# Nursing and Midwifery Council Fitness to Practise Committee

## Substantive Order Review Meeting Tuesday, 19 November 2024

Virtual Meeting

Name of Registrant:	Maureen Keenan
NMC PIN	89E0328S
Part(s) of the register:	Registered Nurse Learning Disabilities Nurse – September 1992 Mental Health Nursing – August 2002
Relevant Location:	Glasgow
Type of case:	Misconduct
Panel members:	Michelle Lee (Chair, Registrant member) Vanessa Bailey (Registrant member) Lynne Vernon (Lay member)
Legal Assessor:	Alain Gogarty
Hearings Coordinator:	Petra Bernard
Order being reviewed:	Conditions of practice order (12 months)
Fitness to practise:	Impaired
Outcome:	Suspension order (6 months) to come into effect on at the end of 2 December 2024 in accordance with Article 30(1)

#### 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 Keenan's registered email address by secure email on 16 September 2024.

Further, the panel noted that the Notice of Meeting was also sent to Mrs Keenan's representative at Anderson Strathern on the same date.

The panel took into account that the Notice of Meeting provided details of the review including the time, dates and the fact that this meeting was heard virtually.

The panel accepted the advice of the legal assessor.

In the light of all of the information available, the panel was satisfied that Mrs Keenan 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 replace the interim conditions of practice order with a suspension order for a period of 6 months. This order will come into effect at the end of 2 December 2024 in accordance with Article 30(1) of the Nursing and Midwifery Order 2001 (as amended) (the Order).

This is the third review of a substantive suspension order originally imposed for a period of 6 months by a Fitness to Practise Committee panel on 4 May 2022. The order was reviewed on 7 November 2022 when it was replaced with an interim conditions of practice order for a period of 12 months. This was reviewed on 23 October 2023 when the order was confirmed and continued.

The current order is due to expire at the end of 2 December 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. Between 2017 and January 2019, failed to maintain accurate records in that you,* 

on one or more occasions:

a) did not complete and/or update patient record[s] within a timely manner or at all as set out in Schedule A;

*b) did not ensure that one or more of your patient records were up to date and/or completed on the Trust's electronic clinical record system;* 

2. Between October 2018 and January 2019, did not complete an assessment for one or more of your patients and/or their children within a timely manner or at all;

3. Between October 2018 and January 2019, on one or more occasions did not attend and/or complete a visit of your patient[s] as set out in Schedule B;

4. In respect of Client A, following a significant event on or around 14 January 2019:

a) Did not complete a significant event record for Client A's child;

b) Did not document that Client A had been removed from the child protection register;

5. In January 2019, did not provide sufficient information in Client B's patient record

and/or assessment in that you:

a) Did not record Client B's child's SIRS number;

b) Did not record the health visitor caseload number;

c) Did not complete Client B's perinatal mental health pathway;

d) Did not complete a lone worker risk assessment form;

e) Did not task a nurse to visit;

6. Between approximately November 2018 and February 2019, did not complete

one or more data forms in relation to Client B in a timely manner or at all;

7. On approximately 22 October 2018, did not offer the Family Nurse Partnership programme to Client C in a timely manner or at all;

8. In respect of Client E, following a significant event on or around 18 December 2018:

a) Did not complete a significant event record for Client E's child;

b) Did not take any and/or sufficient action in that you:

i.Failed to make contact with Client E;

*ii.Did not undertake a safety/hazard check of Client E's home;* 

iii.Did not undertake a well-being check of Client E and her child;

iv.Did not demonstrate to Client E how to perform CPR and/or handling a choking incident;

9. Displayed unprofessional behaviour in that you:
a) On 5 February 2019, towards Colleague A:
i.spoke in a loud manner and/or shouted;
ii.spoke in an angry and/or hostile and/or abrupt manner:

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

Client A Client B Client C Client D Client E Schedule B Client D Client E Client G

Schedule A

Client H Client I Client J Client K'

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

'The panel has considered carefully whether Ms Keenan'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 and the on-table papers provided by Mr Burton on Ms Keenan's behalf. It has taken account of the submissions made by Ms Morrissey on behalf of the NMC and by Mr Burton on Ms Keenan's behalf.

Ms Morrissey submitted that it is impossible for Ms Keenan to demonstrate compliance with the conditions of practice order, as there is no confirmation that she are working in a clinical setting.

