

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

**Substantive Hearing
Wednesday, 5 April 2023 – Thursday, 6 April 2023**

Virtual Hearing

Name of Registrant:	Primrose Zvirevo Nyamushosho
NMC PIN	06B0649E
Part(s) of the register:	RNA: Registered Nurse – Sub Part 1
Relevant Location:	Sheffield
Type of case:	Conviction/Misconduct
Panel members:	Sue Thomas (Chair, Lay member) Anne Rice (Lay member) Mary Karasu (Registrant member)
Legal Assessor:	George Alliot
Hearings Coordinator:	Daisy Sims
Nursing and Midwifery Council:	Represented by Yvonne Ferns, Case Presenter
Ms Nyamushosho:	Present and represented by Alex Adamou, (Thompsons Solicitors)
Facts proved:	All charges
Facts not proved:	n/a
Fitness to practise:	Impaired
Sanction:	Striking-off order
Interim order:	Interim suspension order (18 months)

Details of charge

That you, a registered nurse:

- 1) Were convicted on 31/01/2022 at Sheffield Magistrates' Court of between 19/01/2020 and 23/10/2020, being a person who was barred, engaged in an activity regulated by the Safeguarding Vulnerable Groups Act 2006, namely continuing employment at Athorpe Lodge Care Home after becoming aware of being placed on the barred list, contrary Section 7 of the Safeguarding Vulnerable Groups Act 2006. **(proved by admission)**
- 2) Were convicted on 31/01/2022 at Sheffield Magistrates' Court of between 01/07/2020 and 30/07/2020, being a person who was barred, engaged in an activity regulated by the Safeguarding Vulnerable Groups Act 2006, namely applied for employment at WILLOWBECK CARE HOME after becoming aware of being placed on the barred list, contrary to section 7 of the Safeguarding Vulnerable Groups Act 2006. **(proved by admission)**
- 3) Were convicted on 31/01/2022 at Sheffield Magistrates' Court of between 17/12/2020 and 29/03/2021, being a person who was barred, engaged in an activity regulated by the Safeguarding Vulnerable Groups Act 2006, namely applied for and undertook employment at LAYDEN COURT after becoming aware of being placed on the barred list, contrary to section 7 of the Safeguarding Vulnerable Groups Act 2006. **(proved by admission)**
- 4) On 11 March 2021 at Snig Hill Police Station in a voluntary interview stated that you were not working. **(proved by admission)**
- 5) Your conduct at 4) was dishonest in that you knew you were currently employed at Layden Court as a nurse. **(proved by admission)**

And in the light of the above your fitness to practise is impaired by reason of your convictions as set out in charges 1 to 3, and your misconduct as set out in charges 4 – 5.

(During the course of the panel’s deliberations it was noticed that the date of conviction in both the charges and the agreed statement of case was incorrectly stated to be 31/01/2021 and should have been 31/01/2022. With the agreement of both parties the date has been changed.)

Decision and reasons on application for hearing to be held in private

At the outset of the hearing, Mr Adamou, on your behalf, made a request that this case be held in private on the basis that proper exploration of your case involves reference to your [PRIVATE]. The application was made pursuant to Rule 19 of the ‘Nursing and Midwifery Council (Fitness to Practise) Rules 2004’, as amended (the Rules).

Ms Ferns, on behalf of the NMC, indicated that she 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 rule on whether or not to go into private session in connection with [PRIVATE] as and when such issues are raised.

Decision and reasons on facts

You admitted all of the facts alleged in charges 1-5. The panel found the facts proved on your admission.

Background

The agreed statement of case is as follows:

1. *'The Registrant was referred to the NMC by [...], Regional Manager of Four Seasons Health Care Group, Layden Court Care Home on 2 July 2021.*
2. *On 8 November 2019, the DBS wrote to Ms Nyamushosho to inform her that her name may be placed on the Adults' Barred List and the Children's Barred List.*
3. *Ms Nyamushosho was barred by DBS on 18 January 2020. The letter sent to Ms Nyamushosho stated that she was barred explaining:*

"We have included you in the Adults' Barred List and the Children's Barred List, which means you will be committing an offence if you engage, seek to engage or offer to engaged in regulated activity."

