

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

**Substantive Order Review Hearing
Wednesday, 20 December 2023**

Virtual Hearing

Name of Registrant: Rachel George

NMC PIN 05L04150

Part(s) of the register: Registered Nurse – Sub part 1
Adult Nursing RN1 (December 2005)

Relevant Location: Somerset

Type of case: Lack of competence

Panel members: Fiona Abbott (Chair, Lay member)
Tracey Chamberlain (Registrant member)
Bill Matthews (Lay member)

Legal Assessor: Juliet Gibbon

Hearings Coordinator: Sabrina Khan

Nursing and Midwifery Council: Represented by Richard Webb, Case Presenter

Mrs George: Not Present and not represented at this hearing

Order being reviewed: Conditions of practice order (12 months)

Fitness to practise: Impaired

Outcome: **Conditions of practice order further extended (18 months)**

Decision and reasons on service of Notice of Hearing

The panel was informed at the start of this hearing that Mrs George was not in attendance and that the Notice of Hearing had been sent to Mrs George's registered email address by secure email on 20 November 2023.

Further, the panel noted that the Notice of Hearing was also sent to Mrs George's representative at the Royal College of Nursing (RCN) on 20 November 2023.

Mr Webb, on behalf of the Nursing and Midwifery Council (NMC), submitted that it had complied with the requirements of Rules 11 and 34 of the 'Nursing and Midwifery Council (Fitness to Practise) Rules 2004', as amended (the Rules).

The panel accepted the advice of the legal assessor.

The panel took into account that the Notice of Hearing provided details of the substantive order being reviewed, the time, dates and that the hearing was to be held virtually, including instructions on how to join and, amongst other things, information about Mrs George's right to attend, be represented and call evidence, as well as the panel's power to proceed in her absence.

In the light of all of the information available, the panel was satisfied that Mrs George has been served with notice of this hearing in accordance with the requirements of Rules 11 and 34.

Decision and reasons on proceeding in the absence of Mrs George

The panel next considered whether it should proceed in the absence of Mrs George. The panel had regard to Rule 21 and heard the submissions of Mr Webb who invited the panel to continue in the absence of Mrs George. He submitted that Mrs George had voluntarily absented herself.

Mr Webb referred the panel to the letter from the RCN dated 14 December 2023 which states:

'Our member will not be attending the hearing, nor will they be represented. No disrespect is intended by their non-attendance. Our member has received the notice of hearing and is happy for the hearing to proceed in their absence. They are keen to engage with the proceedings.'

The panel accepted the advice of the legal assessor.

The panel has decided to proceed in the absence of Mrs George. In reaching this decision, the panel has considered the submissions of Mr Webb, the letter from the RCN, and the advice of the legal assessor. It has had particular regard to any relevant case law and to the overall interests of justice and fairness to all parties. It noted that:

- No application for an adjournment has been made by Mrs George or her representative from RCN.
- The RCN has informed the NMC that Mrs George has received the Notice of Hearing and confirmed she is content for the hearing to proceed in her absence;
- There is no reason to suppose that adjourning would secure her attendance at some future date; and
- There is a strong public interest in the expeditious review of the substantive order.

In these circumstances, the panel has decided that it is fair to proceed in the absence of Mrs George.

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

At the outset of the hearing, Mr Webb referred the panel to a request made by Mrs George's representative that matters relating to Mrs George's health be heard in private. He accepted that matters relating to health should be held in private. He informed the panel that the NMC took a neutral position on whether the whole or part of the hearing should be in private. The application was made pursuant to Rule 19 of the 'Nursing and Midwifery Council (Fitness to Practise) Rules 2004', as amended (the Rules).

The legal assessor reminded the panel that while Rule 19(1) provides, as a starting point, that hearings shall be conducted in public, Rule 19(3) states that the panel may hold hearings partly or wholly in private if it is satisfied that this is justified by the interests of any party or by the public interest.

Having heard that there will be reference to Mrs George's health, the panel determined to hold those parts of the hearing in private to protect Mrs George's privacy and confidentiality.

Decision and reasons on review of the substantive order

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

This order will come into effect at the end of 26 January 2024 in accordance with Article 30(1) of the 'Nursing and Midwifery Order 2001' (the Order).

This is the second review of a substantive conditions of practice order originally imposed for a period of 18 months by a Fitness to Practise Committee panel on 25 June 2021.

The order was reviewed on 12 December 2022 when the panel extended the conditions of practice order for a period of 12 months.

The current order is due to expire at the end of 26 January 2024.

The panel is reviewing the order pursuant to Article 30(1) of the Order.

