

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

**Substantive Hearing
Monday 4 – 7 September 2023**

Virtual Hearing

Name of Registrant: Shade Adewale

NMC PIN: 04G0944O

Part(s) of the register: Registered Nurse – Sub Part 1
Adult Nursing – July 2004

Relevant Location: Bristol

Type of case: Conviction/Misconduct

Panel members: Bernard Herdan (Chair, lay member)
Dorothy Keates (Registrant member)
Kevin Connolly (Lay member)

Legal Assessor: Michael Hosford-Tanner

Hearings Coordinator: Ruth Bass

Nursing and Midwifery Council: Represented by Terence Merck, Counsel
instructed by the NMC

Mrs Adewale: Present and represented by Qudus Alalafia,
Counsel

Facts proved: Charges 1, 2, 3, 4, 5 and 6

Facts not proved: N/A

Fitness to practise: Impaired

Sanction: Striking-off order

Interim order: Interim suspension order (18 months)

Details of charge as amended

'That you, a Registered Nurse

- 1) On ~~10~~ 21 January 2022 at Bristol Crown Court were convicted of acquiring/using/possessing criminal property contrary to section 329 of the Proceeds of Crime Act 2002 **[Admitted]**

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

That you, a Registered nurse

- 2) Failed to disclose your criminal charge to your employer in a timely manner or at all. **[Admitted]**
- 3) Failed to notify the NMC that you had been charged with a criminal offence in a timely manner or at all. **[Admitted]**
- 4) Failed to disclose your criminal conviction to your employer in a timely manner or at all. **[Admitted]**
- 5) Failed to notify the NMC that you had been convicted of a criminal offence in a timely manner or at all. **[Admitted]**
- 6) Your actions as specified in one or more of the charges from 2 to 5 were dishonest and/or lacking in integrity in that you knew or ought to have known you had a duty to disclose your criminal conviction. **[Admitted]**

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

Decision and reasons on application to amend schedule of charge

The panel heard an application made by Mr Merck, on behalf of the Nursing and Midwifery Council (NMC), to amend the wording of charge 1.

The proposed amendment was to change the date in charge 1 from 10 January 2022 to 21 January 22. It was submitted by Mr Merck that the incorrect date for the conviction had been recorded due to an NMC administration error, and there was no reason why the charge should not reflect the correct date. He further submitted that the amendment was not prejudicial to you and invited the panel to amend the charge as follows:

‘That you, a Registered Nurse

- 1) On ~~10~~ 21 January 2022 at Bristol Crown Court were convicted of acquiring/using/possessing criminal property contrary to section 329 of the Proceeds of Crime Act 2002’

...

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

Mr Alalafia, on your behalf, did not oppose the application.

The panel accepted the advice of the legal assessor and had regard to Rule 28 of ‘Nursing and Midwifery Council (Fitness to Practise) Rules 2004’, as amended (the Rules).

The panel was satisfied that the proposed amendment reflected the correct date of your conviction as stated on the Certificate of Conviction, and that the correct date had been known to both parties. The panel was satisfied that there would be no prejudice to you and no injustice would be caused to either party by the proposed amendment being

allowed. It therefore determined that it was appropriate to allow the amendment, as applied for, to reflect the evidence.

Background

The charges arose whilst you were employed as a registered nurse by University Hospitals Bristol NHS Foundation Trust (the Trust).

On 3 December 2023 you were charged with acquiring/using/possessing criminal property. You were subsequently convicted on 21 January 2022 at Bristol County Court. In a complex web of transactions, it was found that proceeds of crime to a total amount of £114,945.95 had been transferred to an account in your name and then transferred to numerous other accounts. The principal mover in the fraud was accepted by the sentencing judge to have been [PRIVATE] and that your role was secondary.

It is alleged that on 8 December 2021 you were approached by a senior employee at the Trust who had been informed that you had requested to leave work early due to a matter involving the police. It is alleged that during this conversation you were not forthcoming with much detail and stated that [PRIVATE] had been arrested and interviewed by the police, and that you were being interviewed to confirm that you had no part of it. You did not disclose that you had been charged on 3 December 2021 although the Trust policy required you to notify the Trust of any charge as soon as possible.