Ms Morrissey submitted that, although the development plan presented by Mr Burton presents the dates on when Ms Keenan took certain steps to strengthen her practice, there was no supporting contemporaneous documentary evidence. Further, she submitted that the plan was undated and appeared to be 'out of date'.

*Ms Morrissey submitted that the reflective piece Ms Keenan provided was also undated.* 

*Mr* Burton, on Ms Keenan's behalf, submitted that Ms Keenan has had significant issues with her broadband and mobile telephone, and therefore was unable to attend this hearing, and she is deeply frustrated by this.

*Mr* Burton submitted that Ms Keenan is fully committed to the process of returning to the nursing profession. He submitted that whilst the reflective piece is not dated, it was his understanding that Ms Keenan prepared this during the course of the last week and he said that Ms Keenan sent it to him by email on 19 October 2023.

*Mr* Burton submitted that Ms Keenan has recently suffered some difficult personal circumstances, and therefore has not had sufficient time to comply with the conditions on her practice.

Mr Burton submitted that Ms Keenan has secured employment that is due to begin next week at Boclair Care Home in Glasgow. Initially, she is due to work as a care staff member until the managers at the Home are satisfied that she can progress onto a nursing role.

Mr Burton submitted that Ms Keenan accepts that her fitness to practise remains impaired, and that she is requesting a continuation of the current conditions of practice order for a further period of 12 months. He submitted that this would allow Ms Keenan sufficient time to comply with those conditions and work for a substantial period of time.

The panel heard and accepted the advice of the legal assessor which included reference to the NMC Guidance on Substantive Order Reviews and 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 Ms Keenan's fitness to practise remains impaired.

The panel noted that Ms Keenan has been unable to gain employment in registered practice and that she has therefore not been able to demonstrate compliance with the conditions imposed by the previous panel. It also noted that Ms Keenan's insight into the impact of her conduct on patients and public remains limited.

The panel noted that the last reviewing panel found the following in regard to your insight;

'... the panel had sight of your reflective piece and it recognised the significant progress you have made. In this piece, the panel was of the view that you have demonstrated some understanding of your misconduct and that you have detailed how you would handle the situation differently in the future. However, the panel determined that your insight is focused on practical steps to deal with similar situations in the future. It considered that, in your reflective piece, you have not fully addressed the impact of your actions on patients, and you have shown a limited understanding of how your actions would impact negatively on the reputation of the nursing profession.'

The panel did not consider that Ms Keenan's reflective piece adequately addressed these concerns.

The panel did however acknowledge that Ms Keenan has been affected by recent personal circumstances which may have contributed to her inability to work.

In light of this, this panel determined that Ms Keenan 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, as a risk of harm to patients and the public remains. 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 Ms Keenan's 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 Ms Keenan'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 Ms Keenan'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 imposing a further conditions of practice order on Ms Keenan's registration would still be a sufficient and appropriate response. The panel is mindful that any conditions imposed must be proportionate, measurable and workable. The panel determined that it would be possible to formulate appropriate and practical conditions which would address the failings highlighted in this case. The panel accepted that Ms Keenan has been unable to comply with conditions of practice due to her current employment status and noted that she is engaging with the NMC and is willing to comply with any conditions imposed.

The panel was of the view that a further conditions of practice order is sufficient to protect patients and the wider public interest, noting that there was no evidence of general incompetence and no deep-seated attitudinal problems. In this case, there are conditions currently in place which would continue to protect patients during the period they are in force.

The panel was of the view that to impose a suspension order or a striking-off order would be wholly disproportionate and would not be a reasonable response in the circumstances of Ms Keenan's case.

Accordingly, the panel determined, pursuant to Article 30(1)(c) to make a conditions of practice order for a period of 12 months, which will come into effect on the expiry of the current order, namely at the end of 1 December 2023. It decided to impose the following conditions which it considered are appropriate and proportionate in this case:

'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.'

You must limit your nursing practice to one substantive employer.
 You must not work for an agency.

2. You must not be the nurse in charge of a shift or supervising other clinical staff.

3. You must work with your line-manager, mentor or supervisor to create a personal development plan (PDP). Your PDP must address the concerns about your:

• Record keeping.

• Assessing, planning, evaluating and managing the nursing care for a caseload of patients.