"Your inclusion in the Adults' Barred List and the Children's Barred List will last indefinitely and is not affected by any other sanction imposed by a court or other organisation. You will, however, be able to ask us to review our decision to include you in the Adults' Barred List and the Children's Barred List from 18 January 2030."

4. *At the time of being placed on the Adult's and Children's Barring Lists Ms Nyamushosho was working as a registered nurse at Althorp Lodge Care Home. Ms Nyamushosho did not inform Althorp Lodge Care Home about the 'Barred' status.*
5. *On 20 July 2020 Ms Nyamushosho applied for the position of COVID Registered Nurse at Willowbeck Care Home.*
6. *On 21 July 2020 Ms Nyamushosho was issued a DBS Certificate which contained details of her adult Barred Status.*
7. *On 30 July 2020 Ms Nyamushosho phoned the DBS confirming receipt of the certificate and barring notification.*
8. *On 30 October 2020 Ms Nyamushosho contacted the DBS by email asking to be removed from the Barred list. This was acknowledged by the DBS on 10 November 2020 and Ms Nyamushosho was asked to submit her representation to the DBS.*
9. *On 10 November 2020, Ms Nyamushosho applied for the post of registered nurse at Layden Court Care Home where her application was successful. Ms Nyamushosho did not produce her DBS certificate to Layden Court Care Home.*
10. *On 11 March 2021 Ms Nyamushosho attended Snig Hill Police Station for a voluntary interview where she was questioned under caution for seeking to engage in a regulated activity for which she was barred. During the interview Ms Nyamushosho asked if she was currently working, and she stated that she was not.*
11. *Ms Nyamushosho was arrested on 29 March 2021 and interviewed regarding the offence. She gave a 'no comment' interview.*
12. *Ms Nyamushosho attended Sheffield Magistrates Court on 31 January 2022 and pleaded guilty to three offences. Namely:*

1) *Between 19/01/20 and 23/10/2020 at SHEFFIELD in the county of SOUTH YORKSHIRE, being a person who was barred, engaged in an activity regulated by the Safeguarding Vulnerable Groups Act 2006, namely continuing employment at ATHORPE LODGE CARE HOME after becoming aware of being placed on the barred list.*
Contrary to section 7 of the Safeguarding Vulnerable Groups Act 2006.

2) *Between 01/07/2020 and 30/07/2020 at SHEFFIELD in the county of SOUTH YORKSHIRE, being a person who was barred, engaged in an activity regulated by the Safeguarding Vulnerable Groups Act 2006, namely applied for employment at WILLOWBECK CARE HOME after becoming aware of being placed on the barred list,*
Contrary to section 7 of the Safeguarding Vulnerable Groups Act 2006.

3) *Between 17/12/2020 and 29/03/2021 at SHEFFIELD in the county of SOUTH YORKSHIRE, being a person who was barred, engaged in an activity regulated by the Safeguarding Vulnerable Groups Act 2006, namely applied for and undertook employment at LAYDEN COURT after becoming aware of being placed on the barred list.*
Contrary to section 7 of the Safeguarding Vulnerable Groups Act 2006.

13. *Ms Nyamushosho received a sentence of a Community Order. The Requirements to be complied with by 30/01/2023. This had a Rehabilitation Activity Requirement of up to 20 days and an Unpaid Work Requirement to carry out 40 hours of unpaid work in the next 12 months. This sentence was imposed concurrently for each of the three offences. The Registrant also had to pay a Victim Surcharge of £85 and Prosecution costs of £85. A collection order was attached.'*

Fitness to practise

The panel heard evidence from you under oath.

Having announced its findings on the facts, the panel then considered whether, on the basis of the facts found proved in charges 1, 2 and 3 your fitness to practise is currently impaired by reason of those convictions and in charges 4 and 5, your fitness to practise is currently impaired by reason of misconduct. There is no statutory definition of fitness to practise. However, the NMC has defined fitness to practise as a registrant's suitability to remain on the register unrestricted.

