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

## Substantive Order Review Hearing Thursday, 6 February 2025

Virtual Hearing

Name of Registrant: Olga Hamunyari Vambe (previously known as Olga

Williams)

**NMC PIN:** 99Y0274E

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

Mental Health Nursing – (August 2002)

Nurse Independent / Supplementary Prescriber –

(September 2016)

Relevant Location: Buckingham

Type of case: Misconduct

Panel members: Richard Youds (Chair, Lay member)

Tanya Tordoff (Registrant member)

Jayanti Durai (Lay member)

**Legal Assessor:** Fiona Moore

**Hearings Coordinator:** Bartek Cichowlas

**Nursing and Midwifery** 

Council:

Represented by Tessa Donovan, Case Presenter

Miss Vambe: Present and represented by Marc Walker of What Rights

Order being reviewed: Suspension order (4 months)

Fitness to practise: Impaired

Outcome: Conditions of practice order (12 months) to come

into effect upon the expiry of the current order, namely at the end of 16 February 2025 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 Donovan, on behalf of the Nursing and Midwifery Council (NMC), made a request that this case be held in private on the basis that proper exploration of your case may make 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).

Mr Walker indicated that he supported the application to the extent that any reference to [PRIVATE] should be heard in private.

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 determined to go into private session in connection with [PRIVATE] as and when such issues are raised in order to protect [PRIVATE].

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

The panel decided to replace the current suspension order with a conditions of practice order.

This order will come into effect at the end of 16 February 2025 in accordance with Article 30(1) of the 'Nursing and Midwifery Order 2001' (the Order).

This is the sixth review of a substantive suspension order originally imposed by a panel of the Fitness to Practise Committee on 15 September 2020, for a period of 12 months. It was reviewed on 29 September 2021 when the panel replaced the suspension order with a conditions of practice order for a period of 18 months. It was next reviewed on 5 April 2023, when the panel imposed a further conditions of practice order for a period of 12 months. On 20 July 2023, the conditions of practice order was varied. The conditions of

practice order was replaced with a suspension order for the period of six months on 11 April 2024. On 6 September 2024, the suspension order was extended for a further four months.

The current order is due to expire at the end of 16 February 2025.

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

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

'That you, a registered nurse,

- 1) Whilst working at the [PRIVATE]
  - a) Assessed patients inadequately on one of more of the occasions set out in Schedule 1
  - b) Diagnosed patients incorrectly/inappropriately on one of more of the occasions set out in Schedule 2
  - c) Prescribed medications inappropriately on one or more of the occasions set out in Schedule 3
  - Kept inadequate records relating to patient consultations on one or more of the occasions set out in Schedule 4
- 2) Whilst working at the [PRIVATE]
  - a) Assessed patients inadequately on one of more of the occasions set out in Schedule 5
  - b) Diagnosed patients incorrectly/inappropriately on one of more of the occasions set out in Schedule 6

·	Prescribed medications inappropriately on one or more of the occasions set out in Schedule 7
d)	,
3) Whilst working at the [PRIVATE] you	
•	Assessed patients inadequately on one of more of the occasions set out in Schedule 9
,	Diagnosed patients incorrectly/inappropriately on one of more of the occasions set out in Schedule 10
,	Prescribed medications inappropriately on one or more of the occasions set out in Schedule 11
•	Kept inadequate records relating to patient consultations on one or more of the occasions set out in Schedule 12
4) Presented or allowed to be presented, a Curriculum Vitae which contained incomplete information about your education history in that you	
Buc	represented that you had an BSc in 'Minor Illness Management' from ks New University when you did not receive any credits for the module or Illness Management'
•	represented that you had an MSc in Minor Injuries Management from lia Ruskin University when
-	there is no record of the University conferring an MSc Qualification to and/or
4bii)	·

5) Your conduct at Charge 4 above demonstrated a lack of integrity in that it presented a misleading impression of your academic history and/or skill to prospective employers.'

