

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

**Substantive Order Review Hearing  
Wednesday 3 January 2024**

Virtual Hearing

<b>Name of Registrant:</b>	Louisa Janellan Mitchell
<b>NMC PIN</b>	09I1720S
<b>Part(s) of the register:</b>	Registered Nurse – Sub Part 1 Adult Nursing – (October 2012)
<b>Relevant Location:</b>	Fife
<b>Type of case:</b>	Misconduct
<b>Panel members:</b>	Rachel Forster (Chair, Lay member) Mary Scattergood (Registrant member) Sarah Fleming (Registrant member)
<b>Legal Assessor:</b>	Marian Killen
<b>Hearings Coordinator:</b>	Sophie Cubillo-Barsi
<b>Nursing and Midwifery Council:</b>	Represented by Asraf Khan, Case Presenter
<b>Louisa Mitchell:</b>	Present and unrepresented
<b>Order being reviewed:</b>	Conditions of practice order (9 months)
<b>Fitness to practise:</b>	Impaired
<b>Outcome:</b>	<b>Conditions of practice order (6 months) to come into effect on the expiry of the current order, namely 9 February 2024, in accordance with Article 30 (1)</b>

## Decision and reasons on review of the substantive order

The panel decided to vary and extend the current conditions of practice order.

This order will come into effect at the end of 9 February 2024 in accordance with Article 30(1) of the 'Nursing and Midwifery Order 2001' (the Order).

This is the first review of a substantive conditions of practice order originally imposed for a period of nine months by a Fitness to Practise Committee panel on 6 April 2023.

The current order is due to expire at the end of 9 February 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 a registered nurse:*

- 1. Having agreed undertakings with the NMC in respect of the regulatory concern set out in Schedule 1, breached your undertakings in that you failed to comply with undertaking 6 to complete a medication administration course within 3 months of gaining employment. **(No evidence offered in respect of the 2016 case)***
- 2. On or around 7 February 2018 signed to record that you had administered both a 3mg dose and a 1mg dose of warfarin when you had administered a 3mg dose only. **(Facts not proved for charges 2b) and 2d) in respect of the 2019 case)***
- 3. On 2 March 2018 administered twice the dose of Olanzapine to Resident A. **(No evidence offered in respect of the 2016 case)***
- 4. On or around 25 October 2018, while working at Woodlands Nursing Home, left a medicine pot with 10mls of morphine sulphate in Room 33.*

*And in light of the above your fitness to practice is impaired by reason of your misconduct.*

**Schedule 1**

1. *Multiple errors in the administration and management of medication*

**And**

*(075264/2019):*

*That you, a registered nurse, whilst working at the Harbour Care Home ('the Home') and subject to an interim conditions of practice order:*

1. *On 09 September 2019, breached the terms of the interim conditions of practice order by administering medication to one, or more, residents including:*
  - a) *Resident 1;*
  - b) *Resident 2;*
  - c) *Resident 3;*
  - d) *Resident 4;*
  
- e) *On 10 September 2019, breached the terms of the interim conditions of practice order by administering medication to one, or more, residents including:*
  - a) *Resident 1;*
  - b) *Resident 2;*
  - c) *Resident 3;*

d) *Resident 4*

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

The original panel determined the following with regard to impairment:

*'The panel considered the test of Mrs Justice Cox in the case of CHRE v NMC and Grant in reaching its decision. In paragraph 76:*

*'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) ...'*

*The panel was satisfied that the first three limbs were engaged. It found that by recording the incorrect dose of medication, leaving out a medicine pot containing morphine sulphate in a resident's room, and administering medication without being formally signed-off, patients were put at risk of harm as a result of your misconduct. The panel found that your misconduct had breached the fundamental tenets of the nursing profession and therefore brought its reputation into disrepute.*

*Regarding insight, the panel considered that you had made admissions, apologised to your former employers and to the panel for your conduct, shown remorse for your conduct, acknowledged how your conduct was not acceptable, and demonstrated an understanding of why what you did was wrong. You also sufficiently demonstrated how you undertake medication rounds in your current role, by completing checklists, to ensure that they are undertaken correctly. However, the panel determined that your insight is still developing due to your residual inability to demonstrate an understanding of some of the principles around medication administration, specifically in relation to charge 2 (of the 2016 case).*

*The panel was satisfied that the misconduct in this case is capable of being addressed. Therefore, the panel carefully considered the evidence before it in determining whether or not you have taken steps to strengthen your practice. The panel took into account your reflective piece, the relevant training in medication awareness and competence you have undertaken, as well as the information about your current role as a Team Leader at Cramond Residence, where you undertake various tasks relating to medication handling, administration and recording. The panel also noted the supportive testimonials from your General Manager and colleague at Cramond Residence about your work, and their willingness to offer you a role as a Staff Nurse. The panel was satisfied that you have been working hard and putting in effort to strengthen your practice.*