The charges found proved by way of admission which resulted in the imposition of the substantive order were as follows:

'That you, a registered nurse, between 15 October 2018 and 2 January 2019 failed to demonstrate the standards of knowledge, skills and judgment to practise without supervision as a band 5 nurse, in that you:

- 1) On 25 October 2018 administered metformin to patient AL when patient AL's prescription for metformin was on hold.*

- 2) *On 04 November 2018 administered 500mg of metformin to patient JT when patient JT was prescribed 1g of metformin.*
- 3) *On 05 November 2018 failed to administer losartan to a patient who had been prescribed losartan.*
- 4) *On 05 November 2018 administered 50mg of losartan to patient B when patient B was prescribed 100mg of losartan.*
- 5) *On 09 November 2018 recorded patient notes in the notes pertaining to the wrong patient.*
- 6) *On 17 November 2018 incorrectly documented that a patient had a discoloured bruise when the patient had a grade 3 pressure sore.*
- 7) *On 19 November 2018 incorrectly recorded a patient as being mobile when the patient was immobile and required the use of a hoist.*
- 8) *On 26 November 2018 failed to check a patients' identification before administering medication to the patient.*
- 9) *On 26 November 2018 failed to take and record a patients observations before administering medication to the patient.*
- 10) *On 26 November 2018 signed a patients MAR record to confirm you had administered medication when you had not administered the medication.*
- 11) *On 13 December 2018 incorrectly recorded that you had taken a patients' respiration and oxygen saturation at 13:10 when you had taken the patients' respiration and oxygen saturation at 11:30.*
- 12) *On 18 December 2018 administered ibuprofen gel to a patient without recording the administration of the ibuprofen gel in the patients MAR chart.'*

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

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

'The panel took account of the written representations provided by the RCN on Mrs George's behalf. It noted that this informed the panel that she has not been able to comply with the conditions of practice order as she has not been able to secure a nursing role and is currently working as a healthcare assistant.

Therefore, the panel had no new information before it from Mrs George demonstrating how her insight has developed since the last review, or evidence of steps she has taken to strengthen her practice and remediate the concerns identified.

The panel noted that while Mrs George is currently working as a healthcare assistant, it did not have any professional references pertaining to her current role.

The panel also noted that Mrs George had not complied with any of the recommendations stipulated by the original panel as to what a future panel may be assisted by. While the panel can make inferences from the letter from the RCN, she has not provided the NMC with any indication as to her future aspirations, specifically with regard to whether she does intend to return to the nursing profession at some point in the future.

In the absence of any evidence to the contrary, the panel could not be satisfied that Mrs George no longer poses a risk to patient safety. The panel reminded itself that the charges are serious and relate to basic nursing skills. It considered there to be a real risk of repetition of the events and a risk of significant harm to patients in her care, should she be permitted to return to

unrestricted nursing practice. Therefore, the panel 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 Mrs George's fitness to practise remains impaired.'

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

'Having found Mrs George's 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 be neither proportionate nor in the public interest to take no further action.

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

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

The panel next considered whether imposing a further conditions of practice order on Mrs George's registration would still be a sufficient and appropriate response. The panel is mindful that any conditions imposed must be proportionate, measurable and workable.

The panel determined that it would be possible to formulate appropriate and practical conditions which would address the failings highlighted in this case. The panel noted that Mrs George has been unable to comply with conditions of practice due to her current employment status. The panel can make inferences, from the letter it received from the RCN, that Mrs George is willing to comply with the conditions imposed.

The panel was of the view that a further conditions of practice order is sufficient to protect patients and the wider public interest, noting as the original panel did that there was no evidence of general incompetence and no deep seated attitudinal problems. In this case, there are conditions that could be formulated which would protect patients during the period they are in force.

The panel had regard to the current conditions of practice order imposed on that Mrs George's nursing registration. It determined that the current conditions were workable and practicable, so it was not minded to vary the conditions, as they are currently formulated in a way which sufficiently address the public protection and public interest concerns that remain to this day.

The panel was of the view that to impose a suspension order would be wholly disproportionate and would not be a reasonable response in the circumstances of Mrs George's case. This is because suspending her would not give her the opportunity to strengthen her practice by complying with the current conditions of practice order.

Accordingly, the panel determined, pursuant to Article 30(1)(c) to make a conditions of practice order for a period of 12 months, which will come into effect on the expiry of the current order, namely at the end of 26 January 2023. It decided to impose the following conditions which it considered are appropriate and proportionate in this case:

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

1. At any time that you are employed or otherwise providing nursing 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:

a) working at all times on the same shift as, but not necessarily under the direct observation of, a Registered Nurse of Band 5 equivalent or above who is competent in medicines administration.

b) At the conclusion of all shifts, your care records are reviewed and countersigned as accurate by Registered Nurse of Band 5 or above. This check must remain in place until such time as your line manager, mentor or supervisor is satisfied and has documented that your record keeping is consistently of a competent standard.