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

'The panel considered whether Ms Williams' fitness to practise remains impaired.

The panel noted that the last reviewing panel found that Ms Williams had insufficient insight. At this hearing the panel determined that there was no new evidence of Ms Williams' developing insight or that she had taken steps to strengthen her practice. The panel were of the view that Ms Williams had not had any meaningful engagement with the NMC to demonstrate she had addressed the charges found proved.

The panel considered Ms Williams recent circumstances [PRIVATE].

The panel had regard to NMC submissions highlighting some of the charges found proved, and Ms Williams' evidence before earlier panels accepting the charges in full. Ms Williams later denied some of the original charges stating she had admitted them originally because it made life easier to do so. The panel addressed concerns of Ms Williams' change of stance and given her acceptance of the charges found proved were under affirmation, and the affect that this has on her insight.

In its consideration of whether Ms Williams has taken steps to strengthen her practice, the panel took into account that they had not been provided with a reflective statement, no evidence of insight, no evidence of the steps taken to strengthen her practice, no references and no comprehension of Ms Williams' job or her time management throughout the suspension period or her previous conditions of practice.

The last reviewing panel determined that Ms Williams was liable to repeat matters of the kind found proved. This panel has received no further information or

indication from Ms Williams in relation to her fitness to practise. In light of this, this panel determined that Ms Williams 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 Ms Williams' fitness to practise remains impaired.'

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

'The panel considered the imposition of a further period of suspension. It was of the view that an extension to the existing suspension order would allow Ms Williams further time to fully reflect on her previous misconduct. It considered that Ms Williams needs to gain a full understanding of how the misconduct of one nurse can impact upon the nursing profession as a whole and not just the organisation that the individual nurse is working for. The panel concluded that a further suspension order would be the appropriate and proportionate response and would afford Ms Williams adequate time to further develop her insight and take steps to strengthen her practice. It would also give Ms Williams an opportunity to approach past and current colleagues to attest to her integrity in her workplace assignments since the substantive hearing.

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 four months which would provide Ms Williams with an opportunity to fully engage with the NMC and to provide evidence of [PRIVATE] along with a reflective piece

demonstrating insight. It considered this to be the most appropriate and proportionate sanction available.

This suspension order will take effect upon the expiry of the current suspension order, namely the end of 16 October 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:

- A reflective piece that provides insight into your understanding of the charges found proved, the impact on the reputation of the nursing profession and the NMC and the potential harm to patients
- Testimonials from your current or most recent employer
- Indication of your intention to return to practice as a nurse

The panel did consider the NMC's submission as to strike off but acceded to Ms Williams' request for more time to present her case to a reviewing panel. At this time and for this reason the panel considered that to move to a strike off order would be unfair or disproportionate.

This will be confirmed to Ms Williams in writing.'

## 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 bundle you submitted, which included a reflective piece, reading list and screenshots of your application for a return to practice course. It has taken account of the submissions made by Ms Donovan on behalf of the NMC. She provided the panel with a background of the history of your case and a summary of the charges found proved. Ms Donovan submitted that there is a persuasive burden on you to prove that you are not impaired. She submitted that the evidence provided by you today, which included a reflective piece, should be approached with caution, in light of the evidence from previous hearings. She pointed the panel to evidence that you gave under affirmation previously as being inconsistent to your insight presently.

Considering that the denial of the charges and a claim of persecution was maintained over a significant period of time, Ms Donovan invited the panel to give the "assertive" evidence of your reflective piece little weight. Regarding public interest she submitted that a member of the public would be concerned if you were allowed to practise unrestricted. Ms Donovan submitted that while some previous panels have found you impaired on public protection grounds only, this was due to your developing insight. However, the last two reviews did determine that you were then impaired on public interest grounds also as your insight had regressed.

Given all the matters already mentioned, and that there is limited information that a safe return to practise is possible, Ms Donovan submitted that you should also be found impaired on the grounds of public protection.

