

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

**Substantive Order Review Hearing
Friday, 4 October 2024**

Nursing and Midwifery Council
2 Stratford Place, Montfichet Road, London, E20 1EJ

Name of Registrant: Sandreen Prescott

NMC PIN 16D0338E

Part(s) of the register: Registered Nurse – Adult Nursing Sub Part 1

Relevant Location: Hertfordshire

Type of case: Misconduct

Panel members: Michelle McBreeze (Chair, Lay member)
Robert Fish (Lay member)
Sharon Aldridge-Bent (Registrant member)

Legal Assessor: Robin Hay

Hearings Coordinator: Fabbuha Ahmed

Nursing and Midwifery Council: Represented by Joy Isaacs, Case Presenter

Miss Prescott: Not present and unrepresented at this hearing

Order being reviewed: Suspension order (6 months)

Fitness to practise: Impaired

Outcome: **Striking-Off order to come into effect on 16 November 2024 in accordance with Article 30(1)**

Decision and reasons on service of Notice of Hearing

The panel was informed at the start of this hearing that Miss Prescott was not in attendance and that the Notice of Hearing had been sent to Miss Prescott registered email address by secure email on 5 September 2024.

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

The panel accepted the advice of the legal assessor.

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

The panel heard that Miss Prescott was contacted on multiple occasions by the NMC but there was no answer or contact from her about her intentions to attend.

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

The panel was aware that the Rules do not require delivery and that it is the responsibility of any registrant to maintain an effective and up-to-date registered address.

Decision and reasons on proceeding in the absence of Miss Prescott

The panel next considered whether it should proceed in the absence of Miss Prescott. The panel had regard to Rule 21 and heard the submission of Ms Isaacs that the panel should proceed in the absence of Miss Prescott. She submitted that Miss Prescott had voluntarily absented herself.

Ms Isaacs submitted that there had been no engagement at all by Miss Prescott with the NMC in relation to these proceedings and, as a consequence, there was no reason to believe that an adjournment would secure her attendance on some future occasion.

The panel accepted the advice of the legal assessor.

The panel has decided to proceed in the absence of Miss Prescott. In reaching this decision, the panel has considered the submissions of Ms Isaacs and the advice of the legal assessor. It has had particular regard to any relevant case law and to the overall interests of justice and fairness to all parties. It noted that:

- No application for an adjournment has been made by Miss Prescott;
- Miss Prescott has not engaged with the NMC and has not responded to any attempts to contact her about this hearing;
- There is no reason to suppose that adjourning would secure her attendance at some future date; and
- There is a strong public interest in the expeditious review of the case.

In these circumstances, the panel has decided that it is fair to proceed in the absence of Miss Prescott.

Decision and reasons on review of the substantive order

The panel decided to replace the current suspension order with a striking off order.

This order will come into effect at the end of 16 November 2024 in accordance with Article 30(1) of the 'Nursing and Midwifery Order 2001' (the Order).

This is the second review of substantive order originally imposed by a Fitness to Practice Committee on 19 July 2023 for a period of 9 months. The order was first reviewed on 5 April 2024 where the order was extended for a further 6 months. The current order is due to expire at the end of 16 November 2024.

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

'That you, a registered nurse, whilst employed at Lister Hospital;

1) *On or around 14/15 October 2017; [PROVED BY ADMISSION]*

a) *Did not administer Patient A's insulin as prescribed.*

b) *Did not check whether Patient A had the capacity to self-administer insulin.*

c) *Did not accurately record the administration time/dose of insulin to Patient A.*

d) *On one or more occasion used the incorrect code in the blood glucose monitoring meter.*

e) *On one or more occasion did not use the correct NHS number for patients in the blood glucose monitoring meter.*

f) *Did not comply with the staff nurse competency book.*

2) *On 18 October 2017 when Patient B was in a collapsed state; [PROVED BY ADMISSION]*

a) *Did not provide adequate support to Colleague A in that you;*

i) *Did not enquire/communicate with Colleague A about Patient B's deteriorating condition.*

ii) *After bringing the arrest/resuscitation trolley to Patient B's bedside, left the bay/Colleague A alone.*

iii) *Did not provide Colleague A with advice.*

iv) *Did not provide Colleague A with any clinical support/assistance.*

3) *On 1 November 2017; [PROVED BY ADMISSION]*

a) *Did not ensure that Patient C was administered intravenous antibiotics/Tazocin as prescribed.*

b) *Did not ensure that Patient D was administered IV fluids/Dexamethasone as prescribed.*

c) *Did not alert Colleague B to administer the medication prescribed for;*

i) *Patient C.*

ii) Patient D.