2. 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) Medication administration

b) Record keeping

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 at least 14 days before any NMC review hearing or meeting.*

6. *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.*

7. *You must not carry out medication administration unless directly supervised by a Registered Nurse of Band 6 or a Registered Nurse of Band 5 who is competent in medicines administration including intravenous medication when applicable until deemed competent by your line manager, mentor or supervisor (or their nominated deputy).*

8. *You must keep us informed about anywhere you are working by:*

c) *Telling your case officer within seven days of accepting or leaving any employment.*

d) *Giving your case officer your employer's contact details.*

9. *You must keep us informed about anywhere you are studying by:*

c) *Telling your case officer within seven days of accepting any course of study.*

d) *Giving your case officer the name and contact details of the organisation offering that course of study.*

10. *You must immediately give a copy of these conditions to:*

f) *Any organisation or person you work for.*

g) *Any agency you apply to or are registered with for work.*

h) *Any employers you apply to for work (at the time of application).*

i) *Any establishment you apply to (at the time of application), or with which you are already enrolled, for a course of study.*

j) *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*

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

d) *Any clinical incident you are involved in.*

e) *Any investigation started against you.*

f) *Any disciplinary proceedings taken against you.*

12. *You must allow your case officer to share, as necessary, details about your performance, your compliance with and / or progress under these conditions with:*

d) *Any current or future employer.*

e) *Any educational establishment.*

f) *Any other person(s) involved in your retraining and/or supervision required by these conditions*

The period of this order is for 12 months. This period was suggested by both the NMC and

Mrs George. In addition, the panel considered that this was a sufficient period to enable to

Mrs George to secure employment as a nurse and demonstrate compliance with the

conditions.

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

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

Any future panel reviewing this case would be assisted by:

- Your continued engagement and attendance at the review hearing, either in person or virtually;*
- An additional and up to date reflective piece demonstrating further development of your insight;*
- Up to date professional references in respect of any work undertaken whether paid or unpaid including any role as a healthcare assistant;*
- Details of any applications for a nursing role that you have made and, if appropriate, any feedback received as to why the application has been unsuccessful.'*

Decision and reasons on current impairment

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

The panel has had regard to all of the documentation before it, including the NMC bundle, written submissions from the RCN and the NMC guidance. It has taken account of the submissions made by Mr Webb on behalf of the NMC.

Mr Webb referred the panel to the background of the case. Mr Webb submitted that Mrs George had been unable to demonstrate any remediation due to her health circumstances. Accordingly current impairment, and a requirement for the continued restriction of the registrant's practice, remained necessary.

Mr Webb drew the panel's attention to the written representation from the RCN who invited the panel to confirm the current conditions of practice order for a period of 18 months. Mr Webb submitted that the length of the order is a matter for the panel.

The panel also had regard to the letter from the Mrs George's legal representative at the RCN, dated 14 December 2023, which stated:

'Firstly, we would like to inform the panel that the registrant has engaged with these proceedings throughout, and will continue to engage as required, complying with any order applicable.

We confirm that the registrant is not currently working as a nurse, nor has she worked as a nurse since the last review hearing in December 2022.

In the circumstances, as she has not worked as a nurse and has therefore not been able to demonstrate remediation of the charges found proven at the substantive hearing, the registrant accepts that her current fitness to practice remains impaired.

We would like to take this opportunity to provide the panel with an update as to the registrant's current circumstances, [PRIVATE].

Application

We submit that the conditions of practice order remains appropriate in relation to the circumstances of the matter.

We respectfully request that the conditions of practice order be continued for a period of 18 months to allow the registrant to continue to concentrate on her health and going forwards, health-permitting, focus on her objective of returning to nursing practice in the future.

We submit that it would be wholly disproportionate for the conditions of practice order to be replaced with a higher sanction at this stage.'

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

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

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

The panel took into account of the written representations provided by the RCN on Mrs George's behalf. It noted that this informed the panel that she has not been able to comply with the conditions of practice order as she was initially not working in a nursing role [PRIVATE]

Therefore, the panel had no new information before it from Mrs George demonstrating how her insight has developed since the last review, or evidence of steps she has taken to strengthen her practice and remediate the concerns identified.

The panel also noted that Mrs George had not been able to comply with any of the recommendations suggested by the previous panels as to what a future panel may be assisted by.

The panel accepted the submission from the RCN which stated:

'We confirm that the registrant is not currently working as a nurse, nor has she worked as a nurse since the last review hearing in December 2022.