*However, the panel determined that there is a risk of repetition as you were still in the process of strengthening your practice and developing your insight. The panel therefore decided that a finding of impairment is necessary on the grounds of public protection.*

*The panel bore in mind 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, in particular, because of the breach of your interim conditions of practice order in September 2019 by administering medication to residents without the direct observation of another registered nurse when you had not been assessed as competent to do so. The panel was of the view that in doing so, you contravened the interim conditions of practice order. It determined that a well-informed member of the public would be concerned if a finding of impairment were not made in respect of a nurse that had contravened an interim conditions of practice order imposed on their practice.*

*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 and therefore also finds your fitness to practise impaired on the grounds of public interest.*

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

The original panel determined the following with regard to sanction:

*'The panel took into account the following aggravating features:*

- There was a pattern of misconduct over the period of a few years and in various clinical settings.*
- Your conduct put patients at risk of suffering harm.*

*The panel also took into account the following mitigating features:*

- You made some admissions to the allegations.*
- You have shown significant remorse and apologised a number of times to a number of different people involved.*
- You have demonstrated that you remain committed to nursing and strengthening your practice, despite your lengthy period of suspension.*
- You have demonstrated developing insight into what you would now do to avoid repetition of the concerns.*

- *You have provided positive testimonials from your colleague and manager at your current place of work.*

*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 issues identified. The panel decided that it would be neither proportionate nor in the public interest to impose a caution order.*

*The panel next considered whether placing conditions of practice on 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 the SG, in particular:*

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

*The panel was satisfied that there was no evidence of harmful deep-seated personality or attitudinal problems in your case. The panel considered that there were identifiable areas of your practice in need of assessment and retraining, namely medication management and administration, and that there was no evidence of general incompetence. It noted your current efforts towards retraining and your willingness to respond positively to further retraining. The panel determined that patients would not be put in danger either directly or indirectly as a result of conditions of practice, and that conditions would protect patients during the period they are in force. Further, conditions could be created that can be monitored and assessed.*

*The panel took into account your previous failure to comply with the interim conditions of practice order imposed by a panel of the Fitness to Practise Committee in July 2019. However, it also noted the relevant mitigating circumstantial factors at the time, which included your limited induction on your first day at Harbour Care Home, as well as the breakdown in communication and in your understanding of what was required of you at the time. The panel considered that you are now aware of what is required of you and how important it is to work safely and adhere to a conditions of practice order, having gone through this process. The panel noted that you are in a supportive working environment at Cramond Residence, with the possibility of being offered a position as a Staff Nurse once a position becomes available. In view of this, the panel was satisfied that you are now better placed to comply with a substantive conditions of practice order.*

*The panel determined that it would be possible to formulate appropriate and practical conditions which would address the failings highlighted in this case. The panel accepted that you would be willing to comply with conditions of practice, and it was of the view that it was in the public interest that, with appropriate safeguards, you should be able to return to safe practise as a registered nurse.*

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



*The panel was of the view that to impose a suspension order or a striking-off order would be wholly disproportionate and would not be a reasonable response in the circumstances of your case because although unacceptable, the panel found that your misconduct is capable of being addressed. The panel was satisfied that your misconduct was not fundamentally incompatible with remaining on the register.*

*Having regard to the matters it has identified, the panel concluded that a conditions of practice order will mark the importance of maintaining public confidence in the profession, and will send to the public and the profession a clear message about the standards of practice required of a registered nurse.*

*In making this decision, the panel carefully considered the submissions of Mr Brahim in relation to the range of sanctions that the NMC was seeking in this case. However, the panel took into account the length of suspension you have already had from nursing practice, and considered that the lesser sanction of a conditions of practice order was the most appropriate in this case. The panel accepted that you have already been dispensing medication for a year in your current role, albeit not in a nursing capacity, and determined that a conditions of practice order for the period of nine months would be appropriate for you to demonstrate competency in medication management and administration, in the event that you gain a position as a Staff Nurse.*

*The panel determined that the following conditions are appropriate and proportionate in this case:*

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

- 1. You must limit your practice to one substantive employer.*
- 2. You must be directly supervised by a registered nurse at all times when administering medications, for at least the first*

*month of nursing practice and until such a time thereafter as you have been assessed as competent to do so independently by your line manager, mentor or supervisor (or their nominated deputy).*

