

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

**Substantive Order Review Meeting
Tuesday, 7 January 2025**

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

Name of Registrant: Vanessa Anne Platt

NMC PIN: 08A0046E

Part(s) of the register: Registered Nurse– Sub Part 1
RNA: Adult Nurse– Level 1 (7 September 2008)

Relevant Location: Wrexham

Type of case: Misconduct

Panel members: Simon Banton (Chair, Lay member)
Jillian Claire Rashid (Registrant member)
Karen Naya (Lay member)

Legal Assessor: Justin Gau

Hearings Coordinator: Bethany Seed

Order being reviewed: Conditions of practice order (18 months)

Fitness to practise: Impaired

Outcome: **Conditions of practice order (6 months)
to come into effect on 17 February 2025 in accordance
with Article 30 (1)**

Decision and reasons on service of Notice of Meeting

The panel noted at the start of this meeting that the Notice of Meeting had been sent to Mrs Platt's registered email address by secure email on 21 November 2024.

The panel took into account that the Notice of Meeting provided details of the review that the review meeting would be held no sooner than 30 December 2024 and invited Mrs Platt to provide any written evidence seven days before this date.

The panel accepted the advice of the legal assessor.

In the light of all of the information available, the panel was satisfied that Mrs Platt has been served with notice of this meeting in accordance with the requirements of Rules 11A and 34 of the Nursing and Midwifery Council (Fitness to Practise) Rules 2004 (as amended) (the Rules).

Decision and reasons on review of the current order

The panel decided to impose a further conditions of practice order for six months. 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 (as amended) (the Order).

This is the first review of a substantive conditions of practice order originally imposed for a period of 18 months by a Fitness to Practise Committee panel on 18 July 2023.

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 acting as Home Manager of Stansty House Nursing Home, between May 2017 to October 2017:

1. *Failed to ensure that residents files contained the following:*
 - a) *pre-admission assessments [PROVED]*
 - b) *...*
 - c) *updated body maps [PROVED]*
 - d) *inventory of client belongings [PROVED]*
 - e) *...*

2. *Failed to ensure that residents had sufficient food and fluid intake. [PROVED]*

3. *...*

4. *...*

5. *Failed to ensure that an unnamed resident received his nutritional supplement three times a day. [PROVED]*

6. *...*

7. *Failed to ensure that residents identified as at risk of malnutrition were weighed monthly. [PROVED]*

8. *Failed to ensure that nutritional care plans for residents were reviewed between June 2017 to October 2017. [PROVED]*

9. *Failed to ensure that residents care plans were properly audited. [PROVED]*

10. *Failed to ensure that assessments for residents at risk of pressure ulcers were updated monthly. [PROVED]*

11. *Failed to ensure that air mattresses for residents were set up correctly. [PROVED]*

12. Failed to ensure that residents were repositioned regularly to avoid tissue damage. **[PROVED]**
13. Failed to ensure that residents care plans were reviewed on a monthly basis. **[PROVED]**
14. Failed to make referrals to professionals for residents when needed. **[PROVED]**
15. ...
16. Failed to ensure that adequate instructions were provided for staff on how to administer medication for residents on the:
 - a) care plan and/or **[PROVED]**
 - b) medication sheet **[PROVED]**
17. Failed to ensure that adequate systems were in place to monitor the Home's management. **[PROVED]**
18. Failed to ensure the Home had an adequate handover sheet to record the following information:
 - a) How often a patient should be repositioned **[PROVED]**
 - b) Specific medical care for residents **[PROVED]**
 - c) DNAR statuses **[PROVED]**
19. Failed to ensure that agency staff were given full information on:
 - a) specific patients care needs **[PROVED]**
 - b) policy and procedure **[PROVED]**
 - c) where equipment was located **[PROVED]**
 - d) tour of the Home **[PROVED]**
 - e) role and/or responsibilities **[PROVED]**
20. Failed to escalate safeguarding concerns to the Inspectorate and/or the local safeguarding authority. **[PROVED]**

21. ...

22. ...

23. *Failed to ensure that unit managers received supervision. [PROVED]*

24. ...

a) ...

b) ...

c) ...

d) ...