The panel, in reaching its decision, has recognised its statutory duty to protect the public and maintain public confidence in the profession. Further, it bore in mind that there is no burden or standard of proof at this stage and it has therefore exercised its own professional judgement.

The panel adopted a two-stage process in its consideration. First, the panel must determine whether the facts found proved on charges 4 and 5 amount to misconduct. Secondly, only if the facts found proved amount to misconduct, the panel must decide whether, in all the circumstances, your fitness to practise is currently impaired as a result of that misconduct. Further, the panel must decide whether in all the circumstances your fitness to practice is currently impaired as a result of the convictions.

Submissions on misconduct and impairment

In coming to its decision, the panel had regard to the case of *Roylance v General Medical Council (No. 2)* [2000] 1 AC 311 which defines misconduct as a '*word of general effect, involving some act or omission which falls short of what would be proper in the circumstances.*'

Ms Ferns submitted that your fitness to practise is impaired by reason of your convictions as set out in charges 1 to 3, and your misconduct as set out in charges 4 - 5. She submitted that your repeated actions of dishonesty are serious and fall short of what would be expected of a registered nurse in the circumstances. The areas of concern identified relate to dishonesty and the failing involves a serious departure from expected standards.

Ms Ferns submitted that the following sections of 'The Code: Professional standards of practice and behaviour for nurses and midwives (2015)' (the Code) had been breached;

'20 Uphold the reputation of your profession at all times

To achieve this, you must:

20.1 keep to and uphold the standards and values set out in the Code

20.2 act with integrity and honesty at all times

20.3 be aware at all times of how your behaviour can affect and influence the behaviour of other people

20.4 keep to the laws of the country in which you are practising

21 Uphold your position as a registered nurse, midwife, or nursing associate

To achieve this, you must:

21.3 act with honesty and integrity in any financial dealings you have with everyone you have a professional relationship with.'

Ms Ferns referred the panel to the case of *Roylance* and submitted that your actions were so serious both individually and collectively and that they fall seriously short of the conduct of a registered nurse and amount to misconduct.

Ms Ferns referred the panel to the case of *Council for Healthcare Regulatory Excellence v (1) Nursing and Midwifery Council (2) Grant [2011] EWHC 927 (Admin)* and specifically the approach formulated by Dame Janet Smith. She submitted that limbs a, b, c and d are engaged. She submitted that dishonest actions are concerns that are so serious and are difficult to remediate and in the absence of any remediation, there remains a risk of

repetition should you return to unrestricted practice. She submitted that whilst you have engaged with the NMC and have admitted the charges, you have also admitted that your fitness to practise is currently impaired by reason of your misconduct.

Ms Ferns referred the panel to the case of *Cohen v GMC [2007] EWHC 581 (Admin)*. She submitted that it is difficult to remediate the regulatory concerns in this case. She further submitted that your conduct was not a one-off incident but over a prolonged period of time. She submitted that by you working as a registered nurse whilst knowing that you were barred by the DBS, was a breach of trust. Ms Ferns stated that you directly benefited from your dishonest actions in that you were able to earn money from working as a registered nurse.

Ms Ferns submitted that the risk of repetition remains a real and valid concern. She stated that you have undertaken some mandatory training courses in November/December 2020 however, she submitted that they are of little relevance to the regulatory concern in your case. She further submitted that the testimonials provided by you are of limited assistance as they do not provide evidence that potential future risks have been substantially mitigated.

Ms Ferns submitted that you have demonstrated some insight into the seriousness of your actions, but you do not appear to have developed meaningful insight into the regulatory concern. She further submitted that your failings in this case could raise concern about your integrity as a nurse, and that your actions are so serious that they may not be capable of remediation.

Ms Ferns submitted that your fitness to practice is currently impaired on public interest grounds as your actions relate to core nursing requirements of honesty and integrity.

