

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

**Substantive Meeting
Wednesday 12 October 2022**

Virtual Meeting

Name of registrant: Mrs Ann Elizabeth Goodfellow

NMC PIN: 90I0004S

Part(s) of the register: Registered Nurse – Sub Part 1
Adult Nursing – August 2006
Registered Nurse – Sub Part 2
General Nursing – May 1992

Relevant Location: Midlothian

Type of case: Misconduct

Panel members: Judith Webb (Chair, Lay member)
Peter Fish (Lay member)
Donna Hart (Registrant member)

Legal Assessor: Richard Tyson

Hearings Coordinator: Daisy Sims

Facts proved: All charges

Fitness to practise: Impaired

Sanction: Striking-off order

Interim order: Interim suspension order (18 months)

Decision and reasons on service of Notice of Meeting

The panel was informed at the start of this meeting that the Notice of Meeting had been sent to Mrs Goodfellow's registered email address on 1 September 2022.

The panel accepted the advice of the legal assessor.

The legal assessor informed the panel that the email sent to Mrs Goodfellow by the NMC dated 1 September 2022 states:

'The substantive meeting will be held on or after 14 October 2022'.

The legal assessor referred the panel to the Service of Notice sent to Mrs Goodfellow on 1 September 2022 which states that any responses should be sent to the NMC by 7 October 2022.

He further referred the panel to Rule 11A(1) of the Rules which states:

'Where a meeting is to be held in accordance with Rule 10(3), the Fitness to Practice Committee shall send notice of the meeting to the registrant no later than 28 days before the date the meeting is to be held'.

The panel determined that whilst Mrs Goodfellow was informed that a substantive meeting would be held on or after 14 October 2022, Rule 11A(1) states that the registrant must be given at least 28 days' notice but does not require a specific date for the meeting to be stated.

In the light of all of the information available including the fact that Mrs Goodfellow had not responded to the NMC by 7 October 2022, the panel was satisfied that Mrs Goodfellow has been effectively served with notice of this meeting in accordance with the requirements of Rules 11A and 34 of the 'Nursing and Midwifery Council (Fitness to Practise) Rules 2004', as amended (the Rules) notwithstanding this meeting being held on 12 October 2022.

Details of charge

That you, a registered nurse, whilst working at the Drummond Grange Care Home ('the Home'):

- 1) On, or around, 21 May 2020, accepted the sum / a gift of £100.00 from Relative A;
[PROVED]
- 2) Failed to declare the sum / gift referred to in paragraph 1 above:
 - a. in accordance with the Home's policy / employee handbook; **[PROVED]**
 - b. when questioned by the Home's Deputy Manager on one, or more, occasion;
 - c. promptly / timeously; **[PROVED]**
- 3) When asked by the Home's Deputy Manager about the sum / gift referred to in paragraph 1 above, initially informed them that the sum received was £20.00 / significantly less than the amount received; **[PROVED]**
- 4) Your conduct at any and/or all of charge(s) 1 and / or 2 and / or 3 above was dishonest in that you:
 - a) knew that you were not allowed / permitted to receive the sum(s) / gift(s) in question; **[PROVED]**
 - b) Intended to conceal that you had received the sum(s) / gifts in question;
[PROVED]
 - c) failed to declare / disclose the sum(s) / gift(s) in question: **[PROVED]**
 - i) as required;
 - ii) when questioned by the Deputy Manager on one, or more, occasion;
 - d) sought to conceal / give a misleading impression of the sum(s) / gift received.
[PROVED]

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

Decision and reasons on facts

At the outset of the meeting, the panel noted the written representations from Mrs Goodfellow within the response to Case Management Form in which she made admissions to charge 2(a), 2(b), 4(b), 4(c)(i), 4(c)(ii) and 4(d).

The panel therefore finds charges 2(a), 2(b), 4(b), 4(c)(i), 4(c)(ii) and 4(d) proved in their entirety, by way of Mrs Goodfellow's admissions.