4) On 10 November 2017; **[PROVED BY ADMISSION]**

a) Did not ensure that Patient C was administered evening insulin.

b) Did not notify Colleague C that Patient C was to be administered evening insulin.

5) On 28 November 2017 after being placed on restricted clinical duties; **[PROVED BY ADMISSION]**

a) Carried a needle/syringe driver through a public area/lifts.

b) Removed a cannula/pain medication from a patient, without questioning the instruction.

c) Left a syringe driver containing a controlled drug in an unsecure area.

d) Left a syringe driver by Patient D's bedside with;

i) An exposed needle.

ii) A used needle.

iii) A needle wrapped in Tegaderm.

6) As a result of your actions in charges 5 a), 5 b), 5 c), & 5 d) above, Colleague D suffered a needle stick injury. **[PROVED BY ADMISSION]**

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

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

'The panel next went on to decide if as a result of the misconduct, your fitness to practise is currently impaired.

Nurses occupy a position of privilege and trust in society and are expected at all times to be professional. Patients and their families must be able to trust nurses with their lives and the lives of their loved ones. To justify that trust, nurses must be honest and open and act with integrity. They must make sure that their conduct at all times justifies both their patients' and the public's trust in the profession.

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

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

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

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

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

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

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

d) ... The panel finds that a colleague was harmed and patients were put at risk and may have been caused physical and emotional harm as a result of your misconduct. You were unable to assist with a patient who had a cardiac arrest and left your colleague alone during this incident. The panel was of the view that you should have been able to respond to the situation and not have frozen. It considered your misconduct in not administering insulin to patients when they were required to or notifying a colleague of the patients needing to receive the medication

had the potential for serious harm. An incident of a medication error where a potential wrong dose of medication was nearly given to a patient, this was only prevented by your supervisor. This occurred when you were working at Luton and Dunstable Hospital whilst you were subject to undertakings, and were aware of the need to check medications thoroughly. The panel found that your misconduct for charges 1 to 6 had breached the fundamental tenets of the nursing profession and therefore brought its reputation into disrepute.

The panel was of the view that a member of the public would find your conduct concerning and confidence in the nursing profession and the NMC as a regulator would be undermined if a finding of current impairment was not made.

The panel considered that you made admissions to the charges at the earliest opportunity of the investigation and have admitted the charges in the Case Management Form and the email to the NMC dated 3 July 2023. It was of the view that you are still developing your insight and have shown some understanding that your actions were wrong as demonstrated in your reflective accounts and your oral evidence today. You demonstrated, during questions from the panel, sincere remorse and were able to describe what you would have done differently in certain situations if faced with similar scenarios. You have demonstrated that you have undertaken training in the areas of concern that were identified, however you have not been able to work as a nurse and cannot evidence this in a clinical setting.

The panel is aware that this is a forward-looking exercise and accordingly, it went on to consider whether your misconduct was remediable and whether it had been remediated. The panel then considered the factors set out in the case of Cohen v GMC [2007] EWHC 581 (Admin).

The panel was satisfied that the misconduct in this case is potentially capable of being addressed. Therefore, the panel carefully considered the evidence before it in determining whether or not you have taken steps to strengthen your practice. The panel took into account that you have undertaken training while working at Luton and Dunstable Hospital

in Medicines Management and Management of deteriorating patients. You also completed online training in July 2023 in the following areas: Introduction to Insulin Safety: An introduction for Everyone, Statutory & Mandatory Training: Medication Awareness & Management, Statutory & Mandatory Training: Basic Life Support (Clinical), Safe Use of Insulin: Administration. From your submissions today, you told the panel you were reading policies around medication management and administration and reading articles relating to the nursing profession.