Mr Adamou submitted that you have a low risk of repeating these actions as you have accepted that your actions were dishonest and accepted that you put patients at a risk of

harm due to your actions. He reminded the panel that no actual harm was caused as a result of your actions.

Mr Adamou submitted that your actions could be seen to be prioritising people as you explained to the panel that you did not attempt to continue working for your personal benefit but because you had [PRIVATE] financially dependent on you.

Mr Adamou reminded the panel of your evidence that you explained that this experience has been of a nature and degree that has made an impression of the seriousness on you. He submitted that as you have explained how you would do things differently in the future and you have shown significant insight and remorse, that you no longer pose a risk to the public.

Mr Adamou referred the panel to the list of training courses you have completed, and the voluntary community work you have undertaken. Whilst he accepted that training has limited impact on dishonesty concerns, he submitted that the training you have undertaken is important to consider when determining whether your fitness to practice is currently impaired.

Mr Adamou submitted that the panel ought not to find your fitness to practice impaired on public interest grounds as he submitted that an informed member of the public would appreciate the contextual factors of your actions together with your admissions and insight and determine that your fitness to practice is not currently impaired.

Mr Adamou submitted that whilst you have made full admissions to being currently impaired, it is the panel who needs to determine this. He reminded the panel of the context surrounding your actions that you informed the panel of in your live oral evidence. He stated that you have explained that you were in a situation where you were obliged to continue working as a registered nurse in the healthcare industry as you have only ever worked in this industry, and [PRIVATE].

Mr Adamou submitted that you are a clearly candid and contrite registrant who has shown significant remorse and sought to provide an explanation for your behaviour. He further submitted that you have demonstrated a significant level of insight as you have accepted your actions were wrong and you have explained why they were wrong and what you would do differently in the future.

The panel accepted the advice of the legal assessor.

Decision and reasons on misconduct

When determining whether the facts found proved amount to misconduct, the panel had regard to the terms of the Code.

Charges 4 and 5 concern you dishonestly lying to the Police in a formal interview. The panel was of the view that your actions did fall significantly short of the standards expected of a registered nurse, and that your actions amounted to a breach of the Code. Specifically:

20 Uphold the reputation of your profession at all times

To achieve this, you must:

20.1 keep to and uphold the standards and values set out in the Code

20.2 act with integrity and honesty at all times

20.3 be aware at all times of how your behaviour can affect and influence the behaviour of other people

20.4 keep to the laws of the country in which you are practising

23 Cooperate with all investigations and audits

This includes investigations or audits either against you or relating to others, whether individuals or organisations. It also includes cooperating with requests to act as a witness in any hearing that forms part of an investigation, even after you have left the

register.

To achieve this, you must

23.3 *tell any employers you work for if you have had your practice restricted or had any other conditions imposed on you by us or any other relevant body.'*

The panel appreciated that breaches of the Code do not automatically result in a finding of misconduct. However, the panel was of the view that your actions were serious and fell seriously short of the conduct and standards expected of a nurse and amounted to misconduct.

Decision and reasons on impairment

The panel next went on to decide if as a result of the misconduct and convictions, 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 and to maintain professional boundaries. 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 one of the fundamental tenets of the medical profession; and/or*
- d) has in the past acted dishonestly and/or is liable to act dishonestly in the future.'*

The panel finds that patients were put at risk and could have been caused physical and emotional harm as a result of your misconduct and convictions as you were working with vulnerable adults whilst barred. The panel also determined that your misconduct and conviction had breached the fundamental tenets of the nursing profession and therefore brought its reputation into disrepute. It was satisfied that confidence in the nursing profession would be undermined if its regulator did not find charges relating to dishonesty extremely serious.

The panel bore in mind your evidence regarding the contextual factors at the time of the concerns. Nevertheless, whatever the context, the panel bore in mind your evidence that you understood the impact of your DBS barring and were dishonest in applying for registered nursing positions with this knowledge. The panel also determined that the dishonesty in you lying to the Police was serious.