It is alleged that you had further opportunities to disclose your arrest to the Trust; namely during a 1-1 meeting on 18 January 2022 where you were asked if you wanted to disclose what was happening with the police, you declined to disclose any information advising that you were seeking advice from your union. Also, on 28 January 2022 a local newspaper article reported that you had plead guilty in court to the charge '*acquire/ use/ possess criminal property*'. You were working full time at this point for the Trust and had failed to notify them that you had been released on bail (having been convicted). It was on this day that senior staff at the Trust approached you for information which you declined to give. You were then suspended by the Trust.

A self-referral was received by the NMC on 30 January 2022 from you, and a further referral was received from the Trust on 31 January 2022 informing the NMC that you had pleaded guilty on the 21 January 2022 to '*acquire/use/possess criminal property*'.

On 14 March 2022, you were sentenced at Bristol Crown Court to 18 months imprisonment suspended for 2 years and ordered to complete 100 hours unpaid work.

It is alleged that you were convicted of acquiring/using/possessing criminal property, and that you failed to inform the Trust and the NMC of your charge and conviction, and further that your actions in doing so were dishonest and lacked integrity.

Decision and reasons on facts

At the outset of the hearing, the panel heard from Mr Alalafia, who informed the panel that you made full admissions to all the charges.

The panel therefore found charges 1, 2, 3, 4, 5 and 6 proved in their entirety, by way of your admissions. The panel also received the Certificate of Conviction in relation to charge 1 which it accepted as conclusive evidence. Mr Alalafia confirmed that your admission in respect of charge 6 was an admission as to both dishonesty and lacking in integrity.

The parties therefore agreed that Witness 1 and Witness 2 did not need to give oral evidence and that their statements would stand as their evidence. The panel had also received documents from Mr Alalafia on your behalf, which included written submissions, training certificates, your written reflections, proof of unpaid working hours completed under your criminal sentence, and testimonials.

Fitness to practise

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. 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.

Having announced its finding in relation to charge 1, the panel considered whether, on the basis of this charge having been found proved, your fitness to practise is currently impaired by reason of your conviction.

With regard to charges 2 – 6, the panel adopted a two-stage process in its consideration. First, the panel must determine whether the facts found proved 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.

Submissions on misconduct and impairment

Mr Merck submitted that your actions in relation to charge 1 involved an inherent element of dishonesty. He informed the panel that a sentence of 18 months, suspended for two years, had been handed down on 14 March 2022, and submitted that a finding of current impairment was necessary as the two years had not expired since the court's decision. He submitted that it would be exceptional for this panel to make a finding contrary to the courts sentencing, that your fitness to practise is not impaired. He further submitted that notwithstanding the references provided by you, there was nothing to suggest that your current impairment had been mitigated or remedied.

With regard to charges 2 – 6, Mr Merck submitted that charges 2 and 3 related to matters of disclosure. He submitted that you had a duty to notify your employer of your charge and conviction under sections 5.4 and 5.5 of the Trust's Staff Conduct Policy. He submitted that, having been charged on 3 December 2021, you should have notified your employer, and that not disclosing your charge and conviction was a serious departure from acceptable standards.

Mr Merck further submitted that your conviction entailed elements of dishonesty. He submitted that charges 1 – 5 compounded was sufficient to paint a picture of dishonesty.

Mr Merck submitted that there had been insufficient insight in your reflective accounts to demonstrate your awareness of the issues relating to dishonesty, failure to disclose, or benefiting from the wrongful conduct of others. He further submitted that your acceptance of the charges did not go far enough to show that there is insight, and it could not be said that your fitness to practise is no longer impaired.

Mr Alalafia did not make any submissions with regard to misconduct. He submitted that the matters you are facing related to not informing the NMC or your employer of matters that did not relate to professional standing. He submitted that despite your mistaken belief that you did not have to report such issues, you had admitted all of the charges and impairment.

The panel accepted the advice of the legal assessor.

Decision and reasons on impairment in respect of charge 1

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

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

In this regard the panel considered the judgment of Mrs Justice Cox in the case of *CHRE v NMC and Grant (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/their fitness to practise is impaired in the sense that S/He/They:

- 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 was of the view that limbs a, b, c and d are engaged. It acknowledged that there was no evidence of patient harm in respect of your behaviour which led to your conviction. However, the panel found that dishonesty can result in harm to patients as

registrants who are inherently dishonest may have a propensity to behave dishonestly in their clinical role, for example to hide or fail to report matters which might lead to patient harm.