In reaching its decisions on the disputed facts, the panel took into account all the documentary evidence in this case together with the representations made by the NMC and from Mrs Goodfellow.

The panel accepted the advice of the legal assessor.

The panel was aware that the burden of proof rests on the NMC, and that the standard of proof is the civil standard, namely the balance of probabilities. This means that a fact will be proved if a panel is satisfied that it is more likely than not that the incident occurred as alleged.

The panel had regard to the written statements of the following witnesses on behalf of the NMC:

- Witness 1: Senior Care Assistant at the Home
- Witness 2: Care Practitioner at the Home
- Witness 3: Registered Nurse at the Home
- Witness 4: General Manager at the Home
- Witness 5: Home Administrator at the Home
- Witness 6: Group Operations Manager

- Witness 7: Former Regional Director

The panel also had regard to written representations from Mrs Goodfellow in the form of a completed Case Management Form and to the NMC's Statement of Case.

Background

The charges arose whilst Mrs Goodfellow was employed as a registered nurse by the Home. On 7 May 2020, a senior carer at the Home approached the Deputy Manager at the Home raising concerns that over the previous weeks, Mrs Goodfellow had been accepting envelopes containing cash from Relative A. The Senior Carer alleged that this had happened on at least two occasions. The first occasion they found an envelope addressed to Mrs Goodfellow and left this pinned to a board in the nurses' office. The second occasion, around a week later, it is alleged that they found a further envelope addressed to Mrs Goodfellow which raised their suspicion and on holding the envelope up to the light, they could allegedly see £20 inside.

On 21 May 2020, the Home received a bag of sweets and crisps from the Relative A which also contained an envelope addressed to Mrs Goodfellow. The General Manager and Deputy Manager opened the envelope, and it is alleged that they discovered a card stating *'thank you Nettie [Mrs Goodfellow] and all staff for looking after my wee man'* and £100 in cash. They then sent the bag with the envelope, card and cash up to the unit where it was handed to Mrs Goodfellow. Later that day it is alleged that the Deputy Manager asked Mrs Goodfellow if the envelope had contained any cash and she said it had not. The Deputy Manager approached Mrs Goodfellow again a short time later and it is alleged that she continued to deny that the envelope contained any cash until the Deputy Manager revealed to Mrs Goodfellow that she knew that it had contained cash. Mrs Goodfellow then allegedly stated it had contained £20 which she was going to deliver to a friend of Relative A. She did not account for the other £80.

The Deputy Manager approached Mrs Goodfellow for a third time, a bit later and Mrs Goodfellow then allegedly stated that the envelope had contained more cash and handed over £100 stating that she had intended to return it to Relative A. Mrs Goodfellow allegedly

denied having taken money from Relative A on any other occasions but admitted having received money in the card on 21 May 2020.

The panel then considered each of the disputed charges and made the following findings.

Charge 1

'That you, a registered nurse, whilst working at the Drummond Grange Care Home (the Home):

1) On, or around, 21 May 2020, accepted the sum / a gift of £100.00 from Relative A'.

This charge is found proved.

In reaching this decision, the panel took into account the written statements of Witness 4 and Witness 5. The panel paid particular attention to the written statement of Witness 5 that states:

'Witness 4 [sic] then opened the envelope and found a card inside with £100 cash.'

The panel also noted this particular passage of Witness 4's written statement:

'As the envelope was not marked private and confidential, I opened it and found it contained a thank you card. Within the card I found cash.

[...]

Both Witness 5 [sic] and myself counted the cash in the card, and confirmed that it was £100.'

The panel noted that these written statements provide consistent evidence that there was £100 in an envelope addressed to Mrs Goodfellow on 21 May 2020, and that Mrs Goodfellow had accepted it by putting it into her pencil case. Furthermore, the panel

noted Mrs Goodfellow's admission in the internal investigation that she had taken the money and put it in her pencil case.

The panel therefore found Charge 1 proved.