Regarding insight, the panel considered that whilst you had demonstrated some level of insight, this insight was mainly personally focused. The panel determined that it would need to see further insight into the impact of your actions on your colleagues and the wider profession.

The panel bore in mind the training that you have undertaken together with the voluntary work you are currently doing. It determined that this training does not address the dishonesty concerns outlined.

The panel is of the view that there is a risk of repetition based on your repeated dishonesty. 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 determined that a finding of impairment on public interest grounds is required because an informed member of the public would be shocked if a finding of current impairment was not found against a registrant who has been repeatedly dishonest. In addition, the panel concluded that public confidence in the profession would be undermined if a finding of impairment were not made in this case.

Having regard to all of the above, the panel was satisfied that your fitness to practise is currently impaired.

Sanction

The panel has considered this case very carefully and has decided to make a striking-off order. It directs the registrar to strike you off the register. The effect of this order is that the NMC register will show that you have been struck-off the register.

In reaching this decision, the panel has had regard to all the evidence that has been adduced in this case and had careful regard to the Sanctions Guidance (SG) published by the NMC. The panel accepted the advice of the legal assessor.

Submissions on sanction

Ms Ferns submitted that the NMC is seeking a striking off order as it is the only suitable sanction to address the regulatory concerns. Ms Ferns submitted that the following aggravating features are present:

- This conduct was sustained over a period of time.
- You had clear knowledge of being debarred and continued to apply for and work in a barred role.
- You attended a voluntary police interview and continued to work in a barred role following this.

Ms Ferns submitted that the following mitigating features are present:

- You have shown some insight into your conduct.

Ms Ferns took the panel through the available sanctions in ascending order. She submitted that all other sanctions are not appropriate given the seriousness and dishonesty found in this case. She reminded the panel of its previous finding of a risk of repetition and its finding of impairment on public interest grounds. She submitted that a

striking off order is the only appropriate sanction in this case as the behaviours identified are fundamentally incompatible with remaining on the register.

Mr Adamou accepted that no order, a caution order and a conditions of practice order were not appropriate in this case. Mr Adamou submitted that the following mitigating factors are present:

- No previous regulatory findings.
- You do not lack insight, whilst it could be improved, it is still present.
- Not a circumstance of a pattern of misconduct over a period of time.
- Personal contextual factors.
- You have been fully cooperative.

Mr Adamou reminded the panel of the passing of time since these events. He stated that your actions were not for personal financial gain. Mr Adamou submitted that a suspension order is appropriate in this case. He submitted that you are a competent and useful registrant who presents no danger to the public. He submitted that the public interest does not demand a striking off order in this case.

Decision and reasons on sanction

Having found your fitness to practise currently impaired, the panel went on to consider what sanction, if any, it should impose in this case. The panel has borne in mind that any sanction imposed must be appropriate and proportionate and, although not intended to be punitive in its effect, may have such consequences. The panel had careful regard to the SG. The decision on sanction is a matter for the panel independently exercising its own judgement.

The panel took into account the following aggravating features:

- This conduct occurred over a long period of time, it was premeditated, systematic and longstanding deception.

- You had clear knowledge that you were barred and continued to work and apply for roles as a registered nurse, this was a deliberate breaching of your professional duty.
- Your conduct was for personal financial gain.
- During your voluntary police interview you lied to the police. When asked whether you were working as a registered nurse, you stated you were not working and you continued to work as a registered nurse following this interview.
- Patients were put at risk of harm by you continuing to work as a registered nurse whilst being barred.

The panel also took into account the following mitigating features:

- Some insight shown into your actions.
- You have shown a level of remorse.
- You have engaged and admitted to the charges against you.
- Your personal contextual factors at the time.
- Your admissions to the charges.

The panel determined that whilst your contextual factors provide an explanation into your actions, they cannot be seen as an excuse for your actions.

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 seriousness of the case. 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 your registration would be a sufficient and appropriate response. The panel is of the view that there are no practical or workable conditions that could be formulated, given the nature of the charges in this case. The misconduct identified in this case was not something that can be addressed through retraining. Furthermore, the panel concluded that the placing of conditions on your registration would not adequately address the seriousness of this case and would not protect the public.