With regard to limb b, the panel was satisfied that you had breached a fundamental tenet of the nursing profession to act with honesty and integrity and comply with the laws of the country in which you are practising. The panel was satisfied that the breach of this fundamental tenet had brought the reputation of the profession into disrepute. It was also satisfied that the nature of your conviction, namely being involved in fraud to the value of £114,945.95 by acquiring/using/possessing property over a prolonged period which you knew or suspected of having been obtained by criminal means, namely fraud by [PRIVATE], amounted to dishonest conduct. Moreover confidence in the nursing profession would be undermined if its regulator did not find charges relating to such matters of dishonesty to be serious.

Regarding insight, the panel noted that you had pleaded guilty in the criminal justice proceedings and had admitted the charges at this hearing. However, it was of the view that your insight failed to extend beyond your admissions. It had regard to your reflective pieces and noted your remarks that you had undertaken the criminal activity because you had been told to do so by [PRIVATE], and your comments with regard to feeling unsupported at work which suggested this had a bearing on your dishonest actions. The panel noted that you had acknowledged that some patients may not wish to be treated by you if they had knowledge of your conviction. However, it was of the view that your insight was somewhat introverted, limited to pressures you had faced, and an acceptance that you had been convicted. You showed little insight into the impact of your actions in undermining professional standards and public trust in the nursing profession. It had no information regarding how you would handle the situation differently should someone who you felt you could not challenge asked you to do something illegal in the future.

In light of your limited insight and failure to demonstrate what you would do differently if similar circumstances were to arise, the panel is of the view that there is a risk of repetition of dishonesty in a clinical setting.

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 are to protect, promote and maintain the health safety and well-being of the public and patients, and to uphold/protect the wider public interest, which 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, in this case, a finding of impairment on public interest grounds was also required. It was of the view that members of the public would be concerned if a nurse who had been convicted of acquiring/using/possessing criminal property to the value of £114,945.95 was allowed to practise without restriction.

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

Decision and reasons on misconduct and impairment in respect of charges 2 – 6

Having announced its findings in relation to charges 2 – 6, the panel then moved on to consider, whether the facts found proved amount to misconduct and, if so, whether your fitness to practise is currently impaired by reason of that misconduct.

The panel adopted a two-stage process in its consideration. First, the panel must determine whether the facts found proved 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.

Decision and reasons on misconduct in respect of charges 2 – 6

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.’. Further in the case of *Johnson and Maggs v NMC* 2013 EWHC 2140 admin, the Court stated that misconduct would be found if the conduct involved a serious departure from acceptable standard.

When determining whether the facts found proved amount to misconduct, the panel had regard to the terms of *The Code: Professional standards of practice and behaviour for nurses and midwives (2015)*’ (the Code).

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 did amount 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 honesty and integrity at all times, treating people fairly and without discrimination, bullying or harassment

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

20.8 act as a role model of professional behaviour for students and newly qualified nurses, midwives and nursing associates to aspire to

23 Cooperate with all investigations and audits

...To achieve this, you must:

23.2 tell both us and any employers as soon as you can about any caution or charge against you, or if you have received a conditional discharge in relation to, or have been found guilty of, a criminal offence (other than a protected caution or conviction)

The panel appreciated that breaches of the Code do not automatically result in a finding of misconduct. However, with regard to charges 2 and 4 the panel had regard to section 5.5 of the Trust's Staff Conduct Policy which states:

'...An employee who is arrested and charged, or served with a summons on a criminal charge is required to inform their line manager of the situation as soon as possible. A conviction for a criminal offence which is not directly related to an individual's employment may still be regarded as gross misconduct resulting in summary dismissal. However, the fact that an employee has been charged, remanded in custody, or convicted of a criminal offence not related to their employment, will not be regarded as an automatic reason for dismissal or other disciplinary action.'

It also had regard to section 23.2 of the Code which places a duty on nurses to *'tell both us [the NMC] and any employers as soon as you can about any caution or charge against you, or if you have received a conditional discharge in relation to, or have been found guilty of, a criminal offence (other than a protected caution or conviction)'*. The panel noted that your sentence did not relate to a protected caution or conviction.

