

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

**Substantive Order Review Hearing
Friday 24 January 2025**

Virtual Hearing

Name of Registrant: Christie Nonye Okwaraji

NMC PIN 18B0302E

Part(s) of the register: Registered Nurse – Sub Part 1
Adult Nursing – March 2018

Relevant Location: Camden

Type of case: Lack of competence

Panel members: Scott Handley (Chair, Lay member)
Vivienne Stimpson (Registrant member)
Stacey Patel (Lay member)

Legal Assessor: Ben Stephenson

Hearings Coordinator: Salima Begum

Nursing and Midwifery Council: Represented by Raj Joshi

Mrs Okwaraji: Present and represented by Bradley Smith of Community Trade Union

Order being reviewed: Conditions of practice order (9 months)

Fitness to practise: Impaired

Outcome: **Conditions of practice order (12 months) to come into effect at the end of 17 February 2025 in accordance with Article 30 (1)**

Decision and reasons on review of the substantive order

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

This order will come into effect at the end of 17 February 2025 in accordance with Article 30(1) of the 'Nursing and Midwifery Order 2001' (the Order).

This is the third review of a substantive conditions of practice order imposed by a Fitness to Practise Committee panel on 19 October 2021 for a period of 18 months. This was reviewed on 6 April 2023 and thereafter on 9 April 2024, where the last reviewing panel imposed a conditions of practice order to come into effect at the end of 17 May 2024 for 9 months. The current order is due to expire at the end of 17 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) Between 20 August 2018 and 17 February 2019, failed to demonstrate the standards of knowledge, skill and experience required to practise safely as a Band 5 nurse in that you:

a) ...

b) on one or more occasion, used incorrect drug codes on medication charts;
[PROVED]

c) did not demonstrate that you had knowledge of what each code represented;
[PROVED]

d) on one or more occasion, inaccurately recorded drugs on medication charts;
[PROVED]

- e) *on an unknown date, failed to follow instructions to send medication home with a patient despite having received specific instructions from the pharmacy to do so; [PROVED]*
- f) *on an unknown date, transferred a patient to another ward without the patient receiving their medication despite having been given specific instructions not to do so; [PROVED]*
- g) *on an unknown date, incorrectly noted that a patient had self-administered IV medication when they had not; [PROVED]*
- h) *on an unknown date, having been told that a patient's NG tube had come out by accident, failed to re-insert the tube and/or escalate to a colleague; [PROVED]*
- i) *on an unknown date, having received specific instructions on how to perform checks on a syringe driver, failed to complete the required checks during the course of your shift and failed to record the readings; [PROVED]*
- j) *on an unknown date, failed to change a patient's soiled dressing despite having been asked by the patient to do so; [PROVED]*
- k) *on an unknown date, called a patient by the wrong name throughout the course of the shift; [PROVED]*
- l) *on an unknown date, having been advised by a patient that they were in pain, failed to escalate and seek assistance; [PROVED]*
- m) *on an unknown date, failed to obtain consent from a patient before administering pain relief; [PROVED]*
- n) *on one or more occasion, failed to communicate effectively with colleagues at handovers; [PROVED]*

o) on an unknown date, having been told specifically by Colleague 1 how to deal with a challenging clinical scenario, you failed to relay the relevant information to the doctor: [PROVED]

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

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

'The panel considered whether your fitness to practise remains impaired.

The panel considered the documentation before it and determined that you had complied with the current conditions. The evidence you provided was detailed, cogent, and from a reliable source. It determined from your written statement and the responses provided to the panel from Ms McKeith, that you are developing insight into how you would act differently in the future. However, it determined that you have demonstrated insufficient insight into how your actions in the past impacted on patients, colleagues, and the reputation of the profession.

The panel recognises the significance of the steps you have taken to date to address the competency concerns which are the subject of this review. It noted you have had a period of safe practice, have completed training courses, and have been signed off as competent in medications administration on one occasion. However, the panel noted that whilst there is evidence of improvement in your practice, your line manager at your most recent performance meeting on 29 January 2024 did not document that you have achieved competency in all the identifiable areas of concern. The panel was not persuaded that any improvements have been sustained and embedded into your regular practice. The panel therefore determined a risk of repetition remains and that a finding of impairment therefore remains necessary on the ground 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.'

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

'Accordingly, the panel determined, pursuant to Article 30(1)(c) to make a conditions of practice order for a period of 9 months, which will come into effect on the expiry of the current order, namely at the end of 17 May 2024. The conditions of practice order is similar to the previous order. However, condition 1 has been varied to remove the reference to medication management due to this area of concern being separately addressed in condition 2. Condition 1 was further varied to require you to undertake repeated assessments to ensure that you demonstrate competence in the areas of concern identified over a sustained period of time. Condition 2 has also been varied to ensure you demonstrate consistent competence in medication administration over a sustained period of time. Condition 3 has been varied to specify that your personal development plan must use competency assessment framework(s).

