

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

**Substantive Order Review Hearing  
Monday 20 May 2024**

**Virtual Hearing**

**Name of Registrant:** Adam Vellins

**NMC PIN** 16K0783E

**Part(s) of the register:** Registered Nurse - Sub part 1  
RNA: Adult Nurse, Level 1 (September 2017)

**Relevant Location:** Stockport

**Type of case:** Lack of competence

**Panel members:** Sarah Lowe (Chair – Lay member)  
Charlotte Cooley (Registrant member)  
Stacey Patel (Lay member)

**Legal Assessor:** Paul Hester

**Hearings Coordinator:** Vicky Green

**Nursing and Midwifery Council:** Represented by Bethany Brown, Case Presenter

**Mr Vellins:** Present and unrepresented

**Order being reviewed:** Suspension order (12 months)

**Fitness to practise:** Impaired

**Outcome:** **Suspension order (9 months) to come into effect at the end of 31 August 2024 in accordance with Article 30 (1)**

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

At the outset of the hearing Ms Brown made an application for parts of this hearing to be held in private. She submitted that the new information that forms the basis of the reason for this early review relates directly to [PRIVATE] and that this should be dealt with in private in fairness to all parties. This application was made pursuant to Rule 19 of the 'Nursing and Midwifery Council (Fitness to Practise) Rules 2004', as amended (the Rules).

You made no comments in respect of this application.

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 had regard to all of the information before it and noted that matters relating to [PRIVATE] are inextricably linked to why this early review hearing is being held. The panel therefore determined that it would be difficult to separate public and private information. It decided to hear the whole hearing in private to protect your right to privacy.

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

The panel decided to impose a further suspension order for a period of 9 months. This order will come into effect at the end of 31 August in accordance with Article 30(1) of the 'Nursing and Midwifery Order 2001' (the Order).

This is an early review of the substantive order imposed on 31 July 2023. This review is being held at your request, in the light of new information about [PRIVATE] and future intentions.

This is the second and early review of a substantive suspension order originally imposed for a period of 12 months by a Fitness to Practise Committee panel. This order was reviewed by a panel of the Fitness to Practise Committee on 31 July 2023 and it was decided that a further suspension order was imposed for a period of 12 months.

The current order is due to expire at the end of 31 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:

*'1. Having agreed undertakings in respect of the following regulatory concerns:*

*a. failure to demonstrate safe and effective practice in the following areas:*

- i. Medication management*
- ii. Record keeping*
- iii. Accurately assessing condition of patients*
- iv. Recognising and escalating deteriorating patients*
- v. Handover of patients*
- vi. Time management and prioritisation*
- vii. Basic nursing knowledge*

*2. Breached your undertakings in that you did not complete your undertakings within the time given for compliance.'*

At the first review hearing, the panel determined the following in respect of impairment:

*'The panel considered that the original panel on 3 August 2023 found that you demonstrated very little insight into the impact of your lack of competence. At this hearing, the panel noted that you did not provide a reflective piece addressing*

*the impact your lack of competence has had or may have had on patients, colleagues and the wider public. The panel was of the view that you did not demonstrate that you have gained further insight into the previous failings.*

*In its consideration of whether you have taken steps to strengthen your practice, the panel took into account that you have worked closely with emergency care during your voluntary work and you have made some attempts to gain employment as a healthcare assistant. [PRIVATE], which may have had an impact on your ability to engage with some of the undertakings in this case. Notwithstanding this, the panel found that you have not yet demonstrated effective steps taken to evidence competence in the areas of failing in your nursing practice. It noted that it was not presented with evidence of strengthened practice through training courses and/or CPD's, or provided with any testimonials.*

*In light of this, the panel had insufficient evidence before it to allay its concerns that you may currently pose a risk to patient safety. The panel determined that there is a risk of repetition should you be permitted to practise as a registered nurse without restriction. Therefore, the panel decided that a finding of 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.'*

