

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

**Substantive Order Review Hearing  
Tuesday, 27 February 2024**

Virtual Hearing

**Name of Registrant:** Dylan James Sinnott

**NMC PIN** 0014811E

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

**Relevant Location:** Leeds

**Type of case:** Lack of competence

**Panel members:** Elliott Kenton (Chair, Lay member)  
Alexandra Hawkins-Drew (Registrant member)  
Rosalyn Mloyi (Registrant member)

**Legal Assessor:** John Bromley-Davenport KC

**Hearings Coordinator:** John Kennedy

**Nursing and Midwifery Council:** Represented by Beverley Da Costa, Case Presenter

**Mr Sinnott:** Present and represented by Julia Flanagan, instructed by Royal College of Nursing (RCN)

**Order being reviewed:** Suspension order (12 months)

**Fitness to practise:** Impaired

**Outcome:** **Conditions of practice order (24 months)  
to come into effect on the end of 6 April 2024  
accordance with Article 30 (1)**

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

[PRIVATE]

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

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

This order will come into effect at the end of 6 April in accordance with Article 30(1) of the 'Nursing and Midwifery Order 2001' (the Order).

This is the sixth review of a substantive conditions of practice order originally imposed for a period of 12 months by a Fitness to Practise Committee panel on 2 March 2018. This was reviewed on 26 February 2019 and the substantive conditions of practice order was confirmed and extended for 12 months. The second review took place on 28 February 2020, where the substantive conditions of practice order was varied and extended for 12 months. The third review took place on 24 February 2021, where the conditions of practice order was confirmed and extended for 12 months. The fourth review took place on 22 February 2022, where the conditions of practice order was confirmed and extended for 12 months. The fifth review took place on 14 March 2023, where the conditions of practice order was replaced with a suspension order for 12 months in accordance with Article 30 (1).

The current order is due to expire at the end of 6 April 2024.

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 failed to demonstrate the standards of knowledge, skill, and judgement required to practise without supervision as a band 5 nurse in that:*

1. *Between 21 - 23 December 2015 you did not apply a dressing in the manner instructed by the "Hotfoot" team to an unknown patient;*  
**[proved by admission]**
2. *On 6 February 2016:*
  - 2.1. *Did not undertake any medical assessment of a patient who had been reported as having a fit and/or appearing agitated; [proved by admission]*
  - 2.2. *Did not document any concerns mentioned at charge 2.1, above;*  
**[proved by admission]**
  - 2.3. *Did not mention the information at charge 2.1, above, at handover;*  
**[proved by admission]**
  - 2.4. **[not proved]**
3. *Between 18 April – 26 May 2016 whilst subject to informal supervision you:*
  - 3.1. *Did not identify patients before administering medication on one or more occasion; [proved by admission]*
  - 3.2. *Left the drug trolley open and unattended on one or more occasion;*  
**[proved by admission]**
  - 3.3. *Did not complete care plan documentation on one or more occasion;*  
**[proved by admission]**
  - 3.4. *Did not attend safety huddles as requested on one or more occasion;*  
**[proved by admission]**
  - 3.5. **[not proved]**
  - 3.6. *Signed for the administration of thickened Fresubin on 21 April 2016 when it had not been administered; [proved by admission]*
  - 3.7. *Between 18 - 22 April 2016 did not change a dressing on a patient as requested; [proved]*
  - 3.8. *Did not document a discharge conversation on a patient's kardex on 25 April 2016; [proved]*
  - 3.9. *Did not complete the morning medication round within 1 hour 45 minutes on 28 April 2016; [proved by admission]*
  - 3.10. *Did not follow instructions regarding the discharge of patients on one or more occasions; [proved]*

4. On 20 May 2016 in respect of Patient A:
  - 4.1. Did not administer Parkinson's medication by 12pm; **[proved by admission]**
  - 4.2. Administered Parkinson's medication without checking the medication chart; **[proved by admission]**
  - 4.3. Administered Parkinson's medication without checking patient A's identity; **[proved by admission]**
  