25. ...

a) ...

b) ...

c) ...

26. *Failed to ensure staff answered call bells in a timely manner. [PROVED]*

27. ...

28. ...

29. ...

30. ...

31. ...

32. *Failed to ensure that staff were given breaks. [PROVED]*

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

The original panel determined the following with regard to impairment:

'The panel determined that the limbs a, b and c of Grant, as outlined above, are engaged. The panel finds there is a risk of repetition and residents were put at significant risk of harm as a result of Mrs Platt's misconduct. Mrs Platt's misconduct had breached the fundamental tenets of the nursing profession and therefore brought its reputation into disrepute.

Given ongoing issues with staffing it appeared that Mrs Platt resorted to helping out clinically on a day-to-day basis on one particular unit. The panel have noted that whilst there were no concerns about her own clinical competence, she failed to provide oversight and intervention in her role as registered nurse who was responsible for managing the Home. The panel were made aware there had been some ongoing concerns at the Home, which were being monitored by the regulators prior to Mrs Platt starting in her position. However, she failed to escalate or address these which perpetuated the issues.

Regarding insight, the panel considered that Mrs Platt recognised that there were failings and issues at the Home but noted that she did not fully accept personal accountability for these. The panel found her insight to be limited as there is insufficient evidence to demonstrate that Mrs Platt had an understanding of how her actions put the residents at a risk of harm or an understanding of how this impacted the reputation of the nursing profession.

The panel was satisfied that the misconduct in this case is capable of being addressed. The panel carefully considered the evidence before it in determining whether or not Mrs Platt has taken steps to strengthen her practice. The panel had no evidence to suggest that Mrs Platt had strengthened practice around leadership and management through relevant training or reflection. Therefore, it could not be satisfied that appropriate remediation had taken place.

The panel is of the view that there is a risk of repetition as there were a wide range of multiple failures over a period of time which have yet to be addressed. The panel considered that, consequently, there remains a significant risk of harm to patients

and the public. The panel therefore decided 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 considered there to be a public interest in the circumstances of this case. The panel found that the charges found proved are very serious. It was of the view that a fully informed member of the public would be concerned by its findings on facts and misconduct. The panel concluded that public confidence in the nursing profession would be undermined if a finding of current impairment was not made in this case. Therefore, the panel determined that a finding of current impairment on public interest grounds was also required.

Having regard to all of the above, the panel was satisfied that Mrs Platt's fitness to practise is currently impaired.'

The original panel determined the following with regard to sanction:

'It then considered the imposition of a caution order but again determined that, due to the seriousness of the case, and the public protection issues identified, an order that does not restrict Mrs Platt's practise would not be appropriate in the circumstances. The SG states that a caution order may be appropriate where 'the case is at the lower end of the spectrum of impaired fitness to practise and the panel wishes to mark that the behaviour was unacceptable and must not happen again.' The panel considered that Mrs Platt'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 placing conditions of practice on Mrs Platt'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 took into account the SG, in particular:

- No evidence of harmful deep-seated personality or attitudinal problems;*
- Identifiable areas of the nurse or midwife's practice in need of assessment and/or retraining;*
- No evidence of general incompetence;*
- Potential and willingness to respond positively to retraining;*
- Patients will not be put in danger either directly or indirectly as a result of the conditions;*
- The conditions will protect patients during the period they are in force; and*
- Conditions can be created that can be monitored and assessed.*

The panel determined that it would be possible to formulate appropriate and practical conditions which would address the failings highlighted in this case. Whilst, the panel recognised that the charges rely on Mrs Platt's competence and ability on a managerial level, the panel noted that it heard little evidence of concerns relating to Mrs Platt's individual clinical practice.

...

Balancing all of these factors, the panel determined that that the appropriate and proportionate sanction is that of a conditions of practice order.

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 Mrs Platt's case because there are areas of concern that can be managed with conditions of practice.

