

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

**Substantive Order Review Hearing  
Tuesday 26 November 2024**

Virtual Hearing

**Name of Registrant:** Bisrat Wubalem

**NMC PIN** 9811360S

**Part(s) of the register:** Registered Nurse – Sub Part 1  
Children’s Nursing – (November 2002)

**Relevant Location:** Glasgow

**Type of case:** Misconduct

**Panel members:** Clive Chalk (Chair, Lay member)  
Allwin Mercer (Registrant member)  
David Raff (Lay member)

**Legal Assessor:** Natalie Byrne

**Hearings Coordinator:** Sophie Cubillo-Barsi

**Nursing and Midwifery Council:** Represented by Fiona Williams, Case Presenter

**Mrs Wubalem:** Present and represented by Lauren Doherty of Anderson Strathern

**Order being reviewed:** Conditions of practice order (24 months)

**Fitness to practise:** Impaired

**Outcome:** **Conditions of practice order (3 years) to come into effect at the end of the current order 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 Doherty on your behalf, made a request that parts of today's hearing be held in private on the basis that proper exploration of your case involves reference to [PRIVATE]. The application was made pursuant to Rule 19 of the 'Nursing and Midwifery Council (Fitness to Practise) Rules 2004', as amended (the Rules).

Ms Williams, on behalf of the Nursing and Midwifery Council (NMC), did not oppose the 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.

Having heard that reference may be made to [PRIVATE], the panel determined to go into private session as and when such issues arise. It considered that your right to privacy in relation to these matters outweighed the public interest in holding those parts of the hearing in public.

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

The panel decided to vary the current conditions of practice order.

This order will come into effect at the end of 4 January 2025 in accordance with Article 30(1) of the 'Nursing and Midwifery Order 2001' (the Order).

This is the eighth review of a substantive order originally imposed as a suspension order for a period of six months by a panel of the Conduct and Competence Committee on 1 June 2016. On 6 December 2016 a conditions of practice order was imposed for a period of 12 months. On 27 November 2017 a panel of the Fitness to Practise Committee extended the conditions of practice order for 24 months. On 28 November 2019 a conditions of practice order was imposed for a period of 12 months. At an early review on 13 February 2020 these conditions were varied, with immediate effect, for the remainder of

the period of the order. At the fifth review on 26 November 2020 a conditions of practice order was imposed for 12 months. On 30 November 2021 a conditions of practice order was imposed for a period of 12 months. Again, at the seventh review on 25 November 2022, a conditions of practice order was imposed for 24 months.

The current order is due to expire at the end of 4 January 2025.

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

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

*'That you, in 2014, whilst employed by NHS Greater Glasgow Clyde on Ward 4A as a Band 5 Staff Nurse:*

1. *On 7 May 2014, at approximately 18.40, and in relation to Patient A:*

1.1. *Administered a saline flush to Patient A when:*

1.1.1. *You had not been assessed as competent to administer intravenous medication to Patient A and/or access his central line;*

1.1.2. *You were undergoing a formal capability programme...;*

1.1.3. *You had been instructed by your mentor Senior Staff Nurse Colleague 1 to fetch her if the patient's syringe driver alarm sounded in order that she could complete the administration of Patient A's intravenous medication;*

1.2. *Failed to practise in a sterile environment when you administered a saline flush to Patient A;*

1.3. *Failed to check a saline flush with another member of staff prior to administration;*

2. *On 15 May 2014, at approximately 08.20, and in relation to Patient B;*
  - 2.1. *Failed to escalate Patient B's febrile seizure to a senior member of staff:*
    - 2.1.1. *After the seizure had gone on for 3 minutes;*
    - 2.1.2. *...;*
    - 2.1.3. *...;*
  - 2.2. *Failed to monitor and/or record Patient B's oxygen saturation levels during a febrile seizure:*
    - 2.2.1. *Prior to the attendance of Senior Staff Nurse Colleague 1;*
    - 2.2.2. *...;*
  - 2.3. *Failed to recognise that the oxygen mask applied to Patient B during his febrile seizure was not connected to an oxygen point;*
  - 2.4. *Failed to ensure that Patient B received an adequate supply of oxygen during a febrile seizure'*

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

*'The panel carefully considered the documents provided in your supporting bundle. It noted that whilst you have been working as a nursing assistant, you have not worked as a registered nurse for approximately eight years, and thus have not been able to comply with the conditions of practice order. The panel took into account that as a result, you have not been able to fully address the concerns in this case and strengthen your practice.'*

