

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

**Substantive Order Review Meeting
Friday, 31 May 2024**

Virtual Meeting

Name of Registrant: Angeliki Lymperi

NMC PIN 13C0180C

Part(s) of the register: Nursing, Sub part 1
RN1, Registered Nurse - Adult (21 March 2013)

Relevant Location: Staffordshire

Type of case: Misconduct

Panel members: Nicola Dale (Chair, lay member)
Vanessa Bailey (Registrant member)
Joanna Bower (Lay member)

Legal Assessor: Jayne Salt

Hearings Coordinator: Audrey Chikosha

Order being reviewed: Conditions of practice order (18 months)

Fitness to practise: **Impaired**

Outcome: **Order to lapse upon expiry in accordance with Article 30 (1), namely 15 July 2024**

Decision and reasons on service of Notice of Meeting

The panel noted at the start of this meeting that the Notice of Meeting had been sent to Mrs Lymperi's registered email address by secure email on 22 April 2024.

The panel took into account that the Notice of Meeting provided details of the review that the review meeting would be held no sooner than 28 May 2024 and inviting Mrs Lymperi to provide any written evidence seven days before this date.

The panel accepted the advice of the legal assessor.

In the light of all of the information available, the panel was satisfied that Mrs Lymperi 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 allow the order to lapse with a finding of impairment. This order will come into effect at the end of 15 July 2024 in accordance with Article 30(1) of the Nursing and Midwifery Order 2001 (as amended) (the Order).

This is the first review of a substantive conditions of practice order originally imposed for a period of 18 months by a Fitness to Practise Committee panel on Friday 16 December 2022.

The current order is due to expire at the end of 15 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, while working at Bradwell Hall Nursing Home:

1. *Administered medication to Resident A, when it was not prescribed, on one or more of the following dates:*
 - 1.1 *5 March 2018*
 - 1.2 *On or around 13 March 2018*
 - 1.3 *18 March 2018*
2. *In respect of one or more of the dates in charge 1 above, failed to obtain informed consent to undertake a digital removal of faeces and/or administer a suppository to Resident A in that you did not involve Resident A's daughter in the decisions to carry out those procedures and/or administrations*
3. *Failed to provide safe care to Resident A, in that you did not advise her GP that Resident A remained constipated, despite being prescribed laxatives.*

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

The original panel determined the following with regard to impairment:

'The panel considered limbs a, b and c to be engaged in this case. It determined that Miss Lympéri had exposed residents in her care to an unwarranted risk of harm, had acted in a way that would have brought the nursing profession into disrepute, and had breached fundamental tenets of the nursing profession.

In considering whether Miss Lympéri has addressed the deficiencies in her nursing practice, the panel considered the factors set out in Cohen. Whilst the panel considered Miss Lympéri's misconduct to be capable of remediation, the panel had no evidence before it of her having done so.

Miss Lympéri had provided a response to the NMC earlier in the process, but the panel did not consider this to sufficiently address the concerns it has gone on to identify. Miss Lympéri had appeared to accept that, in hindsight, she had acted

outside of the Policy in respect of administering unprescribed suppositories to Resident A, but she did not know this at the time. Nonetheless, there was no evidence of Miss Lympere having strengthened her nursing practice through retraining, despite her assurances, and there was limited evidence to demonstrate that Miss Lympere now has a sufficient level of insight into what went wrong, and how her own nursing practice fell below expected standards. There was a lack of consideration given as to the risk Miss Lympere had exposed Resident A to, or how her conduct would have adversely impacted upon other residents, colleagues, the nursing profession, and the wider public. There is also no evidence of Miss Lympere having further reflected since that time and she has now disengaged from the NMC process entirely.

The panel acknowledged Ms Leatham's submission that, upon leaving the Home, Miss Lympere did go on to work in a different location for a short period of time. However, the panel noted that Miss Lympere has not sought to provide it with any references attesting positively to her nursing practice from any place of work.

In taking account of all the above, the panel was satisfied that Miss Lympere had demonstrated a limited amount of insight, remorse and remediation into her misconduct and it considered there to be a real risk of repetition.

The panel had no evidence before it to allay its concerns that Miss Lympere may currently pose a continuing risk of significant harm to residents in her care, should adequate safeguards not be imposed on her nursing practice. The panel decided that a finding of impairment is necessary on the grounds of public protection.

The panel also 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. It concluded that public confidence in the nursing profession would be undermined if a finding of impairment was not made in this case. The panel was of the view that a fully informed member of the public would be concerned by Miss Lympere's acts and

omissions. It determined that, in this case, a finding of impairment on public interest grounds was required.

Having regard to all of the above, the panel was satisfied that Miss Lympéri's fitness to practise is currently impaired on the grounds of public protection and public interest.'

The original panel determined the following with regard to sanction:

'The panel first considered whether to take no action but concluded that this would be wholly inappropriate in view of the seriousness of this case. Taking no further action would place no restriction on Miss Lympéri's nursing registration and would therefore not protect the public. Furthermore, the panel determined that it would not address the public interest concerns identified.