The panel considered Ms Forsyth's submission that they could be attitudinal issues. The panel was not persuaded that given the circumstances it was attitudinally based misconduct.

The panel considered your submissions that you want to return to your nursing and demonstrated your passion and determination to even initially return at a lower band in order to build your confidence and understand working on a ward. The panel noted the many personal challenges you have faced and were impressed by your resilience, determination and commitment to nursing.

However, the panel is of the view that there is a risk of repetition based on the facts of the case, as these were not isolated incidents. Concerns were raised at two different hospitals, the latter hospital being Luton and Dunstable, you were subject to undertakings, and it was reported to the NMC, on your last supervision of a medication round that you had to be stopped from administering the wrong dose of medication to a patient. The manager indicated in an email to the NMC dated 8 December 2021 stating:

'She has not met the requirements stated in the restrictions to practice which were imposed.

The deadline to be able to complete her objectives in order to practice safely have not been met (after an extension following her maternity leave and COVID etc the timescale had been extended to the 4th December 2021)

She is unsafe with her medication rounds...'

The panel was of the view that you are currently not in employment and have therefore been unable to demonstrate your ability to practise safely and effectively and address the concerns raised. There is no evidence before the panel today which shows you have put your training regarding medication management and administration into practice in the health or social care sector. Therefore, the panel cannot be satisfied that you have remediated and strengthened your practice. The panel determined that a finding of impairment is necessary on the grounds of public protection.

The panel bore in mind that the overarching objectives of the NMC; to protect, promote and maintain the health, safety, and well-being of the public and patients, and to uphold and protect the wider public interest. This includes promoting and maintaining public confidence in the nursing and midwifery professions and upholding the proper professional standards for members of those professions.

The panel determined that public confidence in the profession would be undermined if a finding of impairment were not made in this case and therefore also finds your fitness to practise impaired on the grounds of public interest.

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

The first reviewing panel determined the following with regard to sanction:

'Having found Miss Prescott 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 taking no action. The panel had careful regard to the NMC Guidance Rev 3h which discusses allowing orders to lapse upon expiry. Although Ms Prescott's subscription expired on 30 September 2018 she remains on the register because of these proceedings. Were the panel to make no order it is likely that her name would be removed from the register.

The panel had careful regard to Ms Prescott's recent emails. On 20 March 2024 she indicated that she would be attending the hearing. On 30 March 2024 she indicated that she was considering removal and sought further advice. The panel was not satisfied that she fully understood the consequences of removal and did not interpret this email as an unequivocal demand to be removed. Moreover, the panel had no information with regard to what she would be doing in the event of not practising as a registered nurse. It considered that she required to explain what her future intentions were in the event that she left nursing.

In light of this the panel decided that it should not follow the unusual step of making no order.

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 Miss Prescott'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 Miss Prescott's misconduct was not at the lower end of the spectrum and that a caution order would be inappropriate in view of the issues identified. The panel decided that it would be neither proportionate nor in the public interest to impose a caution order.

The panel next considered whether a conditions of practice on Miss Prescott's 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 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 Miss Prescott's misconduct, especially in light of the lack of new information including any evidence of Miss Prescott's willingness to engage with conditions of practice and her employment situation.

The panel considered the imposition of a further period of suspension. It was of the view that a suspension order would allow Miss Prescott further time to fully reflect on her previous failings. The panel concluded that a further six month suspension order would be the appropriate and proportionate response and would afford Miss Prescott adequate time to provide the additional information as requested by the original panel, or, if she would like to proceed with voluntary removal, to take appropriate steps to that effect

The panel determined therefore that a suspension order is the appropriate sanction which would continue to both protect the public and satisfy the wider public interest. Accordingly, the panel determined to impose a suspension order for the period of six months would provide Miss Prescott with an opportunity to provide the NMC with the information requested by the original panel. It considered this to be the most appropriate and proportionate sanction available.'