At the first review hearing, the panel determined the following in respect of 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 lack of competence 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 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 took into account that this was a case which involved evidence of general incompetence relating to fundamental aspects of nursing skills. [PRIVATE]. The panel was therefore not able to formulate conditions of practice that would adequately address the concerns relating to lack of competence. The panel bore in mind the seriousness of the facts found proved at the original substantive meeting and concluded that a conditions of practice order would not adequately protect the public or satisfy the public interest.*

*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. [PRIVATE] and was also of the view that further time would enable you to complete this assessment. The panel concluded that a further 12 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 your practice. The panel determined that a suspension order 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 12 months.*

*The panel noted that should circumstances change, you are entitled to apply for an early review of the order.*

*This suspension order will take effect upon the expiry of the current suspension order, namely the end of 31 August 2023 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:*

- Your continued engagement with the NMC and attendance at a future review hearing;*
- An up to date reflective piece addressing the impact your lack of competence has had or may have had on patients, colleagues and the wider public;*
- Testimonials from paid or unpaid employment;*
- Current evidence of strengthened practice through training courses and/or CPD's;*
- [PRIVATE];*
- A clear outline of your future intentions so far as nursing is concerned.'*

## **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 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 which included the NMC bundle of documents and a number of on table documents provided by you. The panel had particular regard to the following new information provided by you:

- A letter [PRIVATE] dated 11 December 2023.
- A reflective letter from you to the NMC dated 11 May 2024.
- An offer of employment from Manchester University NHS Foundation Trust (the Trust).
- Job Description for Senior Nursing Assistant.
- A testimonial from Humanitarian Aid Centre dated 1 May 2024.

Ms Brown on behalf of the NMC, made some opening submissions. She provided a background of the case and referred the panel to the previous decisions of the substantive and reviewing panel.

You gave evidence under oath. [PRIVATE]. You told the panel that you have extensively researched [PRIVATE] and feel like you have gained an understanding of [PRIVATE] and who you are as a person. You said that you are now able to have a clarity of mind and that your focus has improved. [PRIVATE].

You told the panel that [PRIVATE] is a mitigating factor and not an excuse for your lack of competence. You acknowledged that your practice is currently impaired to some degree and that poor practice presents a risk of harm to patients and to yourself.

You said that [PRIVATE], you have new insight into your own abilities. [PRIVATE], you plan to start working as a band 3 healthcare assistant. You advised the panel that you have passed medication management assessments and have the relevant paperwork to support this. You told the panel that you have informed your prospective employer of the regulatory concerns and plan to meet with the matron to develop a plan to work towards addressing your lack of competence. You told the panel that you have taken

steps to familiarise yourself with procedures and competencies required for your new role but that you will not have access to the skills clinic until you have a start date. Before you start your new role, you hope to have a skills assessment and that a plan of action is likely to be created. You accepted that in a band 3 role you will not be able to address some of the regulatory concerns and demonstrate competence in all of the areas identified.

[PRIVATE] You said that you accepted that your practise was not as “*tight*” as it could have been but that is not how you do things now and you know that the errors wouldn’t happen again. You told the panel that you feel that all of the regulatory concerns arose as a consequence of [PRIVATE]. You said that your priority is returning to safe and effective practise but at want to take it slowly and start “*from the ground up*”.

Ms Brown invited the panel to consider the new information in determining whether your fitness to practise remains impaired. She submitted that whilst there is information about [PRIVATE] and a positive reference from Humanitarian Aid Centre, there is no evidence that you have strengthened your practice and addressed your lack of competence. Ms Brown submitted that there is a risk of repetition of the lack of competence and therefore invited the panel to find that your practice remains impaired on public protection and public interest grounds.

Ms Brown submitted that as the position since the last review hearing has not changed, the same concerns relating to lack of competence remain. She submitted that a conditions of practice order would be unworkable in the circumstances and invited the panel to consider a further period of suspension which will allow you to provide evidence of strengthened practice and to develop your insight.