3. *When you are assessed as competent, this needs to be done formally and in writing, and is to be sent to the NMC by you within 7 days of you reaching the required standard to administer medication without such supervision.*
4. *You must work with your line manager, mentor or supervisor (or their nominated deputy) to create a personal development plan designed to address the concerns about the following areas of your practice:*
  - a) *Medicines management and administration*
5. *You must meet with your line manager, mentor or supervisor (or their nominated deputy) at least every month to discuss the standard of your performance and your progress towards achieving the aims set out in your personal development plan.*
6. *You must forward to the NMC a copy of your personal development plan 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.*
7. *You must send a report from your line manager, mentor or supervisor (or their nominated deputy) setting out the standard of your performance and your progress towards achieving the aims set out in your personal development plan to the NMC prior to any NMC review hearing or meeting.*
8. *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 (or their nominated deputy) 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.*

9. *You must keep us informed about anywhere you are working by:*
  - a) *Telling your case officer within seven days of accepting or leaving any employment.*
  - b) *Giving your case officer your employer's contact details.*
  
10. *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.*
  
11. *You must immediately give a copy of these conditions to:*
  - a) *Any organisation or person you work for.*
  - b) *Any agency you apply to or are registered with for work.*
  - c) *Any employers you apply to for work (at the time of application).*
  - d) *Any establishment you apply to (at the time of application), or with which you are already enrolled, for a course of study.*
  - e) *Any current or prospective patients or clients you intend to see or care for on a private basis*

*when you are working in a self-employed capacity*

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

*The period of this order is for nine months.*

*Before the order expires, 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 and attendance at the next review hearing.*
- *A reflective piece that demonstrates how your practice has changed as a result of these charges and how you are now ensuring safe practice.*

- *Documentary evidence of professional development, particularly including evidence of up to date training in medication management and administration, and what that training encompassed.*
- *References and testimonials from any paid or unpaid work.'*

## **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 NMC bundle and the following documentation provided by you:

- A letter confirming your employment at Avondale Care;
- An email from you to the NMC dated 22 November 2023;
- A copy of the 'New Staff Introduction' checklist for Avondale Care;
- A character reference from your former manager, dated 3 January 2024;
- Evidence of training courses undertaken by you; and
- Handwritten notes of your reflective statement.

You informed the panel that you had previously provided the NMC with a typed version of your reflective statement which you had sent via email. However, Mr Khan informed the panel that, having checked on the day of the review hearing, the NMC could not find this document on its system.

It has taken account of the submissions made by both you and Mr Khan on behalf of the NMC. The panel has also considered the NMC's guidance on substantive order review hearings.

Mr Khan provided the panel with a background to your case. He referred the panel to your current conditions of practice order and the suggestions made by the previous substantive panel. He confirmed that no concerns have been raised regarding your engagement with the NMC and that there are no issues regarding your compliance with the order. Mr Khan informed the panel that since the substantive hearing you have been employed by three different employers. He stated that within your first employment, at Roselea Care Home, you were supervised for four weeks and deemed competent in accordance with condition two and three of your order, namely:

*'2. You must be directly supervised by a registered nurse at all times when administering medications, for at least the first month of nursing practice and until such a time thereafter as you have been assessed as competent to do so independently by your line manager, mentor or supervisor (or their nominated deputy).*

*3. When you are assessed as competent, this needs to be done formally and in writing, and is to be sent to the NMC by you within 7 days of you reaching the required standard to administer medication without such supervision.'*

Mr Khan told the panel that you left Roselea Care Home and went on to work at Leys Park in August 2023. You informed the NMC by email, in October 2023, that you had ceased employment at Leys Park and stated:

*'Im emailing you to advise you that I have been paid off from leys park home. I have made medication errors that was not brought to my attention until Tuesday afternoon, these apparently happened in the September.'* [sic]

Mr Khan explained that you were subsequently assured by Leys Park that no referral was been made to the NMC in relation to your termination of contract. He submitted that it is a matter for the panel to determine 'what happens next'.

You told the panel that whilst employed at Leys Park, you did not receive any indication that there were issues with your medication handling and/or administration until you were

called into a formal meeting. You explained to the panel that during the course of your employment, at the end of each shift, it is the practice of some care homes to tally up the medication at the end of the night and record the total on a MAR sheet. You admitted that you forgot to do so a 'couple of times' but that this issue had never been raised by management. You stated that when you were called into the meeting by management, including regional management at Leys Park, you were 'shocked' and felt as if you were a 'rabbit caught in headlights'. You told the panel that during the course of the meeting you were informed that management was not happy with your performance and your employment was terminated. You informed the NMC about this incident. You subsequently received communication from your manager at Leys Park who clarified that the errors made by you, were clerical errors rather than medication errors. You said that your former manager had confirmed this position in an email which you would provide to the panel at today's hearing. You acknowledged that you have made mistakes but stated that as the errors were not in relation to administration of medication, you feel that the termination of your contract was 'unjust'.