*The panel was satisfied however that the current conditions of practice were not onerous.*

*The panel noted the email from the Senior Lecturer/Programme Leader of the Return To Practice (Nursing & Midwifery) course at Glasgow Caledonian University dated 7 October 2021. It acknowledged your ongoing difficulties in securing a place on an RTP course as a result of the conditions of practice order. The panel also noted [PRIVATE] and the difficulties this presented in your ability to complete the ToC. However, the panel bore in mind that the conditions were in place to address the ongoing concerns about your practice.*

*The panel noted the last reviewing panel's finding that you had not provided any reflection or insight into the original failings, what you had learnt, and how your practice had changed as a result. At this hearing the panel had been provided with your reflective piece and a document explaining your personal circumstances. The panel was satisfied that your reflective piece was helpful, candid and included examples of situations in your current work which linked back to the original concerns. [PRIVATE] However, the panel was concerned that you had not demonstrated an understanding of the impact of your actions on patients, colleagues and the reputation of the nursing profession. It was of the view that at times in your reflection, you appeared to justify your actions that gave rise to the concerns. The panel therefore determined that whilst you had demonstrated some insight and self-awareness, your insight was still developing.*

*In its consideration of whether you have taken steps to strengthen your practice, the panel took into account that you had not been able to practise as a nurse. The panel noted the information in your reflective piece about how you have sought to develop your nursing knowledge and skills.*

*You indicated that you had:*

- prescribed to 'RCNI Plus and read online journals, continuous professional development articles, and practice leaning modules';*
- 'prescribed [to] Nursing Children and young people monthly journal';*

- *'worked in children wards, and Accident and Emergency department as a nursing assistant, and involved in the care of patient with Bronchiolitis, Asthma, Croup, gastroenteritis, and newly diagnosis diabetes';*
- *'read guidelines, and revised pervious action plans on those conditions, and wrote updated action plans'; and*
- *'[worked] in various mental health wards, and involved in the care of Young patients with self – harm, eating disorder, depression, and anxiety... involved in mealtime support in the care of patient with eating disorder... observed half an hour while patient eating, and half an hour after mealtime.'[sic]*

*The panel also noted that you had provided a 10-page excerpt from an article titled 'How to undertake intravenous infusion calculations' by a Senior Lecturer of Adult Nursing. However, the panel had not been provided with evidence of deep reflections based on your reading. In the circumstances, the panel was satisfied that there had been some development in respect of your knowledge and training, but it was of the view that more could be done in relation to completing relevant and appropriate training, including the option of undertaking any online courses.*

*The panel considered the reference from your line manager which confirmed your role and dates of employment, and indicated that she could not comment on your suitability for appointment as she did not personally know you. This reference had been prepared by a colleague that had not observed your work as a Nursing Assistant. The panel was of the view that it would have been better assisted by references or testimonials from professional colleagues with direct knowledge and experience of your work as a Bank Nursing Assistant.*

*The last reviewing panel determined that you were liable to repeat matters of the kind found proved. Today's panel heard Ms Doherty's submissions and received new information by way of your supporting documentation which indicated some improvement since the last review hearing. However, in light of the panel's considerations on this case, it determined that there remained a risk of repetition. The panel therefore decided that a finding of continuing impairment was 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. It determined that, in this case, a finding of continuing impairment on public interest grounds is also required. The panel was of the view that a reasonable and well-informed member of the public would expect a finding of continuing impairment in this case.*

*For these reasons, the panel finds that your fitness to practise remains impaired.'*

The seventh 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. It decided that taking no further action would not address the risk to patients. The panel also determined 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 imposing a further conditions of practice order on your registration would still be a sufficient and appropriate response. The panel was mindful that any conditions imposed must be proportionate, measurable and workable.*

*The panel determined that workable, appropriate and practical conditions would address the failings highlighted in this case. The panel accepted that you have been unable to comply with conditions of practice due to your current personal circumstances but are engaging with the NMC and are willing to comply with any conditions imposed.*

*The panel was of the view that a further conditions of practice order was sufficient to protect patients and the wider public interest, noting as the original panel did that there was no evidence of general incompetence, no deep seated attitudinal problems and that the misconduct related to poor judgement rather than clinical competence. In this case, conditions could be formulated 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 your case in light of the new information presented and improvements you had demonstrated to this panel.*