Charge 2(c)

That you, a registered nurse, whilst working at the Drummond Grange Care Home ('the Home'):

2) Failed to declare the sum / gift referred to in paragraph 1 above:

c) Promptly/timeously.

This charge is found proved.

In reaching this decision, the panel took into account that Mrs Goodfellow has admitted to Charges 2(a) and 2(b) namely that she had failed to declare the sum / gift when asked by her manager which was not in accordance with the Home's policy/employee handbook. The panel paid particular attention to the written statement of Witness 3 who stated:

'I then asked whether there was anything else in the card and Mrs Goodfellow [sic] said there was not and that they would definitely not take any money from the relative.

[...]

I asked Mrs Goodfellow [sic] twice whether there had been money in the envelope and they said no both times.'

The panel noted that Mrs Goodfellow was asked about the money in question and initially denied that she had received any money. The panel determined that for Mrs Goodfellow to have declared the sum referred to promptly/timeously she would have declared it within her conversation with Witness 3.

The panel took a common-sense view on the wording of the charge and determined that promptly, in this scenario, would have been to declare the sum either within this conversation or at an earlier stage.

The panel therefore determined, on the balance of probabilities, that Mrs Goodfellow failed to declare the sum / gift referred to in paragraph 1 promptly/timeously.

The panel therefore found Charge 2(c) proved.

Charge 3

That you, a registered nurse, whilst working at the Drummond Grange Care Home ('the Home'):

3) When asked by the Home's Deputy Manager about the sum / gift referred to in paragraph 1 above, initially informed them that the sum received was £20.00 / significantly less than the amount received.

This charge is found proved.

In reaching its decision, the panel took into account the written statement of Witness 3:

'Mrs Goodfellow [sic] then said that there was £20 in the envelope but that it was Friend A's money [...] I asked Mrs Goodfellow [sic] why they did not just tell me this because I had given them so many chances [...] They said it was not their money and that was why they did not tell me.'

The panel also noted its previous finding from Witness 4 and Witness 5's written statements that there was £100 in the envelope.

The panel therefore determined, based on the consistent evidence provided and on the balance of probabilities, that Mrs Goodfellow informed the Home's Deputy Manager that the sum received was £20 and that this was significantly less than the amount in fact received.

The panel therefore found Charge 3 proved.

Charge 4(a)

That you, a registered nurse, whilst working at the Drummond Grange Care Home ('the Home'):

4) Your conduct at any and/or all of charge(s) 1 and / or 2 and / or 3 above was dishonest in that you:

a) knew that you were not allowed / permitted to receive the sum(s) / gift(s) in question.

This charge is found proved.

In reaching it's decision, the panel took into account 'The Code: Professional standards of practice and behaviour for nurses and midwives 2015' ("the Code") 21(1):

'Refuse all but the most trivial gifts, favours or hospitality as accepting them could be interpreted as an attempt to gain preferential treatment.'

The panel determined, that as a registered nurse, Mrs Goodfellow would have been aware of the Code and therefore aware that accepting gifts is not permitted.

The panel also took into account the extract provided from the employee handbook which states that the Home does not believe it is appropriate for staff to receive gifts from residents, patients or their family members.

The panel also noted Witness 4's written statement which states:

'I am also confident of Mrs Goodfellow's awareness of the policy regarding receipt of gifts, as they had previously followed it, when the same resident's relative tried to give £500 to staff. On this occasion Mrs Goodfellow [sic] approach me immediately to inform me of the gift and we arranged for it to be returned to the resident's relative'.

The panel found that the evidence provided was consistent and determined that Mrs Goodfellow would have known that staff at the Home were not allowed to accept gifts from residents, patients or their family members.

The panel then considered whether this conduct was dishonest. It noted that Mrs Goodfellow has admitted some of the charges, and the other charges have been found proved. The panel noted that Mrs Goodfellow admitted she had put the money in her pencil case and failed to mention the sum of money when initially questioned by the General Manager of the Home. The panel determined that it is clear that these actions were dishonest.