Having regard to the matters it has identified, the panel has concluded that a conditions of practice order will mark the importance of maintaining public confidence in the profession and will send to the public and the profession a clear message about the standards of practice required of a registered nurse. The panel determined that the following conditions 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 limit your nursing practice so that you do not work as the nurse in charge or have responsibility for a ward, department or care/nursing home.*

- 2. You must meet with your manager or clinical supervisor on a monthly basis to reflect on, discuss and record your clinical practice progress.*

- 3. You must work with your manager or clinical supervisor to create a personal development plan (PDP). Your PDP must address the concerns about clinical governance, patient safety and audit.
You must send your case officer a copy of your PDP before the next review. This report must show your progress towards achieving the aims set out in your PDP.*

- 4. You must produce a written reflection, which is personally focused on the impact of your actions on the residents and what you have learnt and how your practice has changed. You must send your case officer a copy of this reflection before the next review.*

5. *You must keep the NMC informed about anywhere you are working by:*
 - a) *Telling your case officer within seven days of accepting or leaving any employment.*
 - b) *Giving your case officer your employer's contact details.*

6. *You must keep the NMC informed about anywhere you are studying by:*
 - a) *Telling your case officer within seven days of accepting any course of study.*
 - b) *Giving your case officer the name and contact details of the organisation offering that course of study.*

7. *You must immediately give a copy of these conditions to:*
 - a) *Any organisation or person you work for.*
 - b) *Any 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.*

8. *You must tell your case officer, within seven days of your becoming aware of:*
 - a) *Any clinical incident you are involved in.*
 - b) *Any investigation started against you.*
 - c) *Any disciplinary proceedings taken against you.*

9. *You must allow your case officer to share, as necessary, details about your performance, your compliance with and / or progress under these conditions with:*
- a) Any current or future employer.*
 - b) Any educational establishment.*
 - c) Any other person(s) involved in your retraining and/or supervision required by these conditions.'*

Decision and reasons on current impairment

The panel has considered carefully whether Mrs Platt's fitness to practise remains impaired. Whilst there is no statutory definition of fitness to practise, the NMC has defined fitness to practise as a registrant's suitability to remain on the register without restriction. In considering this case, the panel has carried out a comprehensive review of the order in light of the current circumstances. Whilst it has noted the decision of the last panel, this panel has exercised its own judgement as to current impairment.

The panel has had regard to the documentation before it, including the NMC bundle.

The panel heard and accepted the advice of the legal assessor.

In reaching its decision, the panel was mindful of the need to protect the public, maintain public confidence in the profession and to declare and uphold proper standards of conduct and performance.

The panel considered whether Mrs Platt's fitness to practise remains impaired.

The panel noted that the original panel found that Mrs Platt had limited insight. At this meeting, the panel noted that it had no new information before it. The panel took into account that the last communication that Mrs Platt had with the NMC on 17 July 2023:

“...I left nursing in 2018 and have never returned, not even as a health care assistant. Do I miss nursing, absolutely, but miss working in a hospital setting on the wards and in theatres only. I feel I’ve done all my training, and additional training for nothing, I can no longer work in a nursing environment at any level.”

The panel noted that Mrs Platt has disengaged from the NMC process and there is no evidence before it that she has developed her insight since the previous hearing.

In its consideration of whether Mrs Platt has taken steps to strengthen her practice, the panel took into account that there was no evidence before it that she has taken any steps to strengthen her practice. It noted that there is no evidence of her compliance with the current conditions of practice order or that she wishes to return to nursing at all. The panel considered that there is also no evidence of serious attitudinal issues and so the concerns identified were remediable. It noted that although the concerns were serious in nature, they were not irredeemable, and the current conditions of practice order was sufficient to safeguard against any risk of harm to the public.

The original panel determined that Mrs Platt was liable to repeat matters of the kind found proved. Today’s panel has received no new information to undermine this. In light of this the panel determined that Mrs Platt remains liable to repeat matters of the kind found proved. The panel therefore decided that a finding of continuing impairment is necessary on the grounds of public protection.

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 as the concerns relate to vulnerable patients and a reasonable, well-informed member of the public would be concerned by the lack of insight and remediation at this time.

For these reasons, the panel finds that Mrs Platt’s fitness to practise remains impaired.