You submitted that when the charges arose, [PRIVATE] and that you did not have the self-awareness that you do now. In requesting this early review, you submitted that you have engaged with the NMC at the earliest stage and are committed to working with the NMC on your plan of action. You submitted that you want to work within safe and slowly expanding limitations and ensure that you are a safe and effective practitioner at whatever level. You submitted that you will never again put the public or yourself at risk



through your own negligence or incompetence. You submitted that you have provided a clearly defined plan of action [PRIVATE].

You submitted that the only way you can prove your competence to the NMC is by working in a role within the healthcare sector. You submitted that you can take further positive steps in the band 3 role which is a part time role and you will be completing two shifts a week. You submitted that you have shown insight and evidence of progress and self-development. You submitted that a suspension of your NMC PIN would allow you to focus at a lower level on previous issues and address any concerns about your competence.

The panel 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.

The panel had regard to the recommendations of the last reviewing panel as set out below:

- *Your continued engagement with the NMC and attendance at a future review hearing;*
- *An up to date reflective piece addressing the impact your lack of competence has had or may have had on patients, colleagues and the wider public;*
- *Testimonials from paid or unpaid employment;*
- *Current evidence of strengthened practice through training courses and/or CPD's;*
- *[PRIVATE];*
- *A clear outline of your future intentions so far as nursing is concerned.*

The panel noted that you have continued to engage with the NMC. The panel had sight of a reflective letter in which you set out the direct correlation between regulatory concerns and [PRIVATE]. The panel had particular regard to the sections entitled '*statement of regret- personal responsibility*', your '*Plan for the future...*' and '*Learning since [PRIVATE]*'. The panel considered that whilst you appear to have developing insight into your lack of competence, your reflective statement focuses on [PRIVATE]. The panel found that your insight into your [PRIVATE] was very good, however, given that the charges relate to lack of competence, your reflection should have also addressed in more detail the impact/potential impact of this on patients, colleagues and the public interest.

The panel noted the positive testimonial from Humanitarian Aid Centre dated 1 May 2024. It noted that you volunteered from March 2022 until the end of June 2022 as medical staff at a refugee camp in Ukraine. Whilst the panel found this reference to be positive, it was of the view that it did not go directly to any of the concerns identified.

In respect of strengthened practice, the panel noted that you have not been working in a healthcare setting. Whilst the panel was encouraged by the information that you have secured a position in the caring profession, there was no information before it about how you have strengthened your clinical practice.

The panel noted that the findings of fact against you are in terms of your lack of competence [PRIVATE]. The panel considered that as you have yet to demonstrate full insight into your lack of competence and provide evidence of strengthened practice, there is a risk of repetition and a consequent risk of harm to patients. The panel therefore decided that a finding of continuing impairment is necessary on the grounds of public protection.

{PRIVATE}.

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 was of the view that a fully informed member of the public would be concerned if a nurse who lacked competence was allowed to practice without restriction. 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 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, the general and wide ranging nature of incompetence and concluded that a conditions of practice order would not adequately protect the public or satisfy the public interest. The panel was not able to

formulate conditions of practice that would adequately address the concerns relating to lack of competence.

The panel considered the imposition of a further period of suspension for a further 9 months would be the most appropriate and proportionate order in the circumstances. It was of the view that a suspension order would allow you further time to fully reflect on your lack of competence and also allow you sufficient time to commence your band 3 role, to take steps to demonstrate strengthened practice and [PRIVATE].

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.

This suspension order will take effect upon the expiry of the current suspension order, namely the end of 31 August 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:

- Your continued engagement with the NMC and attendance at the next review hearing.
- References and testimonials from any work, paid or unpaid.
- A further reflective statement which focusses on the impact of your lack of competence on patients, colleagues and the public interest.
- [PRIVATE].
- Evidence of strengthened practice. This could include training certificates, any personal development plans and your progress towards addressing your lack of competence, specifically:
  - Medication management.
  - Record keeping.
  - Accurately assessing condition of patients.

- Recognising and escalating deteriorating patients.
- Handover of patients.
- Time management and prioritisation.
- Basic nursing knowledge.

This will be confirmed to you in writing.

That concludes this determination.