You must:

a) Send your case officer a copy of your PDP one month after starting employment and an up-to-date PDP before the review hearing.

*b)* Meet with your line-manager, supervisor or mentor at least every week to discuss your progress towards achieving the aims set out in your PDP.

c) Send your case officer a report from your line-manager every before the review hearing. This report must show your progress towards achieving the aims set out in your PDP.

4. You must ensure that you are directly supervised by another registered nurse of at least band 6 until such time as your linemanager, mentor or supervisor has assessed you in being able to practise independently the skills identified in your PDP. Your supervision must consist of working at all times while being directly observed by another registered nurse.

Once your line-manager, supervisor or mentor has confirmed that you can practise independently, you must ensure that you are indirectly supervised by another registered nurse any time you are working. This must consist of: • Working at all times on the same shift as, but not always directly observed by, another registered nurse.

• Weekly meetings with your line-manager, supervisor or mentor to discuss your clinical caseload.

5. You must keep the NMC informed about anywhere you are working by:

a) Telling your case officer within seven days of accepting or leaving any employment.

b) Giving your case officer your employer's contact details.

6. You must keep the NMC informed about anywhere you are studying by:

a) Telling your case officer within seven days of accepting any course of study.

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

7. You must immediately give a copy of these conditions to:

a) Any organisation or person you work for.

b) Any employers you apply to for work (at the time of application).

c) Any establishment you apply to (at the time of application), or with which you are already enrolled, for a course of study.

8. You must tell your 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.

9. You must allow your 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 12 months.'

### Decision and reasons on current impairment

The panel has considered carefully whether Mrs Keenan'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 ability to 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 and a bundle of telephone and email communications from the NMC to Mrs Keenan regarding attempts to contact her for an update on her employment status and representation.

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 Keenan's fitness to practise remains impaired. 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 noted that the last reviewing panel found that Mrs Keenan had limited insight into the impact of her conduct on patients and public. At this meeting, the panel found that it had no evidence before it to show that Mrs Keenan has demonstrated an understanding of how her actions put the patient at a risk of harm.

In its consideration of whether Mrs Keenan has taken steps to strengthen her practice, the panel took into account that there has not been any new information presented since the last review in relation to the a reflective piece or information where Mrs Keenan is currently working in order to show that her practice has developed.

The panel considered the timeline since the imposition of the order and that there has been no information provided in order for it to understand whether the conditions of practice order is being adhered to.

The last reviewing panel determined that Mrs Keenan was liable to repeat matters of the kind found proved. Today's panel has noted that it has not received any further information. In light of this the panel determined that Mrs Keenan 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 Mrs Keenan's fitness to practise remains impaired.

#### Decision and reasons on sanction

Having found Mrs Keenan 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.

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 Mrs Keenan'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 Mrs Keenan'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 continuation of a conditions of practice order on Mrs Keenan's registration would still be a sufficient and appropriate response. The panel is mindful that any conditions imposed must be proportionate, measurable and workable. It noted that Mrs Keenan has not actively engaged with the NMC for some considerable time and there is no information before it to conclude that Mrs Keenan has complied or is willing to comply with the conditions that were imposed upon her practice, or if she has addressed the concerns identified.

On this basis, the panel concluded that a conditions of practice order is no longer the appropriate order in this case. The panel concluded that no workable conditions of

practice could be formulated which would protect the public or satisfy the wider public interest.

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 6 months. This would provide Mrs Keenan with an opportunity to reflect, engage with the NMC and provide evidence of compliance with previous conditions of practice order.

The panel did consider a striking off order but considered it to be inappropriate and disproportionate given that the misconduct in this case is potentially remediable.

The panel therefore considered the suspension order to be the most appropriate and proportionate sanction available.

The panel bore in mind the following suggestions from the previous reviewing panel on what would be helpful and as this has not yet been provided, it was of the view that those suggestions are more important today given the lack of engagement since the last review:

- Mrs Keenan's attendance at a future hearing;
- A further reflective piece addressing the impact of her conduct on her patients, the nursing profession and the wider public;
- Recent testimonials from any employer in a nursing or care role in relation to her current practice.

This suspension order will take effect upon the expiry of the current conditions of practice order, namely the end of 2 December 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.

This decision will be confirmed to Mrs Keenan in writing.

That concludes this determination.