5. On 20 May 2016 left medicine unattended on the nurses station; **[proved]**
  
6. Whilst subject to formal supervision you:
  - 6.1. On or around 15 June 2016 left patient medication unattended on one or more occasion; **[proved]**
  - 6.2. On or around 15 June 2016 gave and/or attempted to give medication without the drugs chart present to patient B and/or patient C; **[proved]**
  - 6.3. On 20 June 2016 and/or 12 August 2016 failed your drugs administration assessment; **[proved by admission]**
  - 6.4. **[not proved]**
  - 6.5. On 24 June 2016 did not check a patient's identification whilst administering insulin; **[proved]**
  - 6.6. On 27 June 2016 did not check patient identification prior to administering medication; **[proved]**
  - 6.7. **[not proved]**
  - 6.8. **[not proved]**
  - 6.9. On or around 11 July 2016 discharged a patient without all their required medication; **[proved]**
  - 6.10. Between 25 -31 July 2016 left the medication trolley unlocked and/or unattended; **[proved by admission – first limb] [proved – second limb]**
  - 6.11. On or around 5 August 2016:
    - i) failed to adequately communicate with Patient D in relation to her PEG feed; **[proved]**

- ii) failed to respond appropriately and/or in a timely manner to the Patient D's buzzer; **[proved]**
- 6.12. Between around 10-12 August 2016 stated in the notes of an unknown patient, "left leg ulcer vulnerable" or words to that effect, when you had not assessed her leg; **[proved by admission]**
7. Whilst working as Band 2 Care Support Worker you:
- 7.1. On or around 22 September 2016 failed to report the raised National early Warning Scores of three patients to a more senior colleague; **[proved]**
- 7.2. **[not proved]**

At the previous review, the panel were asked to consider a number of other concerns that related to a breach of your conditions of practice:

*'Prior to conducting the statutory review of the current conditions of practice order, the panel was asked to make findings of fact in respect of new alleged concerns raised by your current employer. The NMC alleges that these concerns, if proved, amount to a breach of your current conditions of practice. The alleged concerns are:*

- You removed a patient's IV without supervision and when not trained to do so. **[Proved by admission]**
- You unsuccessfully (and without training or supervision) attempted to suction a patient. **[Proved]**

*Ms Kay submitted that the NMC had become aware of concerns raised by your current employer which, in the view of the NMC, indicated a potential breach of condition 4 of the conditions of practice currently imposed on your registration. She outlined the background of the case and drew the panel's attention to the documentation contained within the bundles. In relation to the new concerns, Ms Kay drew the panel's attention to the Investigation Meeting Notes dated 21 February 2023 from the investigation by your employer, Leeds Teaching Hospitals NHS Foundation Trust (the Trust).*

*Ms Deignan indicated on your behalf that one of the concerns is admitted by you, and the other is partially admitted.'*

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

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

*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 noted that the last reviewing panel found that you had some insight but that this required further development in relation to the risk and impact to patients as a result of your actions. This panel was of the view that your insight is still developing in that you acknowledge where your conduct fell short but that you do not address the impact your behaviour had on patients when carrying out procedures that you were not trained in.*

*The panel recognises that you have undertaken 70% of your training but it has not yet been completed. There is nothing before the panel today that shows you have fully remedied the deficiencies identified.*

*The panel considered that in the short period since you returned to nursing practice, you had not been able to demonstrate that your original failings and lack of competence have been remedied. This has been compounded by breaches of your conditions of practice involving further failings of a similar nature. The failings involved a lack of recognition of the boundaries of your skills, knowledge and competence, and involved significant risk to patients. The panel further noted that the new concerns had arisen at a time when you were receiving significant support*

*and subject to direct supervision. It considered that there remained a significant risk of repetition without further training and support.*

*The panel was further concerned that you had demonstrated only limited reflection and insight into your original failings and into the recent concerns. The personal development plan you had produced was basic and limited in nature, not demonstrating how you would achieve identified goals, and you appeared not to have been proactive in seeking support and training, instead leaving it to those managing you to identify your needs and the gaps in your practice.*

*The panel was troubled that on two occasions, and despite the limitations in the scope of your practice being explicitly drawn to your attention after the first occasion, you had carried out procedures which were beyond your capabilities at the time, rather than seeking support or assistance. These suggested an unwillingness or inability to engage fully with the steps put into place to support you, a lack of insight into the potential risks and consequences associated with your failings, and potentially also an attitudinal aspect to the lack of remediation to date.*

*The panel considered the points raised by Ms Deignan. It acknowledged that there had been a significant break in your practice, and that your training, skills and confidence were likely to have deteriorated during that period. However, it was concerned that, because of the ongoing deficit in your insight and your apparent inability thus far to engage fully with the remediation of your practice, you did not appear to recognise the limitations in your knowledge and skills when working in your role as a nurse. Until you fully recognise those failings and can demonstrate yourself capable of taking proactive steps to identify and address those limitations yourself, the panel considered that there remains an ongoing risk to patients.*