It appeared to the panel, having heard the submissions, that you may have misconstrued the requirement for direct supervision in the conditions of practice. The panel wished to emphasise that the requirement for direct supervision applies only to medication administration. At all other times, supervision of your practice may be indirect.

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. *You must ensure that you are supervised by another registered nurse any time you are working. Your supervision must consist of working at all times on the same shift as, but not always directly observed by another registered nurse until you are assessed as competent in the following areas:*

- a) Communication with patients and colleagues including handovers.*
- b) Record keeping and documentation.*
- c) Prioritisation.*

You must be signed off as competent in three consecutive assessments occurring every six weeks utilising a competency assessment framework(s).

2. *You must not administer medication without direct supervision from another registered nurse until you are signed off as competent to do so in three further consecutive assessments occurring every six weeks. The assessment must utilise a competency assessment framework and be carried out by a clinical supervisor who is at least Band 6.*

3. *You must work with a clinical supervisor who is at least Band 6 or above to create a personal development plan (PDP). Your PDP must use competency assessment frameworks to address the concerns about:*

- Medicines management.*
- Communication with patients and colleagues, including handovers.*
- Record keeping and documentation.*
- Prioritisation.*

You must:

- a) Send your case officer a copy of your PDP before the next NMC review hearing.*

- b) Meet with your clinical supervisor who is at least Band 6 or above at least every month to discuss your progress towards achieving the aims set out in your PDP until deemed competent in the aforementioned areas above.*
- 4. 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.*
- 5. 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.*
- 6. You must immediately give a copy of these conditions to:*
 - a) Any organisation or person you work for.*
 - b) 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.*
 - e) Any current or prospective patients or clients you intend to see or care for on a private basis when you are working in a self-employed capacity*
- 7. 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.*

8. *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 organisation with which you volunteer in a nursing capacity.*

b) *Any current or future employer.*

c) *Any educational establishment.*

d) *Any other person(s) involved in your retraining and/or supervision required by these conditions.'*

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 whether a registrant can practise safely, kindly 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 the oral and written submissions Mr Smith made on your behalf. It has taken account of the submissions made by Mr Joshi on behalf of the NMC. Mr Joshi took the panel through the background of the case referring to relevant pages of the NMC bundle and documentation.

Mr Joshi invited the panel to assess whether the continuation of the current order would uphold proper professional standards and maintain public confidence in the profession. He submitted that the primary questions before the panel could be whether you could return to safe, unrestricted practice within a reasonable timeframe and whether a conditions of practice or suspension order, would effectively support that outcome.

Mr Joshi told the panel factors it could consider, these included your level of engagement with the process, insight and understanding of the issues, the progress you have made

toward fitness to practice, and any remaining barriers to achieving that goal. He also highlighted the importance of evaluating the length of time you have been subject to the existing substantive order and how this impacted your progress.

Mr Joshi further submitted that the panel could consider whether extending or imposing new conditions or a suspension order would realistically enable you to achieve unrestricted practice within a reasonable period. In addition, he told the panel could consider a strike off order where you would be removed from the register to protect professional standards and public trust.

Mr Joshi told the panel to give consideration to the conditions you have already been subject to during this process, alongside the submissions provided by you. These considerations would guide the panel's decision-making on whether the current measures should be adjusted, extended, or replaced by a new order.

The panel also had regard to your written representations and oral submissions made on your behalf by Mr Smith.

Mr Smith told the panel on your behalf your current employment status, he submitted that you secured employment on a trial basis [PRIVATE] beginning 9 October 2023. Unfortunately, this opportunity did not transition into a contracted role due to a change in management. He added that the new manager, upon advice from the HR department, opted not to proceed with any involvement regarding the conditions imposed by the NMC. Since your previous employment ended in May 2024, finding further employment has been challenging, leaving you unemployed for a prolonged period.

Mr Smith told the panel that despite these challenges, you have provided evidence of recent training albeit this was not aimed directly at the areas of concern raised by the NMC. However, the training was temporarily paused due to personal circumstances, [PRIVATE] Mr Smith told the panel that your training will resume 27 January 2025.