The panel was of the view that this was a duty known to you, having been provided with a copy of the policy upon your induction at the Trust, and due to you being an experienced registered nurse regulated by the NMC Code. It had regard to the fact you were charged on 3 December 2021, and had a meeting with a senior employee at the Trust on 8 December 2021 where you were asked about your interactions with the police. You did not notify your employer at this point that you had been charged with a criminal offence, despite your employer's encouragement to disclose such details. It further had regard to the fact that you pleaded guilty to the charge on 21 January 2022 and continued to work without notifying your employer until the matter came to light in a local newspaper article on 28 January 2022. Even at that stage you declined to give your employer any information of the criminal matters when asked to do so the same day. It was of the view that you had ample opportunity to inform your employer of your charge and subsequent conviction and had failed to do so despite prompting from the Trust. It was therefore of the view that your failure to disclose your charge and

conviction to your employer fell far short of the conduct and standard expected of a registered nurse and amounted to misconduct.

With regard to charges 3 and 5 the panel again had regard to section 23.2 of the Code which places a duty on nurses to *'tell both us [the NMC] and any employers as soon as you can about any caution or charge against you, or if you have received a conditional discharge in relation to, or have been found guilty of, a criminal offence (other than a protected caution or conviction)'*.

The panel was satisfied that there was a clear duty within the Code which required you to disclose both your charge and conviction to the NMC. Again, the panel had regard to the fact that you only informed the NMC of your charge and conviction on 30 January 2022, following exposure by a local newspaper article on 28 January 2022; despite having been charged on 3 December 2021 and convicted on 21 January 2022. The panel was of the view that your repeated failure to disclose your charge and conviction to the NMC fell far short of the conduct and standard expected of a registered nurse and amounted to misconduct.

With regard to charge 6, the panel was of the view that your actions in relation to charges 1 – 5, demonstrated that you had acted dishonestly and lacked integrity. It was of the view that you knew you had a duty to disclose your charge and conviction and failed to do so despite being questioned numerous times by your employer. It further noted that your dishonesty had gone further by explaining that your police interactions were in relation to [PRIVATE] and did not relate to you. The panel found that your actions in this regard would be regarded as deplorable by fellow colleagues and informed members of the public and fell far below the standards expected of a registered nurse. It therefore found that your actions with regard to charge 6 amounted to misconduct.

Decision and reasons on impairment in respect of charges 2 – 6

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

It again had regard to the test set out in the case of *Grant* and was of the view that limbs a, b, c, and d are engaged. It acknowledged that there was no evidence of patient harm in respect of your misconduct. However, it was of the view that dishonest conduct can result in harm to patients as registrants who are inherently dishonest may have a propensity to behave dishonestly in their clinical role, for example to hide or fail to report matters that could lead to patient harm.

The panel was satisfied that you had breached fundamental tenets of the nursing profession by behaving dishonestly and failing to disclose a charge and conviction to the NMC and your employer. The panel was satisfied that the breach of this fundamental tenet had brought the reputation of the profession into disrepute. It was also satisfied that your failure to disclose amounted to dishonest conduct, and that confidence in the nursing profession would be undermined if its regulator did not find charges relating to matters of dishonesty serious.

Regarding insight, the panel had regard to the fact that you had pleaded guilty in the court proceedings and had admitted all of the charges at this hearing through Mr Alalafia. It also appreciated that you had attended the hearing in person. It was of the view that this demonstrated some insight on your behalf, albeit limited.

The panel had regard to your reflective pieces and noted that the main consideration contained therein amounted to personal reflection about loss of family respect. The panel also noted that there was no reflection concerning the impact of your actions upon your colleagues, or the nursing profession. Furthermore, it found that you had not demonstrated a clear understanding of how conduct not directly related to your nursing practice can influence or affect the same.

The panel noted your comment *'Personally I have never had any issues since I got to this country in 2004 and started working as a nurse, this is my first issue with the police and as a result I have learned a lot and have also reflected a lot as well. I can assure you that this incident will never happen again I have also changed my bank*

passwords and it has more security protection now [PRIVATE] as well. The panel noted your assertion that *'this incident will never happen again'*. However, in light of your limited insight, including:

- your failure to recognise how dishonest behaviour may impact upon one's nursing practice;
- your failing in professional responsibility at the time of the charge to inform your regulator or employer; and
- the impact of your actions on your professional standing

the panel had insufficient material before it, including any evidence of remediation, to find that your misconduct would not be repeated in a clinical setting.

The panel also had regard to the dishonest nature of your actions and was of the view that although dishonesty could be remedied, it was difficult to do so. It was of the view that you had failed to demonstrate an understanding of how dishonesty can impact one's nursing practise, and the impact of dishonest conduct on the nursing profession and public trust in nurses.