*The panel therefore concluded that your fitness to practise remains impaired on public protection grounds.*

*The panel has also had regard to wider public interest considerations, including 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. It considered that members of the public would be concerned to learn that a member of the profession was allowed to return to unrestricted practice when there were ongoing concerns and deficiencies in insight and remediation.*

*For these reasons, the panel finds that your fitness to practise remains impaired on both public protection and wider public interest grounds.*

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

*'The panel next considered a suspension order. It noted that you still wish to affect a return to safe nursing practice and say that you are willing to take the steps necessary to achieve this. It considered that the failings identified in this case remain remediable if you can take those steps.*

*The panel had some reservations about whether a suspension order would provide any benefit. For the reasons set out above, it had concerns about whether you were capable of addressing the deficiencies in your understanding and insight or identifying and taking the necessary steps to address the shortfall in your knowledge and skill. It noted that you had not succeeded in doing so despite a conditions of practice order being in place for some years, and despite being provided with considerable support and supervision. As set out above, it considered that there was a potential attitudinal aspect to the ongoing issues in this case, including a failure to take responsibility for your own development.*

*In light of its reservations, the panel went on to consider whether a striking-off order would be appropriate and proportionate in this case. It noted that although conditions of practice have been in place for a number of years, you have only recently sought to affect a return to nursing, and that it appears that you were not yet ready to do so. However, it accepted that you have, albeit belatedly, shown a commitment to the profession by seeking to do so. As already set out, the panel considered that the failings identified in this case remain remediable, provided you are able to take the additional steps necessary to address them.*



*The panel considered that this case was very much on the cusp between a suspension order and a striking-off order. It had careful regard to the SG in relation to both sanctions and concluded that elements of the guidance for both sanctions were met in this case. It was mindful, however, of the principle that it should weigh the competing interests to reach a proportionate decision, and should impose the least restrictive sanction which would be sufficient to protect the public and address the public interest considerations identified in this case.*

*The panel considered that the public would be protected by a suspension order which would prevent you from practising unless and until you can demonstrate to a future reviewing panel that you are capable of safe practice. It considered that a suspension order would be sufficient to address any public interest considerations in this case.*

*The panel further considered that a suspension order would allow you further time in which to reflect on the failings identified in this case and to develop full understanding and insight into the risks to patients and to the reputation of the profession which arose from your failure to recognise and address the limitations of your knowledge, skills and competence.*

*The panel considered that it would be proportionate to allow you this further opportunity to remedy the issues of concern. It considered that you should be given that opportunity, if you wish to take it. It wished to emphasise, however, that if you are unable to develop sufficient progress in your insight and remediation at the next review hearing, a future panel will have all options available to it, including a striking-off order, and may conclude that remediation is no longer a realistic prospect.*

*If, having had further time to reflect, you no longer wish to pursue a nursing career and can demonstrate concrete plans to leave the profession, the panel considered that it would be open to you to make representations to a future panel about allowing the current order to lapse on expiry in order to allow your registration to lapse.*

*If, on the other hand, you still wish to pursue a nursing career, any future reviewing panel would be likely to be assisted by concrete evidence of your progress, your current situation and future plans, and your insight and reflection, including your understanding of the risks associated with your failings and breaches in this case, what you need to do to address those risks and how you propose to do so.*

*The panel therefore concluded that, although it was finely balanced, a striking-off order would be disproportionate at this stage and that a suspension order is the appropriate sanction which would both protect the public and satisfy the wider public interest.*

*Accordingly, the panel determined to impose a suspension order for the period of 12 months. It considered that this period would provide you with sufficient time to undertake the significant reflection and training which will be required of you, and to engage positively with a process of remedying the deficiencies in your practice. It considered this to be the most appropriate and proportionate sanction available.'*

## **Decision and reasons on current impairment**

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

The panel has had regard to all of the documentation before it, including the substantive case bundle and on-table papers submitted on your behalf.

The panel had regard to your oral evidence and submissions made by Ms Flanagan, on your behalf.

Ms Flanagan submitted that you admit your fitness to practise is currently impaired, as you have not been able to work as a registered nurse during the suspension order and that you would seek to do a return to practice course but have so far been unable to do so given the order.