You told the panel that you have completed various online training courses and have applied to undertake more training in the near future. You informed the panel that you are currently working within a complex nursing environment, caring for patients with brain injuries, behavioural problems and learning disabilities. During night shifts, you are the nurse in charge, responsible for other members of staff and 62 residents. You stated that you are very happy with your current employment.

You explained that you have now reflected upon your failings and noted that you were 'probably putting too much trust into other registrants' and that you have now concluded that not everyone has the same standards of honesty as you do. You explained how you left one employment as you felt that they were putting your registration at risk by lax practices in relation to the administration of controlled drugs. You further explained how you are now more cautious when administering medication and, when appropriate, able to ask for a senior member of staff or registered nurse to check your work. You said that you are now aware of the potentially catastrophic consequences of poor practice in medicine administration. You now take your time to dispense medication carefully, rather than rushing through the process.

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 the progress you have made in beginning to remediate the misconduct found proved. You have complied with the current conditions of practice order and have undertaken further training courses in medicine administration and other areas of practice. You have also been signed off as competent by two separate managers in relation to medication administration.

However, the panel found that your reflection on the impact of the matters found proved and the insight that you provided to the panel about this were still at an early stage. Your reflection, albeit in note form, was nevertheless very limited. Whilst you were able to demonstrate further insight when questioned by the panel during the course of today's hearing, the panel was of the view that at this time, you have not fully recognised the wider implications of your misconduct, specifically upon colleagues, patients in your care, the reputation of the profession and the trust which the public place in registered nurses to be able to practice safely. In light of this, the panel could not be satisfied that there was sufficient evidence before it to mitigate the previous findings made by the substantive panel. As a result, this panel determined that there is still a risk of you repeating 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 to be 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 your case. The panel decided that it would not protect the public from the identified risks.

It then considered the imposition of a caution order but again determined that, due to 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 issues identified. The panel decided that it would be neither proportionate nor in the public interest to impose a caution order.

The panel next considered whether imposing a further conditions of practice order on your registration.

The panel accepted that you have been complying with the current substantive conditions of practice and was of the view that a further, but varied conditions of practice order remains sufficient to protect patients and the wider public interest, noting as the original panel did that there was no evidence of general incompetence and no deep seated attitudinal problems. The panel was of the view that to impose a suspension order or a striking-off order would be wholly disproportionate. Such an order would not assist you in returning to unrestricted practice and would not be a reasonable response in the circumstances of your case.

Accordingly, the panel determined, pursuant to Article 30(1)(c) to extend the conditions of practice order for a period of six months, which will come into effect on the expiry of the current order, namely at the end of the current order. It decided to vary the conditions, as set out below:

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

1. You must limit your practice to one substantive employer.
2. You must work with your line manager, mentor or supervisor (or their nominated deputy) to create a personal development plan designed to support your continued development in the following areas of your practice:
  - a) Medicines management and administration
  - b) Your continuing professional development and training
3. You must meet with your line manager, mentor or supervisor (or their nominated deputy) at least every month to discuss the standard of your performance and your progress towards achieving the aims set out in your personal development plan.
4. You must forward to the NMC a copy of your personal development plan 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.
5. You must send a report from your line manager, mentor or supervisor (or their nominated deputy) setting out the standard of your performance and your progress towards achieving the aims set out in

your personal development plan to the NMC prior to any NMC review hearing or meeting.

6. You must undertake further and deeper reflection, using a recognised reflective model, in relation to your practice and continue to reflect upon areas of your practice which require further development. The reflection should demonstrate your understanding of how your misconduct impacted upon patients, colleagues, the nursing profession and the wider public interest. You should also provide further reflection as to how you have changed your practice to eliminate any future risks to patients and to further strengthen your practice.
7. The reflective piece must be submitted to the NMC before any review hearing.
8. 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 (or their nominated deputy) 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.
9. You must keep us informed about anywhere you are working by:
  - a) Telling your case officer within seven days of accepting or leaving any employment.
  - b) Giving your case officer your employer's contact details.
10. 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.
11. 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.

12. You must tell your case officer, within seven days of your becoming aware of:

- a) Any clinical incident you are involved in.
- b) Any investigation started against you.
- c) Any disciplinary proceedings taken against you.

13. 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.

This conditions of practice order will take effect upon the expiry of the current conditions of practice order, namely the end of 9 February 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.

This will be confirmed to you in writing.

That concludes this determination.