*Accordingly, the panel determined, pursuant to Article 30(1)(c) to make a conditions of practice order. The panel decided to impose this order for a period of 24 months to provide you with sufficient time to [PRIVATE] complete an RTP course or the ToC, and go on to make progress in complying with the conditions of practice.*

*The panel considered that in the event that you are able to comply with the conditions of practice prior to this 24-month period, you have the option of requesting an early review.*

*The panel 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.*



1. *At any time that you are employed or otherwise providing nursing services, you must place yourself and remain under the supervision of a workplace line manager, mentor or supervisor nominated by your employer. Such supervision to consist of working at all times on the same shift as, but not necessarily under the direct observation of a children's nurse who is physically present in or on the same ward, unit, floor or home that you are working in or on.*
  
2. *You must work with your line manager, mentor or supervisor (or their nominated deputy) to create a Personal Development Plan (PDP) designed to address the concerns about the following areas of your practice:*
  - a) *appropriate assessment and handover;*
  - b) *demonstration of an acceptable level of competence in relation to the full holistic assessment of children in your care, in particular, the recognition and management of a sick child with particular focus in relation to the administration of IV fluids and medication, administration of oxygen therapy, use of aseptic technique and contemporaneous record keeping.*
  
3. *Whilst subject to indirect supervision, you must continue to meet with your line manager, mentor or supervisor (or their nominated deputy) every two weeks to discuss the standard of your performance and your progress towards achieving the aims set out in your PDP.*
  
4. *You must forward to the NMC a copy of your PDP within 28 days of the date on which these conditions become effective or the date on which you take up an appointment, whichever is sooner.*

5. *You must send a report from your line manager, mentor or supervisor (or their nominated deputy) setting out the standard of your performance and your progress towards achieving the aims set out in your PDP at least 14 days before any NMC review hearing or meeting.*
6. *You must tell the NMC within 7 days of any nursing appointment (whether paid or unpaid) you accept within the UK or elsewhere, and provide the NMC with contact details of your employer.*
7. *You must tell the NMC about any professional investigation started against you and/or any professional disciplinary proceedings taken against you within 7 days of you receiving notice of them.*
8.
  - a) *You must within 7 days of accepting any post or employment requiring registration with the NMC, or any course of study connected with nursing or midwifery, provide the NMC with the name/contact details of the individual or organisation offering the post, employment or course of study.*
  - b) *You must within 7 days of entering into any arrangements required by these conditions of practice provide the NMC with the name and contact details of the individual/organisation with whom you have entered into the arrangement.*
9. *You must immediately tell the following parties that that you are subject to a conditions of practice order under the NMC's fitness to practise procedures, and disclose the conditions listed at (1) to (8) above, to them:*
  - a) *Any organisation or person employing, contracting with, or using you to undertake nursing work.*

- b) Any agency you are registered with or apply to be registered with (at the time of application) to provide nursing services.*
- c) Any prospective employer (at the time of application) where you are applying for any nursing appointment.*
- d) Any educational establishment at which you are undertaking a course of study connected with nursing or midwifery, or any such establishment to which you apply to take such a course (at the time of application).*

*The period of this order is for 24 months.*

*This conditions of practice order will take effect upon the expiry of the current conditions of practice order, namely the end of 4 January 2023 in accordance with Article 30(1).*

*Before the end of the period of the order, a panel will hold a review hearing to see how well you have complied with the order. At the review hearing the panel may revoke the order or any condition of it, it may confirm the order or vary any condition of it, or it may replace the order for another order.*

*Any future panel reviewing this case would be assisted by:*

- Your attendance at the review hearing;*
- Up to date references and testimonials from your current employer and particularly those supervising/working with you in a healthcare setting;*
- Evidence of up to date training undertaken and accompanying reflections about what you have gained from the training and/or of other steps to keep your skills and knowledge up to date and to keep abreast of current nursing practice; and*
- Using an appropriate reflective model such as Gibbs', provide a reflective piece on how your original failings impacted on patients, colleagues and the nursing profession. This should also include*

*reflections on your current practice, with reference to situations and examples from your work in a clinical setting.'*

## **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, including the NMC bundle and the following documentation provided by you:

- An updated written statement from you;
- A reflective statement;
- A reflective case study regarding Learning Difficulties and Mental Health;
- A reflective case study regarding End of Life Care;
- A reflective Case Study regarding Young Person Self-Harm
- Two references from Senior Charge Nurses;
- A character and health reference;
- A letter from NHS Ayrshire & Arran dated 9 April regarding your future training; and
- Training Certificates.