Decision and reasons on sanction

Having found Mrs Platt 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 and allow the order to lapse with a finding of impairment but concluded that this would be inappropriate in view of the seriousness of the case and taking into account the length of time that the conditions of practice order has been in place without improvement. The panel decided that it would be neither proportionate nor in the public interest to take no further action.

It then considered the imposition of a caution order but again determined that, due to the seriousness of the case, and the public protection issues identified, an order that does not restrict Mrs Platt's practice would not be appropriate in the circumstances. The SG states that a caution order may be appropriate where *'the case is at the lower end of the spectrum of impaired fitness to practise and the panel wishes to mark that the behaviour was unacceptable and must not happen again.'* The panel considered that Mrs Platt's misconduct was not at the lower end of the spectrum and that a caution order would be inappropriate in view of the issues identified. The panel decided that it would be neither proportionate nor in the public interest to impose a caution order.

The panel next considered whether imposing a further conditions of practice order on Mrs Platt's registration would still be a sufficient and appropriate response. The panel is mindful that any conditions imposed must be proportionate, measurable and workable. The panel determined that it would be possible to formulate appropriate and practical conditions which would address the failings highlighted in this case.

The panel was of the view that a further conditions of practice order is sufficient to protect patients and the wider public interest, noting as the original panel did that there was no evidence of general incompetence and no deep-seated attitudinal problems. In this case, the panel was satisfied that the previous conditions imposed can be maintained and would 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 at this point and would not be a reasonable response in the circumstances of Mrs Platt's case because it would be unduly punitive in all the circumstances. The panel took into account the length of time that has passed since the events took place, and that Mrs Platt has not practised as a nurse since 2018. It also noted her declaration by email dated 17 July 2023 that she no longer wishes to return to nursing. The panel was of the view that a further six months of the current conditions of practice order would be sufficient to protect the public and allow Mrs Platt to redeem her practice if she so desires. It noted that thereafter there will be limited options for Mrs Platt's retention on the NMC register.

Accordingly, the panel determined, pursuant to Article 30(1)(c) to make a conditions of practice order for a period of six 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 limit your nursing practice so that you do not work as the nurse in charge or have responsibility for a ward, department or care/nursing home.
2. You must meet with your manager or clinical supervisor on a monthly basis to reflect on, discuss and record your clinical practice progress.
3. You must work with your manager or clinical supervisor to create a personal development plan (PDP). Your PDP must address the concerns about clinical governance, patient safety and audit.

You must send your case officer a copy of your PDP before the next review. This report must show your progress towards achieving the aims set out in your PDP.

4. You must produce a written reflection, which is personally focused on the impact of your actions on the residents and what you have learnt and how your practice has changed. You must send your case officer a copy of this reflection before the next review.

5. You must keep the NMC informed about anywhere you are working by:
 - a) Telling your case officer within seven days of accepting or leaving any employment.
 - b) Giving your case officer your employer's contact details.

6. You must keep the NMC informed about anywhere you are studying by:
 - a) Telling your case officer within seven days of accepting any course of study.
 - b) Giving your case officer the name and contact details of the organisation offering that course of study.

7. You must immediately give a copy of these conditions to:
 - a) Any organisation or person you work for.
 - b) Any 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.
8. You must tell your case officer, within seven days of your becoming aware of:
 - a) Any clinical incident you are involved in.
 - b) Any investigation started against you.
 - c) Any disciplinary proceedings taken against you.
 9. You must allow your case officer to share, as necessary, details about your performance, your compliance with and / or progress under these conditions with:
 - a) Any current or future employer.
 - b) Any educational establishment.
 - c) Any other person(s) involved in your retraining and/or supervision required by these conditions.'

The period of this order is for six months.

This 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 Mrs Platt has 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:

- Evidence of insight into Mrs Platt's misconduct, such as a reflective statement.

- Evidence of training undertaken by Mrs Platt to strengthen her practice in relation to the areas of concern raised.
- Explicit confirmation from Mrs Platt that she does or does not wish to return to nursing.

This will be confirmed to Mrs Platt in writing.

That concludes this determination.