You took an oath and explained to the panel that you had felt proud to work as a registered nurse, having been supported and encouraged by your family into the profession, [PRIVATE] and you shared that this has had an impact on your insight and reflections. You stated that since the last review you have done a lot of reflective work, partly through an '*Excellence in Practice*' course that you have been able to attend while working as a band 2 support worker. You acknowledged that the actions which led to the sanction put patients at risk and that a member of the public would be concerned should you return to practice unrestricted.

During the past 12 months you have undertaken a number of online e-learning courses to help develop your insight into the incidents and that you are currently nearing the end of the '*Excellence in Practice*' course for support workers which has given you valuable opportunity to reflect. You stated that you want to return to practice as a registered nurse and have investigated attending a *Return to Practice* course at university and having spoken with the university and your current employer believe that you could make it work if you were permitted to have a conditions of practice order.

[PRIVATE]

In response to questions from the panel you stated that you have missed working as a band 5 registered nurse as it was a role you found rewarding and that you want to be able to return to that role and potentially progress further in nursing. You clarified that you have had a lot of support from your family during the suspension order and that you have received informal mentoring from the Head of Nursing and Sister at your current employer. You explained that the *Excellence in Practice* course you are on is due to be completed by 11 March 2024 and that you are on track to complete it. On questioning from the panel about the progress of the e-learning courses you have undertaken, you confirmed that some were complete, and some were on track to be completed. You stated that you would

prefer to remain working in a clinic rather than on a ward and that you have found the current clinic you work in to be very supportive.

In response to questions about the previous breach of condition 4 you stated that this happened because you forgot the extent to which the conditions required you to be under direct supervision and that since the removal of an IV was something you previously did before the sanction was imposed you acted before realising you were currently under conditions of practice. You acknowledged that your actions were a mistake and that they had the potential to cause serious harm to the patients and the public and that you would act differently now should you be faced with a similar situation.

Ms Da Costa, on behalf of the NMC, having heard your oral evidence submitted that your fitness to practise remained impaired through your own admission and submissions by Ms Flanagan on your behalf. Ms Da Costa submitted that while there has been developing insight, it is still not fully formed and that there has not been sufficient remediation on your part.

Ms Da Costa submitted that the panel may wish to impose a conditions of practice order with conditions that would permit you to undertake the *Return to Practice* course at university.

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

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

The panel considered whether your fitness to practise remains impaired.

The panel noted that the last reviewing panel found that you had limited insight. At this hearing the panel noted your oral evidence and written reflective statement and found this to be evidence of your developing insight into your previous failings. The panel considered that while your insight has developed since the last review there is still a lack of depth and breadth in your insight as to the original incident and into the breach of conditions. The

panel was not satisfied with your explanation behind the previous breach of conditions and were concerned that it lacked sufficient reflection.

The panel noted that in Ms Flanagan's submissions, it was stated that you have acknowledged and accepted your fitness to practise remains impaired.

The panel considered that due to the seriousness of the incidents found proved and the potential for repetition and harm to patients that a finding of impairment is necessary on the grounds of public protection. The panel further considered the test laid out in the case of *Council for Healthcare Regulatory Excellence v (1) Nursing and Midwifery Council (2) and Grant* [2011] EWHC 927 (Admin) and were satisfied that limbs one, two, and three of that test relating to impairment have been met.

This panel determined that you are liable to repeat matters of the kind found proved. The panel therefore decided that a finding of continuing impairment is necessary on the grounds of public protection.

The panel has borne in mind that its primary function is to protect patients and the wider public interest which includes maintaining confidence in the nursing profession and upholding proper standards of conduct and performance. The panel determined that, in this case, a finding of continuing impairment on public interest grounds is also required.

For these reasons, the panel finds that your fitness to practise remains impaired.

### **Decision and reasons on sanction**

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

The panel first considered whether to take no action but concluded that this would be inappropriate in view of the seriousness of the case. The panel decided that it would neither protect the public nor be 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 need to protect the public and patients, an order that does not restrict your practice would not be appropriate in the circumstances. The SG states that a caution order may be appropriate where '*the case is at the lower end of the spectrum of impaired fitness to practise and the panel wishes to mark that the behaviour was unacceptable and must not happen again.*' The panel considered that your misconduct was not at the lower end of the spectrum and that a caution order would be inappropriate in view of the issues identified. The panel decided that it would be neither proportionate nor in the public interest to impose a caution order.