Ms Williams provided the panel with a background to your case. She stated that it is a matter for the panel as to what decision should be made today. Ms Williams acknowledged the repetitive nature of the documentation before the panel but highlighted the recommendations made by the previous reviewing panel, all of which you have complied with today. She informed the panel that your registration remains active only by way of the substantive order.

Ms Doherty invited the panel to vary the current conditions of practice order. She asked the panel to amend condition 1, removing the requirement that indirect direct supervision

must be carried out by a children's nurse, replacing it with a nurse of specific banding. Additionally, Ms Doherty invited the panel to remove the requirement of condition 2 a) , specifically that you create a PDP addressing appropriate assessment and handover. She also asked that condition 2 b) be varied to remove the reference to '*contemporaneous record keeping*', ensuring that the conditions focus upon the clinical competency concerns in your case.

Ms Doherty informed the panel that you are currently employed as a bank nursing assistant with NHS Ayrshire, and Arran. She told the panel that you have worked over a variation of wards, gaining transferrable skills, working in collaboration with your employer, discussing ways in which compliance with the current order could be achieved and what further support you could be given.

Ms Doherty acknowledged that you would now need to complete a Return to Practice Course (RTPC). [PRIVATE] Ms Doherty also told the panel that after having made enquiries with Glasgow Caledonian University as to you completing a RTPC, you were informed that a level of negotiation may be required in order for you to secure a placement, given that you will be up against candidates who are not subject to a conditions of practice order.

Ms Doherty stated that as a bank nursing assistant, you have been unable to fully comply with the current conditions of practice order but highlighted the fact that you have fully complied with the suggestions made by the previous reviewing panel. She referred the panel to the references before it. With regards to your insight, Ms Doherty submitted that you have an understanding of what factors impacted you at the time the allegations arose, [PRIVATE].

In relation to remediation, Ms Doherty submitted that you have taken advantage of all avenues open to you in current role, engaging proactively with training and learning opportunities presented to you. Whilst you are not currently employed as a registered nurse, Ms Doherty stated that no concerns have been raised regarding your practice and indeed, you have received supportive feedback.

Ms Williams agreed that condition 1 of the current order can be varied in order to accurately reflect your employment. She stated that it is a matter for the panel as to whether the amendments to condition 2 should be made.

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.

The panel noted that the last reviewing panel found that your insight was developing. Today's panel was encouraged by your continuing engagement with these regulatory proceedings. The panel had before it your updated reflective statement, which it found to be well written and focused. It accepted that you are permitted to provide a context as to the misconduct, without using that explanation as an attempt to justify your failings. In light of this, the panel determined that your insight had significantly developed since the last review.

With regards to remediation, the panel acknowledged that for the past eight years, you have continued to work within a health care environment as a Health Care Assistant. During that time you have been able to develop transferrable skills and the panel had before it supporting evidence of your ongoing relevant training. Nevertheless, the panel acknowledged that you have not practised as a registered nurse since the allegations arose, and that you are now required to complete a RTPC. The panel appreciate the difficulties you face, namely that you are currently unable to demonstrate your ability to practise safely and effectively as a registered nurse. In light of this, the panel determined that there remains a risk of repetition and therefore a finding of current impairment remains 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 noted that the

allegations arose 10 years and since that time you have continued to practise within a health care setting without any further concerns being raised. Indeed the panel had before it positive testimonials from senior colleagues attesting to your abilities as a Health Care Assistant. In light of this, the panel determined that a finding of continuing impairment on public interest grounds is no longer required.

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

Having found your fitness to practise remains currently impaired on public protection grounds only, 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 or to impose a caution order. However, it concluded that neither order would be appropriate given the risk of repetition identified.

The panel next considered whether imposing a further conditions of practice order on your registration would still be a sufficient and appropriate response and considered the submissions made by Ms Doherty as to the proposed amendments.