Next, in considering whether a caution order would be appropriate in the circumstances, the panel took into account the SG, which 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 was of the view that Miss Lympéri's misconduct was not at the lower end of the spectrum of fitness to practise, so it determined that a caution order 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 impose a caution order.

The panel next considered whether placing a conditions of practice order on Miss Lympéri's nursing registration would be a sufficient and appropriate response. The panel is mindful that any conditions imposed must be proportionate, measurable and workable.

The panel was of the view that a conditions of practice order could be formulated to address the outstanding public protection and public interest elements of this case. Whilst it considered Miss Lympéri's misconduct to be serious, it noted that her acts and omissions relate solely to her clinical nursing practice and, were therefore,

capable of remediation. Whilst the panel was aware that Miss Lympéri has disengaged entirely from the NMC at the current time, it determined that should she be in a position to return to nursing, she could be able to continue practising as a registered nurse. The panel noted that it had found Miss Lympéri's insight to be limited at the impairment stage. However, at the point that she disengaged with the NMC, she had begun to understand how the administration of unprescribed medication to Resident A had fallen below expected standards associated with safe and effective nursing practice. In light of this, the panel did not find Miss Lympéri to have an underlying attitudinal concern.

In taking account of the above, the panel was satisfied that the concerns identified could be addressed by way of a conditions of practice order. It determined that Miss Lympéri could work in a clinical nursing environment with the imposition of appropriate safeguards in place, should she wish to do so.

Balancing all of these factors, the panel determined that that the appropriate and proportionate sanction is that of a conditions of practice order.

The panel did consider whether imposing a suspension order would be appropriate but determined that this sanction would be disproportionate in this case. It determined that the lesser sanction of a conditions of practice order was sufficient to address the public protection and public interest concerns.

Taking account of the above, the panel decided that public confidence in the nursing profession and in the NMC as regulator can be maintained without Miss Lympéri being temporarily removed from the NMC register. The panel noted that as of 14 July 2021, Miss Lympéri had moved overseas to focus on addressing her health. Nonetheless, the panel was of the view that should Miss Lympéri feel sufficiently well enough to return to the UK and the nursing profession, she should be afforded the opportunity to work as a registered nurse subject to conditional registration. During this time, Miss Lympéri will be able to demonstrate that she understands the severity of her acts and omissions to a future reviewing panel, and provide it with evidence of retraining. The panel had identified that there was a risk of repetition in the absence of any evidence to the contrary.

Furthermore, the panel considered a striking-off order to be wholly disproportionate, having regard to all the evidence received. It determined that Miss Lymperi's misconduct was not so serious so as to be incompatible with ongoing registration. The panel was satisfied that the circumstances in this case plainly justified a different course of action to removing Miss Lymperi entirely from the nursing profession.

Having regard to the matters it has identified, the panel has concluded that a conditions of practice order will mark the importance of maintaining public confidence in the profession, and will send to the public and the profession a clear message about the standards of practice required of a registered nurse'

Decision and reasons on current impairment

The panel has considered carefully whether Mrs Lymperi's fitness to practise remains impaired. Whilst there is no statutory definition of fitness to practise, the Nursing and Midwifery Council (NMC) has defined fitness to practise as a registrant's ability to practice 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 which included emails from Mrs Lymperi.

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 Mrs Lymperi's fitness to practise remains impaired.

The panel noted that the original panel found that Mrs Lympéri had insufficient insight. At this meeting the panel had no new information before it to suggest that this has changed.

In its consideration of whether Mrs Lympéri has taken steps to strengthen her practice, the panel had no new information before it to suggest that she has.

The original panel determined that Mrs Lympéri was liable to repeat matters of the kind found proved. Today's panel has received no new information to undermine this finding. In light of this the panel determined that Mrs Lympéri remains 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 Mrs Lympéri's fitness to practise remains impaired.

Decision and reasons on sanction

Having found Mrs Lympéri'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 had regard to its previous findings on impairment in coming to this decision. It bore in mind that its primary purpose was to protect the public and maintain public confidence in the nursing profession and the NMC as its regulator.

In this case, while there are concerns regarding Mrs Lympéri's clinical practice, the panel noted that Mrs Lympéri's NMC PIN is only live due to these proceedings. It noted that she

has not paid her registration fees nor applied to renew her NMC PIN in over two years. The panel also had sight of an email from Mrs Lympéri dated 3 January 2023 which states:

'... I have mentioned several times in the past that I left UK

This case has been so stressful for me that I do not even want to practice nursing ever again in the UK...'

In light of this, the panel was of the view that the public would be adequately protected should this order be allowed to lapse with a finding of impairment, allowing Mrs Lympéri's NMC PIN to also expire. It noted that should Mrs Lympéri wish to return to the register, these proceedings would be flagged and Mrs Lympéri would have to prove that she is no longer impaired prior to her return to the register and practise unrestricted.

It also then follows, that upon expiry of the order and Mrs Lympéri's NMC PIN at the end of 15 July 2024, she will not be able to practise as a registered nurse and therefore the public interest is also met.

The panel therefore determined to let the substantive conditions of practice order lapse at the end of the current period of imposition, namely the end of 15 July 2024 in accordance with Article 30(1)

This will be confirmed to Mrs Lympéri in writing.