case would be disproportionate.*

*The panel determined that a suspension order for a period of 12 months was appropriate to mark the seriousness identified in this case.*

*At 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:*

- Evidence of further developed insight*
- Testimonials from paid or unpaid work*
- Continued engagement*
- [PRIVATE]*

## **Decision and reasons on current impairment**

This panel has considered carefully whether Mr Ward'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, this panel has carried out a comprehensive review of the order in light of the current circumstances. Whilst it has noted the decision of the panel that

originally imposed the substantive order and the decision of the last reviewing panel, this panel has exercised its own judgement as to current impairment.

This panel has had regard to all of the documentation before it, including the NMC bundle, responses from Mr Ward via his RCN representative. It has taken account of the submissions made by Ms Girven on behalf of the NMC. She provided this panel with the summary of the facts of the allegations and the chronology of the case to date.

Ms Girven submitted that Mr Ward remains currently impaired on the grounds of public protection and also otherwise in the wider public interest. She said Mr Ward has provided a further reflection and completed some further training, although a number of those training certificates predate even the substantive hearing or the last review. However, there are a few that are newer and postdate that date.

Ms Girven stated that the last panel made a number of suggestions for documents that it considered would be helpful. [PRIVATE], and there is no reason given for why that has not been possible. Further, there are no references from Mr Ward's employers or colleagues either. It seems from his reflection that Mr Ward is volunteering and it is unclear why testimonials from his current colleagues and/or employers have not been obtained. She said that there is also the reflective statement, but that does not specifically address this issue.

[PRIVATE]

Ms Girven submitted that there is currently a risk of repetition and that the panel cannot be satisfied that the conduct has been remediated fully. She therefore invited the panel to make a finding of impairment in public protection grounds. She also submitted that a finding of impairment is necessary in the wider public interest due to the seriousness of the concerns and the ongoing risks. Further, it is necessary to maintain public confidence in the nursing profession, and in the NMC as its regulator.

Ms Girven submitted that the appropriate order is to extend the current suspension order, and it is a matter for the panel as to how long. She reminded the panel that the RCN representative suggests a six months further extension. That would mean it would be

reviewed in late November or early December 2024. However, Mr Ward's Criminal Court probation order expires in November 2024. She said it may be that a seven month suspension order might give a little bit more leeway.

Ms Girven submitted that whilst the Criminal Court probation order is ongoing and due to the nature of the offences, Mr Ward should not be permitted to practise until that probation order is satisfactorily completed, which is currently due to be November 2024. Ms Girven submitted that the appropriate order in this case is a suspension order that will protect the public and maintain public confidence in the profession which will allow Mr Ward further time to develop his insight and address the concerns.

The panel had sight of the written submissions it received from the RCN on behalf of Mr Ward which states:

*'We set out below the Registrant's representations and ask that this letter be placed before the Panel at the hearing.'*

*[PRIVATE]*

*The Registrant has also drafted a statement reflecting on his volunteering and professional development undertaken, as well as re-confirming his commitment to nursing when circumstances allow. This has been enclosed with these submissions for the Panel's consideration.*

*We have also enclosed 12 training certificates, demonstrating the Registrant's continued interest in maintaining his nursing knowledge and practice.*

*In light of the fact that the Registrant remains under a court order until November 2024, we respectfully invite the Panel to extend the Registrant's substantive suspension order for a period of six months as that the Registrant. The Registrant is aware of his right to request an early review of the substantive order and will avail himself of the opportunity when there is a change to his substantive position, namely upon the lapse of the court order.'*

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 Mr Ward's fitness to practise remains impaired.

The panel was of the view that Mr Ward has developed some insight into his conduct and has taken some steps to remediate the concerns. Further, he has continued to be compliant with the process and engaged with the NMC. However, the panel determined that there is insufficient evidence before it which demonstrates Mr Ward had progressed significantly since the findings of the previous panel, other than the updated reflective statement from him. The panel noted the Continuing Professional Development (CPD) training Mr Ward has undergone, however, in the panel's judgment this has not addressed the fundamental concerns that were found proved.

The panel has not seen any testimonials from Mr Ward's colleagues [PRIVATE].

The panel also noted that Mr Ward has not reflected on the impact of his dishonesty on the reputation of the nursing profession, upon his colleagues and the public. The panel determined that as Mr Ward has not taken the advantage of the four recommendations provided by the previous panel to demonstrate that he is no longer impaired, it concluded that in the absence of such evidence, there remains a risk of repetition and the panel was therefore satisfied that Mr Ward's fitness to practise remains impaired on the grounds of public protection.

The panel noted that there are two references that appear within the papers to an intention to have Mr Ward's Criminal Court order reduced. Nonetheless, it would appear that neither applications have ever been pursued or ever been granted. Therefore, the panel had no evidence that Mr Ward has satisfactorily completed the order imposed by the Criminal Court.

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 Ward's fitness to practise remains impaired.

### **Decision and reasons on sanction**

Having found Mr Ward's fitness to practise remains 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 and in the absence of evidence to demonstrate Mr Ward has taken steps to address the concerns or to strengthen his practice. The panel decided that it would be neither proportionate nor in the public interest to take no further action.

The panel 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 Ward'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 Ward'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 whether a conditions of practice order 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. The panel noted that the misconduct did not involve clinical practice and therefore was not able to formulate conditions of practice that would adequately address the concerns relating to Mr Ward's criminal conviction.

The panel considered the imposition of a further period of suspension. It was of the view that a suspension order would allow Mr Ward further time to fully reflect on his previous dishonesty and conviction. It considered that Mr Ward needs to gain a full understanding of how the dishonesty of one nurse can impact upon the nursing profession as a whole and not just the organisation that the individual nurse is working for. The panel concluded that a further six months suspension order would be the appropriate and proportionate response and would afford Mr Ward adequate time to further develop his insight and take steps to strengthen his practice. It would also give Mr Ward an opportunity to approach past and current health professionals or colleagues to attest to his honesty and integrity in his workplace since the substantive hearing.

The panel determined therefore that a suspension order is the appropriate sanction which would continue to 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 Ward with an opportunity to provide evidence of strengthened practice and [PRIVATE].

This suspension order will take effect upon the expiry of the current suspension order, namely at the end of 12 July 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:

- [PRIVATE]
- Testimonials from either voluntary or paid employment



- Evidence of recent and relevant CPD completed in the last year
- An updated reflective statement indicating how Mr Ward would apply the learning from any CPD [PRIVATE] into his future practice upon return to the NMC register.

This decision will be confirmed to Mr Ward in writing.

That concludes this determination.