In light of your limited insight and failure to demonstrate any steps taken to remedy your misconduct, the panel had no material to suggest that the misconduct would not be repeated. The panel therefore decided that a finding of impairment is necessary on the grounds of public protection.

The panel again considered the overarching objectives of the NMC which includes promoting and maintaining public confidence in the nursing and midwifery professions and upholding the proper professional standards for members of those professions. It was of the view that informed members of the public would expect nurses to be honest and open when they did something wrong, and that public confidence in the profession would be undermined if a finding of impairment were not made in this case. It therefore found your fitness to practise impaired on public interest grounds.

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

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

Mr Merck informed the panel that the NMC had advised you, by way of the sanction bid contained in the Notice of Hearing, that it would seek the imposition of a striking off order if the panel found your fitness to practise to be currently impaired. He submitted that the misconduct in this case was serious, involving a lack of candour to colleagues and to the NMC by failing to disclose your misconduct over a long period of time.

Mr Merck submitted that a striking off order was required to maintain public safety and act as a deterrent to others. He submitted that nurses must be open and honest and act with integrity, and that you had brought the profession into disrepute having taken into account your serious conviction and the large sum involved. Mr Merck submitted that a striking off order was therefore also necessary to maintain public confidence in the profession and invited the panel to impose a striking off order.

The panel also had regard to Mr Alalafia's submissions. He invited the panel to impose any sanction other than a striking off order.

Mr Alalafia submitted that this case had been before the sentencing judge who had heard all the facts of the criminal case and had made sympathetic remarks in your favour indicating that you be able to continue to practise as a nurse and had deemed your role in this criminal offending secondary.

Mr Alafia submitted that you had engaged throughout the proceedings and accepted all the charges in a timely manner. He submitted that a suspension order could be satisfactory, given that you had been found to have had a secondary role in the criminal activity. He further submitted that the panel should take into account that you have had no previous convictions or issues in your 24 year career and that although the panel may conclude you need to be punished, it should not be the most serious punishment. He submitted that you had found yourself in a sorry state as a result of [PRIVATE] actions and that experience would serve as a deterrent in the future. He submitted that you had complied with the court order of working 100 hours without pay and had undergone a series of training courses to right your wrongs. Mr Alafia asked the panel to give you a chance to “*double your good work*”, and that if you were to repeat this behaviour in the future you should be struck off at that point. He asked the panel to temper justice with mercy and not award the highest sanction available.

The panel also had regard to Mr Alafia’s written submissions.

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:

- Serious criminal offence and conviction relating to a significant amount
- Lack of insight into your failings, in particular the impact of dishonesty on the reputation of your profession and the victims of your criminal activity
- A pattern of criminal behaviour and misconduct, involving dishonesty, which continued over a period of time

- Dishonesty for significant financial personal gain
- Minimisation of your role in the criminal activity.

The panel also took into account the following mitigating features:

- Pleaded guilty at Court
- Early admissions and engagement with the NMC throughout the fitness to practise process
- Your claim of pressure from [PRIVATE] who the court found was the “*prime mover...*” who drew you into offending.
- No patient harm.

The panel took full account of the section of the SG entitled ‘*Cases involving dishonesty*’, also the NMC guidance entitled ‘*Serious concerns based on public confidence or professional standards*’ and ‘*Criminal convictions and cautions*’.

The panel first considered whether to take no action but concluded that this would be inappropriate in view of the seriousness of the case and the public protection issues identified. 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 conviction and 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 and the large sum of money involved. 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 mindful that any conditions imposed must be proportionate, measurable and workable. The panel took into account that your clinical practice was not in question, and as such was of the view that there were no practical or workable conditions that could be formulated given the non-clinical nature of the charges in this case. Further, the panel was of the view that due to the dishonesty found in this case, a conditions of practice order would not adequately address the seriousness of this case, reduce the risk of repetition, or protect the public.

The panel then went on to consider whether a suspension order would be an appropriate sanction. The SG states that a 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 panel was of the view that the following applied in your case:

- This was not a one-off incident
- Your actions were indicative of attitudinal problems
- Your actions amounted to premediated longstanding deception where you sought to conceal your serious criminal behaviour and conviction from your employer and the NMC
- Your limited insight meant that you posed a significant risk of repeating your dishonest behaviour.