Decision and reasons on current impairment

The panel first has considered carefully whether Miss Prescott'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 practice kindly, safely and professionally. The panel has undertaken a comprehensive review of the order in the light of the current circumstances. Whilst it has considered the decision of the previous reviewing panel, it has exercised its own judgement as to current impairment.

The panel has had regard to all the documentation before it, including the NMC bundle together with the submissions made by Ms Isaacs. She submitted that there was an 'array' of issues and charges found proved at the original hearing. Ms Isaacs also said that Miss Prescott did attend the original hearing and admitted the charges that were found proved.

Ms Isaacs highlighted that the registrant has had no further engagement with the NMC or provided the second reviewing panel, today, with any documentation to support her engagement with the original panel's requests. This includes, any evidence of new employment, documentations to show that she has retired, pension slips, statements clearly setting out her future intentions to remain on the register and a reflective piece of the charges found proved to show how she has remedied her previous actions.

Ms Isaacs referred to Miss Prescott's submission to the original panel that she did want to practise as a nurse even if it was at the lower band. However, Ms Isaacs submitted that Miss Prescott's recent disengagement indicates that she may not wish to remain on the register. She put forward that Miss Prescott's fitness to practise remains impaired due to her disengagement and lack of evidence of remediation of her misconduct. Ms Isaacs submitted that Miss Prescott's remaining on the register would not sufficiently protect the public or address public interest concerns.

Ms Isaacs said that the panel could extend the current order to give Miss Prescott a further chance of remediation or alternatively impose a striking-off order.

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 Miss Prescott's fitness to practise remains impaired.

The panel was aware that the original panel found that Miss Prescott to have insufficient insight into her misconduct. Further that although Miss Prescott had been engaging initially with the NMC, however she did not abide by the undertakings to the NMC, nor did she attend the last review. At today's hearing, there has been no new information to indicate that there has been a material change in circumstances of the case.

In its consideration of whether Miss Prescott has taken steps to strengthen her practice, the panel took into account that there is no information to suggest she has done so, by working in a healthcare setting or undertaken further training. There are no employer testimonials, or any reflective work completed by Miss Prescott. The panel therefore determined that Miss Prescott is liable to repeat matters of the kind found proved and consequently there remains a significant risk of harm to the public. 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 required.

For these reasons, the panel finds that Miss Prescott's fitness to practise remains impaired.

Decision and reasons on sanction

Having found Miss Prescott's fitness to practise to be currently impaired, the panel then considered what, if any, sanction it should impose. The panel's powers are set out in Article 30 of the Order. The panel has taken into account the 'NMC's Sanctions Guidance' (SG) and has borne in mind that the purpose 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.

The panel had careful regard to the NMC Guidance Rev 3h which discusses removal from the register when there is a substantive order in place. Although Ms Prescott's subscription expired on 30 September 2018 she remains on the register because of these proceedings. There was no information from the registrant readdressing the charges where the panel do not have any information to indicate that it was out of Miss Prescott's control.

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 Miss Prescott'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 Miss Prescott's misconduct was not at the lower end of the spectrum and that a caution order would be inappropriate in view of the issues identified. The panel decided that it would be neither proportionate nor in the public interest to impose a caution order.

The panel next considered whether a conditions of practice on Miss Prescott's 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 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 Miss Prescott's misconduct, her lack of engagement and failure to abide by undertakings.

The panel next considered imposing a further suspension order. However, there was no information before the panel to suggest that Miss Prescott had reflected on or developed insight into her misconduct. The panel has determined that considerable evidence would be required to show that Miss Prescott no longer posed a risk to the public. The panel determined that in the light of Miss Prescott's continuing lack of engagement with the NMC and the absence of progress made towards being fit to practise a further period of suspension would not serve any useful purpose.

The panel therefore determined that it was necessary to take action to prevent Miss Prescott from practising in the future and concluded that the only sanction that would adequately protect the public and serve the public interest was a striking-off order.

This striking-off order will take effect upon the expiry of the current suspension order, namely the end of 16 November 2024 in accordance with Article 30(1).

This decision will be confirmed to Miss Prescott in writing.

That concludes this determination.