The panel first considered removing the requirement within condition 1 that you be indirectly supervised by a children's nurse. It was satisfied that the condition could be amended, to include indirect supervision by a registered nurse, in order to properly reflect your current broader working environment. The panel next considered removing the requirement within condition 2 a) that you create a PDP addressing appropriate assessment and handover concerns and the requirement within 2 b), surrounding contemporaneous record keeping. It considered the fact that the allegations arose 10 years ago and that for eight years you have worked as a Health Care Assistant, with both issues being fundamental aspects of that role. It noted that no further concerns have been raised in this regard and the panel and that these concerns were no longer relevant to the

charge. The panel was therefore satisfied that these regulatory concerns no longer required addressing and could be safely removed from the current order.

The panel further determined that any reference to 'child' or 'children' within the conditions, can be amended to 'patients' in order to allow greater flexibility given your broader working environment.

The panel was therefore of the view that a varied conditions of practice order is sufficient to protect patients during the period they are in force. It determined 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 your case.

Accordingly, the panel determined, pursuant to Article 30(1)(c) to make a conditions of practice order for a period of 3 years. It determined that this period will allow you sufficient time to continue working as a Health Care Assistant, [PRIVATE] and eventually successfully complete a RTPC. The panel considered that in the event that you are able to complete a RTPC prior to this three year period, you have the option of requesting an early review.

The order will come into effect on the expiry of the current order.

The panel therefore 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.

1. At any time that you are employed or otherwise providing nursing services, you must place yourself and remain under the supervision of a workplace line manager, mentor or supervisor nominated by your employer. Such supervision to consist of working at all times on the same shift as, but not necessarily



under the direct observation of a registered nurse who is physically present in or on the same ward, unit, floor or home that you are working in or on.

2. You must work with your line manager, mentor or supervisor (or their nominated deputy) to create a Personal Development Plan (PDP) designed to address the concerns about the following areas of your practice:
  - a. demonstration of an acceptable level of competence in relation to the full holistic assessment of patients in your care, in particular, the recognition and management of a sick patients with particular focus in relation to the administration of IV fluids and medication, administration of oxygen therapy and use of aseptic technique.
3. Whilst subject to indirect supervision, you must continue to meet with your line manager, mentor or supervisor (or their nominated deputy) every two weeks to discuss the standard of your performance and your progress towards achieving the aims set out in your PDP.
4. You must forward to the NMC a copy of your PDP within 28 days of the date on which these conditions become effective or the date on which you take up an appointment, whichever is sooner.
5. You must send a report from your line manager, mentor or supervisor (or their nominated deputy) setting out the standard of your performance and your progress towards achieving the aims set out in your PDP at least 14 days before any NMC review hearing or meeting.

6. You must tell the NMC within 7 days of any nursing appointment (whether paid or unpaid) you accept within the UK or elsewhere, and provide the NMC with contact details of your employer.
7. You must tell the NMC about any professional investigation started against you and/or any professional disciplinary proceedings taken against you within 7 days of you receiving notice of them.
8.
  - a) You must within 7 days of accepting any post or employment requiring registration with the NMC, or any course of study connected with nursing or midwifery, provide the NMC with the name/contact details of the individual or organisation offering the post, employment or course of study.
  - b) You must within 7 days of entering into any arrangements required by these conditions of practice provide the NMC with the name and contact details of the individual/organisation with whom you have entered into the arrangement.
9. You must immediately tell the following parties that that you are subject to a conditions of practice order under the NMC's fitness to practise procedures, and disclose the conditions listed at (1) to (8) above, to them:
  - a) Any organisation or person employing, contracting with, or using you to undertake nursing work.
  - b) Any agency you are registered with or apply to be registered with (at the time of application) to provide nursing services.
  - c) Any prospective employer (at the time of application) where you are applying for any nursing appointment.
  - d) Any educational establishment at which you are undertaking a course of study connected with nursing or

midwifery, or any such establishment to which you apply to take such a course (at the time of application).

Before the end of the period of the order, a panel will hold a review hearing to see how well you have complied with the order. At the review hearing the panel may revoke the order or any condition of it, it may confirm the order or vary any condition of it, or it may replace the order for another order.

Any future panel reviewing this case would be assisted by:

- Your attendance at the review hearing;
- An updated reflective piece with reference to your current practice and examples from your work in a clinical setting.
- Up to date references and testimonials from your current employer;  
and
- Evidence of up to date training undertaken.

This will be confirmed to you in writing.

That concludes this determination.