The panel did not find evidence of a deep-seated harmful personality. However, it was of the view that there are attitudinal issues. It noted that although you had pleaded guilty and admitted criminal charges and the NMC charges, you had

failed to take meaningful personal or professional responsibility for your actions, blaming cultural issues, [PRIVATE] influence and feeling unsupported at work. The panel was of the view that this went hand in hand with your lack of insight into your failings. It noted that you have had some 19 months since you were initially charged and that to date you have not demonstrated any meaningful insight into your actions and how this could affect the reputation of the nursing profession. The panel noted your comment *'members of the public might not possibly be happy for me as a nurse...they might not want to be involved with a convicted person'* but found this to be wholly inadequate. You did submit reflective statements but these failed to address your understanding of the damage you may have caused the public trust in the profession and your role in upholding professional standards. It noted that although you had shown some regret for your actions, there had been no evidence of any real remorse or understanding of how this type of crime affects people's lives. The panel also noted that the summary of the criminal investigation stated that the money received by you was distributed between family members and to bank accounts outside of the UK's jurisdiction. It had little information regarding what had been done with these proceeds of crime. However, it noted that land with planning permission had been purchased in the joint names of you and [PRIVATE] in Nigeria and the police found documents at your home of residential plans and Nigerian residential planning permission. The panel did not go beyond the court's assessment in finding that your role was secondary, but noted the evidence that you were a beneficiary to the proceeds of crime.

In considering your role as secondary in the criminal proceedings, the panel had regard to guidance *'Considering sanctions for serious cases'* which states:

'It's clear that the Committee's purpose isn't to punish the nurse, midwife or nursing associate for a second time. Because of this, the sentence passed by the criminal court isn't necessarily a reliable guide to how seriously the conviction affects the nurse, midwife or nursing associate's fitness to practise. So, the personal circumstances or mitigation of the nurse, midwife or nursing associate is also less likely to be useful or helpful to the Fitness to Practise Committee when making a sanction decision than it would have been to the criminal court.'

Cases about criminal offending by nurses, midwives or nursing associates illustrate the principle that the reputation of the professions is more important than the fortunes of any individual member of those professions. Being a registered professional brings many benefits, but this principle is part of the 'price'.

The panel was of the view that the Judge involved in your criminal case would have been considering the criminal activity where [PRIVATE] had been described as the prime mover. However, with regard to your professional behaviour and to notifying your employer and the NMC of your charge and conviction, these were duties for which you had primary responsibility. There is no indication that the Judge was aware of your failure to inform your employer and the NMC, contrary to the Code and the policy of the Trust. Indeed paragraph 5.5 of the Trust's policy specifically sets out your responsibilities outside of your workplace and that you were liable to summary dismissal if you committed crimes even if outside the hospital. Despite this you have claimed in these proceedings that your crime was a family matter and you did not think it had to be disclosed. Although you have engaged in the NMC fitness to practise process you persisted in claiming that you did not have to disclose criminal matters to your employers of the NMC in 2021 because you claimed you had not been charged. However, the panel has received evidence that you were indeed charged with the criminal offences on 3 December 2021.

The panel is of the view that you have demonstrated a pattern of behaviour in blaming others rather than developing your insight to understand the impact of your actions and involvement. You were charged and convicted of a serious crime and repeatedly failed to inform your employer and the NMC, despite being guided by your employer of your duty to do so, and maintained a level of deception until your conviction was revealed by way of a newspaper article. The panel was satisfied that your conduct, as highlighted by your conviction and misconduct, was a significant departure from the standards expected of a registered nurse. The panel determined that the serious breach of the fundamental tenets of the profession evidenced by your actions, together with your ongoing lack of insight is fundamentally incompatible with your 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 answered affirmatively to all of the above questions. Your actions were significant departures from the standards expected of a registered nurse which raised fundamental questions about your professionalism and represented a failure in recognising your responsibilities as a nurse and to your profession. It was satisfied that your actions are fundamentally incompatible with you remaining on the register. The panel was of the view that the findings in this particular case demonstrate 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.

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 themselves, the panel has concluded that nothing short of this would be sufficient in this case.

The panel considered that this order was necessary 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 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 Mr Merck. He invited the panel to impose an interim suspension order for a period of 18 months. He submitted that this order was necessary to maintain public confidence in the profession and uphold the standard of a nurse. He further submitted that 18 months would be sufficient to cover an appeal period if needed.

The panel also took into account the submissions of Mr Alalafia who did not oppose the application.

Decision and reasons on interim order

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 to cover any appeal period.

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

That concludes this determination.