Regarding sanction, Ms Donovan submitted that anything lower than a suspension order would not sufficiently protect the public, and therefore not discharge the duty of the NMC.

Ms Donovan referred the panel to the cases of *Busari v NMC* [2016] EWHC 2547, and *Macavei v General Dental Council* [2015] EWC 581. In light of these cases, given the length of time of the proceedings, the lack of insight and defensive attitude which has not been appropriately addressed with "*demonstrated*" evidence, a striking off order is the appropriate sanction.

Should the panel consider a striking off order to not be appropriate, Ms Donovan submitted that the panel should consider extending the current suspension order. This would give you time to further show that your insight is genuine and you are not saying what is expedient for the review today.

The panel also had regard to the submissions from Mr Walker on your behalf. He outlined the powers available under Article 30(1), which include the possibility of replacing the current order with another order. He submitted that it would be fair and proportionate to replace the current suspension order with a conditions of practice order with immediate effect, requiring you to successfully complete the NMC's education and training requirements.

Mr Walker also gave a brief outline of your case. He submitted that since your substantive hearing, there have been periods of sustained remediation but also, periods where you had become disenchanted and frustrated with the proceedings. This has been contributed to by [PRIVATE], the length of time of the proceedings, and difficulties associated with your inability to gain employment given your outstanding conditions of practice at that time. He submitted that the inconsistencies in your submissions arose at a time you were not represented and clarified that your submissions were not under affirmation. He pointed out that previous panels had found that your insight was sufficiently developed and your training sufficient but that you lacked clinical practice.

Turning to the present, Mr Walker submitted that you have sought advice, attended the current hearing, and engaged with the proceedings. You provided documents for today's hearing, including your reflective piece, your character reference, and evidence of your application for a return to practice course. He submitted this demonstrates an ongoing commitment to the profession and to learning. Mr Walker submitted that these demonstrate that you have an adequate level of insight. He submitted that you are able to recognise why your fitness to practice was found to be impaired at previous hearings.

Mr Walker, therefore, invited the panel to impose a conditions of practice order, in line with the findings of panels in 2021 and 2023. He submitted that these conditions should require you to complete a return to practice course as suggested in condition 16 of the NMC Conditions of Practice Library. He submitted this for three reasons. Firstly, the panel in

September 2021 found you had the required insight, and previous panels have consequently found you impaired on public protection grounds only. Secondly, you have a renewed ambition to return to nursing, as evidenced by recent application to [PRIVATE] University for a Return to Practice course. And thirdly, that because you have not worked in any real way, there is no real prospect of you returning to practice without completing the adequate course, and thus you should be required to do that as part of your conditions.

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 you had insufficient insight. At this hearing, the panel determined that while your insight is developing it is far from complete. The panel noted that today you have provided evidence of reflection that explores some developing insight into your misconduct, and evidence of reading and listening to podcasts in an effort to maintain up to date knowledge of the nursing profession. However, the panel determined that your insight has not developed to a sufficient standard. The panel in particular noted the following sentences from your reflective piece:

'Unfortunately due to the NMC's reluctance to revise supervision aspect of my conditions of practice, the prospective employer [sic] decided not to proceed with the offer of employment.'

'Moving forward and based on fact proved I have learnt to accept that as a nursing professional my profession involves accepting complaints and criticism about my clinical practice. I have learnt that as nursing professional it is possible to make a human error through inappropriate or poor decision making and inadequate assessments and record keeping'

The panel was of the view that you lack a full understanding of the potential clinical harm to patients as a result of your actions. The panel determined that a much deeper level of insight into the dangers associated with your actions is expected, given the serious nature of the potential consequences of the charges found proved taking into account your position as a senior nurse and advanced nurse practitioner.