Mr Smith invited the panel to consider your demonstrated insight and the steps you have taken to remediate the concerns raised. In addition, he told the panel, you complied with all conditions up to the previous hearing and have made efforts to adhere to the current

conditions, though unemployment has made this difficult. You accept the challenges of being unemployed and acknowledge the panel's concerns, but you have shown reflective insight and sufficient evidence of improvement to argue that remaining on the register is not incompatible. Mr Smith told the panel that you viewed condition 1 of the current order as extremely restrictive as you understood it required you to be directly supervised when working as a nurse. After panel questioning, Mr Smith took further instructions from you, and subsequently told the panel that you now understand the condition to only require indirect supervision. Mr Smith told the panel that you are now content to continue the current conditions of practice order. He added that the training you have completed was obtained via the local authority and not part of any employment.

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 developing insight. At this hearing the panel took into account since the last review, you were unable to provide evidence of complying with the conditions of practice order, as a result of your loss of employment and inability to secure another nursing role. This being the case your competency has not been fully assessed as required by the order. It carefully considered the information presented, alongside Mr Joshi and Mr Smith's submissions and your circumstances.

In its consideration of whether you have taken steps to strengthen your practice, the panel took into account the reflective pieces provided by you dated 23 January 2025 and training courses you have undertaken to strengthen your general skills:

- Time management date 27 March 2024
- Medication safety refresher 21 November 2024
- Topic refresher: communicating with colleagues, eye contact, volume, tone, expression, clarity of understanding dated 21 November 2024.

The last reviewing panel determined that you were liable to repeat matters of the kind found proved. Today's panel took into account the patient harm found proved, adverse patient feedback about care and the absence of information to address the concerns found proved, it determined that you are liable to repeat matters of the kind found proved. The panel was of the view you have not been in clinical practice for several months, there is no evidence of strengthened practice in this case, nor has there been a demonstration of competency in a clinical setting. 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

Having found your fitness to practise currently impaired, the panel then considered what, if any, sanction it should impose in this case. The panel noted that its powers are set out in Article 30 of the Order. The panel has also taken into account the 'NMC's Sanctions Guidance' (SG) and has borne in mind that the purpose of a sanction is not to be punitive, though any sanction imposed may have a punitive effect.

The panel first considered whether to take no action but concluded that this would be inappropriate in view of the seriousness of the case. The panel decided that it would be neither proportionate nor in the public interest to take no further action.

It then considered the imposition of a caution order but again determined that, due to the seriousness of the case, and the public protection issues identified, an order that does not restrict your practice would not be appropriate in the circumstances. The SG states that a caution order may be appropriate where *'the case is at the lower end of the spectrum of impaired fitness to practise and the panel wishes to mark that the behaviour was*

unacceptable and must not happen again.' The panel considered that your lack of competence was not at the lower end of the spectrum and that a caution order would be inappropriate in view of the issues identified. The panel decided that it would be neither proportionate nor in the public interest to impose a caution order.

The panel next considered whether imposing a further conditions of practice order on your 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 you have been unable to comply with conditions of practice due to your current employment status but are engaging with the NMC and willing to comply with any conditions imposed.

The panel was of the view, the concerns found proved, were when you were working unsupervised, and the current conditions of practice order address the need for supervision, and competency to be demonstrated and confirmed before you are signed off, and therefore it was of the view that a further conditions of practice order is sufficient to protect patients and the wider public interest.

The panel was of the view that to impose a suspension order or a striking-off order would at this stage be disproportionate and would not be a reasonable response in the current circumstances of your case. However, the panel note that you have been subject to a conditions of practice order for nearly 3 and a half years. Such an order cannot continue indefinitely.

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 17 February 2025. 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.

1. You must ensure that you are supervised by another registered nurse any time you are working. Your supervision must consist of working at all times on the same shift as, but not always directly observed by another registered nurse until you are assessed as competent in the following areas:
 - a) Communication with patients and colleagues including handovers.
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 - Prioritisation.

You must:

- a) Send your case officer a copy of your PDP before the next NMC review hearing.

- b) Meet with your clinical supervisor who is at least Band 6 or above at least every month to discuss your progress towards achieving the aims set out in your PDP until deemed competent in the aforementioned areas above.
4. 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.
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6. You must immediately give a copy of these conditions to:
- a) Any organisation or person you work for.
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 - 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.
 - e) Any current or prospective patients or clients you intend to see or care for on a private basis when you are working in a self-employed capacity
7. 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.

8. 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 organisation with which you volunteer in a nursing capacity.
 - b) Any current or future employer.
 - c) Any educational establishment.
 - d) Any other person(s) involved in your retraining and/or supervision required by these conditions.

The period of this order is for 12 months.

The conditions of practice order will take effect upon the expiry of the current conditions of practice order, namely the end of 17 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:

- Your continued engagement
- A reflective piece which outlines your insight as to what you have learned from the incidents found proved, backed up with evidence and what action you would take in a similar situation going forward
- Evidence of your attempts to gain employment in a healthcare setting

This will be confirmed to you in writing.

That concludes this determination.