The panel then went on to consider whether a suspension order would be an appropriate sanction. The SG states that suspension order may be appropriate where some of the following factors are apparent:

- *A single instance of misconduct but where a lesser sanction is not sufficient;*
- *No evidence of harmful deep-seated personality or attitudinal problems;*
- *No evidence of repetition of behaviour since the incident;*
- *The Committee is satisfied that the nurse or midwife has insight and does not pose a significant risk of repeating behaviour;*

The conduct was not a single instance of misconduct. There is evidence of harmful attitudinal problems. There is incomplete insight into the wider implications of your actions and so you do pose a significant risk of repeating this behaviour.

The conduct, as highlighted by the facts found proved, was a significant departure from the standards expected of a registered nurse. The panel noted that the serious breach of the fundamental tenets of the profession evidenced by your actions is fundamentally incompatible with you remaining on the register.

In this particular case, the panel determined that a suspension order would not be a sufficient, appropriate or proportionate sanction.

Finally, in looking at a striking-off order, the panel took note of the following paragraphs of the SG:

- *Do the regulatory concerns about the nurse or midwife raise fundamental questions about their professionalism?*
- *Can public confidence in nurses and midwives be maintained if the nurse or midwife is not removed from the register?*
- *Is striking-off the only sanction which will be sufficient to protect patients, members of the public, or maintain professional standards?*

The panel concluded that the only answers to the questions are (1) 'yes', (2) 'no', (3) 'yes'. It determined that your actions were significant departures from the standards expected of a registered nurse and are fundamentally incompatible with you remaining on the register. The panel was of the view that the findings in this particular case demonstrate that your actions were serious and to allow you to continue practising would undermine public confidence in the profession and in the NMC as a regulatory body.

The panel noted your positive character references and testimonials and your remorse and reflections into your actions. However, balancing all of these factors and after taking into account all the evidence before it during this case, the panel determined that the appropriate and proportionate sanction is that of a striking-off order. Having regard to the effect of your actions in bringing the profession into disrepute by adversely affecting the public's view of how a registered nurse should conduct your, the panel has concluded that nothing short of this would be sufficient in this case.

The panel considered that this order was necessary to protect the public, to mark the importance of maintaining public confidence in the profession, and to send to the public

and the profession a clear message about the standard of behaviour required of a registered nurse.

This will be confirmed to you in writing.

Interim order

As the substantive striking-off order cannot take effect until the end of the 28-day appeal period, the panel has considered whether an interim order is required in the specific circumstances of this case. It may only make an interim order if it is satisfied that it is necessary for the protection of the public, is otherwise in the public interest or in your own interests until the striking-off sanction takes effect. The panel heard and accepted the advice of the legal assessor.

Submissions on interim order

The panel took account of the submissions made by Ms Ferns. She submitted that an 18-month interim suspension order is necessary and proportionate to adequately protect the public and maintain the public interest over the statutory appeal period.

Mr Adamou submitted that there is a logic given that the panel has imposed a striking off order. He asked the panel to consider whether this order is necessary as you are not working as a registered nurse, and you are still on the debarred list. He submitted that an interim order is not necessary in the circumstances.

Decision and reasons on interim order

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

The panel was satisfied that an interim order is necessary for the protection of the public and is otherwise in the public interest. The panel had regard to the seriousness of the

facts found proved and the reasons set out in its decision for the substantive order in reaching the decision to impose an interim order.

The panel concluded that an interim conditions of practice order would not be appropriate or proportionate in this case, due to the reasons already identified in the panel's determination for imposing the substantive order. The panel therefore imposed an interim suspension order for a period of 18 months in order to adequately protect the public and maintain public confidence in the profession over any appeal period.

If no appeal is made, then the interim suspension order will be replaced by the substantive striking off order 28 days after you are sent the decision of this hearing in writing.

That concludes this determination.