In its consideration of whether you have taken steps to maintain and strengthen your practice, the panel took into account the fact that your [PRIVATE] as well as the suspension order have made it difficult for you to gain employment. The panel recognised that previous panels have determined you have attempted to stay up to date with clinical practice, and that you have provided some documents today which indicate your reading and listening to podcasts. The panel determined that you have attempted to maintain some knowledge of current issues within nursing but have been unable to maintain your nursing skills.

The last reviewing panel determined that you were liable to repeat matters of the kind found proved. Today's panel has not received any information today that this has changed. While you have not been able to return to work due to a range of factors, the panel determined that there was no evidence before it to find that the risk of repetition has changed.

The panel considered NMC guidance on impairment reference DMA-1. It determined that for the reasons stated above, you cannot currently practise safely kindly and professionally; you are still likely to put patients at unwarranted risk of harm; you are likely to bring the profession into disrepute; and you have breached fundamental tenets of nursing. However the panel did note that with sufficient training and insight, the charges found proved can be remediated.

In light of this, this panel determined that you are still 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 your fitness to practise remains impaired.

#### Decision and reasons on 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 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 considered substituting the current suspension order with a conditions of practice order. Despite the seriousness of your misconduct, there has been evidence produced to show that you have begun to develop insight. You have indicated that you wish to return to nursing and have sought advice and representation before this hearing. The panel also recognised that there had been previous [PRIVATE] that had limited your ability to remediate your practice earlier.

The panel determined that a further suspension order would serve no useful purpose in addressing the issues identified. The panel also was of the view that it would not serve the public interest as it would prevent you from demonstrating strengthening of practice.

The panel also considered a striking off order as requested by the NMC but determined that this would be disproportionate and unduly punitive at this time taking into account your

submissions to the panel today expressing your wish to complete a return to practice course and continue nursing.

The panel was satisfied that it would be possible to formulate practicable and workable conditions that, if complied with, may lead to your unrestricted return to practice and would serve to protect the public and the reputation of the profession in the meantime.

The panel decided that the public would be suitably protected as would the reputation of the profession by the implementation of the following conditions of practice:

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. You must limit your nursing practice to one substantive employer.
- 2. You must keep us informed about anywhere you are working by:
  - Telling your case officer within seven days of accepting or leaving any employment.
  - b) Giving your case officer your employer's contact details.
- 3. You must keep us informed about anywhere you are studying by:
  - Telling your case officer within seven days of accepting or leaving any course of study.
  - b) Giving your case officer the name and contact details of the organisation offering that course of study.
- 4. You must immediately give a copy of these conditions to:
  - a) Any organisation or person you work for.
  - Any agency you apply to or are registered with for work.

- c) Any employers you apply to for work (at the time of application).
- d) Any establishment you apply to (at the time of application), or with which you are already enrolled, for a course of study.
- 5. 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.
- 6. 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.
  - Any other person(s) involved in your retraining and/or supervision required by these conditions.
- 7. You will send the NMC a report seven days in advance of the next NMC hearing from your line manager if you have one, mentor or supervisor.
- 8. You must not work as an advanced practitioner until you have undertaken an accredited advanced practice course, and have completed the relevant capabilities. You must not independently diagnose, develop autonomous treatment plans for undiagnosed conditions or discharge patients until you have successfully completed such a course.
- 9. You must not prescribe until you have completed a return to practice course, a prescribing refresher course, undertaken a period of consolidated practice and been deemed as competent by a designated prescribing professional

10. You must ensure that you are supervised by a registered nurse any time you are working. Your supervision must consist of:

a) Working at all times on the same shift as, but not always directly observed

by, a registered nurse.

11. You will send your case officer evidence that you have successfully completed a

Return to Practice Course.

The period of this order is for 12 months.

This conditions of practice order will come into effect upon the expiry of the current

suspension order at the end of 16 February 2025 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:

- Up to date testimonials from your line manager if you are employed;

- Reflective pieces that address the potential impacts of the matters found proved at

the original hearing;

Evidence of further training;

Attendance at your next review hearing.

This will be confirmed to you in writing.

That concludes this determination.