The panel considered substituting the current suspension order with a conditions of practice order. Despite the seriousness of your misconduct, there has been evidence produced to show that you have started to develop insight, demonstrated remorse, and are seeking to take steps to strengthen your practice. Further, the panel considered the factors that may be relevant when considering whether conditions of practice was appropriate. In your case, the panel considered that you did not have deep seated attitudinal concerns, there were identifiable areas for assessment and re-training, and no evidence of general incompetence with the panel noting that you had many years practising as a nurse prior to your referral. The panel also bore in mind that you indicated that you wish to return to nursing. The panel noted the submissions made that a conditions of practice order should include your attendance and completion of the *Return to Practice* course.

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

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

'For the purposes of these conditions, 'employment' and 'work' mean any paid or unpaid post in a nursing, midwifery or nursing associate role. Also, 'course of study' and 'course' mean any course of educational study connected to nursing, midwifery or nursing associates.

1. You must undertake the *Return to Practice* course with an NMC approved education institute and satisfactory completion of this before seeking employment as a registered nurse.
2. You must limit your nursing practice to one substantive employer, who must not be an agency.
3. You must notify the NMC within 7 days of any nursing appointment (whether paid or unpaid) you accept within the UK or elsewhere, and provide the NMC with contact details of your employer.
4. At any time that you are employed or otherwise providing nursing or midwifery services, you must place yourself and remain under the supervision of a workplace line manager, mentor or supervisor nominated by your employer, such supervision to consist of working at all times under the direct observation of another registered nurse until signed off as competent in the areas as at 8 below by your line manager.

Upon such confirmation of competence, remain under the supervision of a workplace line manager, mentor or supervisor nominated by your employer, such supervision to consist of working at all times under the indirect observation of another registered nurse working on the same ward, unit, floor or home.

5. You must tell the NMC about any professional investigation started against you and/or any professional disciplinary proceedings taken against you within 7 days of you receiving notice of them.

6. You must within 7 days of accepting any post or employment requiring registration with the NMC, or any course of study connected with nursing or midwifery, provide the NMC with the name and contact details of the individual or organisation offering the post, employment or course of study.
7. 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.
8. You must work with your line manager, mentor or supervisor to create a personal development plan designed to address the concerns about the following areas of your practice:
  - a) Medication administration
  - b) Patient assessment skills
  - c) Communication with patients and colleagues
    - i. In particular, a focus on handover procedures and communication
  - d) Assessing and identifying workload priorities
9. You must meet with your line manager, mentor or supervisor every month to discuss the standard of your performance and your progress towards achieving the aims set out in your personal development plan.
10. You must forward to the NMC a copy of your personal development plan every 6 months and within 28 days of the date on which these conditions become effective or the date on which you take up an appointment, whichever is sooner.



11. You must allow the NMC to exchange, as necessary, information about the standard of your performance and your progress towards achieving the aims set out in your personal development plan with your line manager, mentor or supervisor and any other person who is or will be involved in your retraining and supervision with any employer, prospective employer and at any educational establishment.
12. You must disclose to the NMC, prior to any review hearing, a report not more than 28 days old from your line manager, mentor or supervisor setting out the standard of your performance and your progress towards achieving the aims set out in your personal development plan to any current and prospective employers (at the time of application) and any other person who is or will be involved in your retraining and supervision with any employer, prospective employer and at any educational establishment.
13. You must keep us 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.
14. You must immediately give a copy of these conditions to:
  - a) Any organisation or person you work for.
  - b) Any employers you apply to for work (at the time of application).
  - c) Any establishment you apply to (at the time of application), or with which you are already enrolled, for a course of study.

The period of this order is for 24 months.

This conditions of practice order will take effect upon the expiry of the current suspension order, namely the end of 6 April 2024 in accordance with Article 30(1).

Before the end of the period of the order, a panel will hold a review hearing to see how well you have complied with the order. At the review hearing the panel may revoke the order or any condition of it, it may confirm the order or vary any condition of it, or it may replace the order for another order.

Any future panel reviewing this case would be assisted by:

- Your continued engagement;
- Evidence of completion of the *Excellence in Practice* course you are undertaking, along with your portfolio of work undertaken as part of that course;
- An up to date reflective piece drafted with the assistance of a model such as Gibbs (examples of which can be found on the NMC website);
- A plan setting out your return to nursing;
- Evidence of up to date training;
- Current testimonials from any employment you undertake;
- An up to date piece showing developed insight into the original incident and into the previous breach of conditions.

This will be confirmed to you in writing.

That concludes this determination.