In the circumstances, as she has not worked as a nurse and has therefore not been able to demonstrate remediation of the charges found proven at the substantive hearing, the registrant accepts that her current fitness to practice remains impaired.'

The panel noted that [PRIVATE], she had not provided any evidence of any training courses she had undertaken or any references from colleagues or a supervisor to demonstrate that she had strengthened her practice.

In the absence of any evidence to the contrary, the panel could not be satisfied that Mrs George no longer poses a risk to patient safety. The panel reminded itself that the charges are serious and relate to basic nursing skills. It considered there to be a real risk of repetition of the events and a risk of significant harm to patients in her care, should she be permitted to return to unrestricted nursing practice. Therefore, the panel 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 Mrs George's fitness to practise remains impaired.

Decision and reasons on sanction

Having found Mrs George's 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 be neither proportionate nor in the public interest to take no further action.

It then considered the imposition of a caution order but again determined that, due to the seriousness of the case, and the public protection issues identified, an order that does not restrict Mrs George's practice would not be appropriate in the circumstances. The SG states that a caution order may be appropriate where *'the case is at the lower end of the spectrum*

of impaired fitness to practise and the panel wishes to mark that the behaviour was unacceptable and must not happen again.’ The panel considered that Mrs George’s failings were 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 a further extension of the conditions of practice order would remain a sufficient and appropriate response. The panel is mindful that any conditions imposed must be proportionate, measurable and workable.

The panel determined that conditions of practice remained an appropriate and proportionate order. The panel noted that Mrs George has been unable to comply with the current conditions of practice order due to her employment status and more recently due to [PRIVATE]. Mrs George has however indicated her wish to return to nursing in the future [PRIVATE] and has asked the panel to extend the current order.

The panel was of the view that a further extension of the conditions of practice order is sufficient to protect patients and the wider public interest, noting as the original panel did that there was no evidence of deep seated attitudinal problems.

The panel had regard to the current conditions of practice order. It determined that the current conditions remain workable and practicable, so it was not minded to vary the conditions, as they are currently formulated in a way which sufficiently address the public protection and public interest concerns that remain.

The panel was of the view that to replace the current order with a suspension order would be wholly disproportionate and would not be a reasonable response in the circumstances of Mrs George’s case. This is because [PRIVATE] and suspending her would not give her the opportunity to strengthen her practice.

Accordingly, the panel determined, pursuant to Article 30(1)(c) to further extend the current conditions of practice order for a period of 18 months, which will come into effect on the expiry of the current order, namely at the end of 26 January 2024. It decided to impose the following conditions which it considered are appropriate and proportionate in this case:

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

1. *At any time that you are employed or otherwise providing nursing 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:*
 - a) *working at all times on the same shift as, but not necessarily under the direct observation of, a Registered Nurse of Band 5 equivalent or above who is competent in medicines administration.*
 - b) *At the conclusion of all shifts, your care records are reviewed and countersigned as accurate by Registered Nurse of Band 5 or above. This check must remain in place until such time as your line manager, mentor or supervisor is satisfied and has documented that your record keeping is consistently of a competent standard.*
2. *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) *Medication administration*
 - b) *Record keeping*
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 at least 14 days before any NMC review hearing or meeting.*
6. *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.*
7. *You must not carry out medication administration unless directly supervised by a Registered Nurse of Band 6 or a Registered Nurse of Band 5 who is competent in medicines administration including intravenous medication when applicable until deemed competent by your line manager, mentor or supervisor (or their nominated deputy).*
8. *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.*
9. *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.*
10. *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*

11. 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.*

12. 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 conditions of practice order is further extended for a period of 18 months.

The panel considered that this was a sufficient period to enable Mrs George to demonstrate compliance with the conditions.

This conditions of practice order will take effect upon the expiry of the current conditions of practice order, namely the end of 26 January 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 Mrs George has complied with the order. At the review hearing the panel may revoke the order, vary any condition of it, it may further extend the order, or it may replace the order.

Any future panel reviewing this case would be assisted by:

- Mrs George's continued engagement and attendance at the review hearing, either in person or virtually;
- An additional and up to date reflective piece demonstrating further development of Mrs George's insight;
- Up to date professional references in respect of any work undertaken whether paid or unpaid including any role as a healthcare assistant;
- Details of any applications for a nursing role that Mrs George has made and, if appropriate, any feedback received as to why the application has been unsuccessful.
- Details of any relevant courses that Mrs George has undertaken to strengthen her practice.
- Indication of Mrs George's career plans and her intention of returning to nursing in the future.

This will be confirmed to Mrs George in writing.

That concludes this determination.