The panel therefore found Charge 4(a) proved.

Fitness to practise

Having reached its determination on the facts of this case, the panel then moved on to consider whether the facts found proved amount to misconduct and, if so, whether Mrs Goodfellow's fitness to practise is currently impaired. There is no statutory definition of fitness to practise. However, the NMC has defined fitness to practise as a registrant's suitability to remain on the register unrestricted.

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

The panel adopted a two-stage process in its consideration. First, the panel must determine whether the facts found proved amount to misconduct. Secondly, only if the facts found proved amount to misconduct, the panel must decide whether, in all the circumstances, Mrs Goodfellow's fitness to practise is currently impaired as a result of that misconduct.

Representations on misconduct and impairment

The NMC invited the panel to take the view that the facts found proved amount to misconduct. The panel had regard to the terms of the Code in making its decision.

The NMC identified the specific, relevant standards where Mrs Goodfellow's actions amounted to misconduct:

'20 Uphold the reputation of your profession at all times

To achieve this, you must:

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

20.2 act with honesty and integrity at all times, treating people fairly and without discrimination, bullying or harassment

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

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

To achieve this, you must:

21.1 refuse all but the most trivial gifts, favours or hospitality as accepting them could be interpreted as an attempt to gain preferential treatment

21.3 act with honesty and integrity in any financial dealings you have with everyone you have a professional relationship with, including people in your care'

The NMC submitted that Mrs Goodfellow's actions at Charges 1 – 3 were dishonest in that she initially denied taking a sum of money and when she eventually did accept her actions, she lied about the sum of money she received. It further submitted that Mrs Goodfellow also only accepted responsibility once she was caught by her manager.

The NMC submitted that the misconduct is serious as the public would expect a registered nurse not to take money from residents or their relatives.

On impairment, the NMC submitted that the panel should bear in mind its overarching objective to protect the public and the wider public interest. This included the need to

declare and maintain proper standards and maintain public confidence in the profession and in the NMC as a regulatory body. The panel was referred to the cases of *Council for Healthcare Regulatory Excellence v (1) Nursing and Midwifery Council (2) Grant* [2011] EWHC 927 (Admin) and *R (on application of Cohen) v General Medical Council* [2008] EWHC 581 (Admin).

The NMC invited the panel to find Mrs Goodfellow's fitness to practise impaired on the grounds that all four limbs of Dame Janet Smith's test can be answered in the affirmative in this case. The NMC submitted that Mrs Goodfellow's actions were dishonest, and dishonesty is difficult, but not impossible, to remediate. It submitted that even if capable of remediation, Mrs Goodfellow had failed to provide evidence that the regulatory concerns have in fact been remedied. It submitted that Mrs Goodfellow suggests that she has not worked since she was dismissed from the Home and so there is no evidence that the conduct has not been repeated. The NMC submitted that:

'The NMC consider there is a continuing risk to the public due to Mrs Goodfellow's lack of full insight. There is also a public interest in a finding of impairment being made in this case to declare and uphold proper standards of conduct and behaviour. The public expect nurses to act with honesty and integrity so that patients and their family members can trust registered professionals. Mrs Goodfellow's actions and lack of insight or remediation undermine public confidence in the nursing profession.'

In the completed Case Management form, Mrs Goodfellow stated that she is currently impaired by ticking a box stating so. She further wrote that she is not fit to practice or work due to her personal circumstances.

The panel accepted the advice of the legal assessor which included reference to a number of relevant judgments.

Decision and reasons on misconduct

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

The panel was of the view that Mrs Goodfellow's actions did fall significantly short of the standards expected of a registered nurse, and that Mrs Goodfellow's actions amounted to a breach of the Code. Specifically:

'20 Uphold the reputation of your profession at all times

To achieve this, you must:

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

20.2 act with honesty and integrity at all times, treating people fairly and without discrimination, bullying or harassment

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

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

To achieve this, you must:

21.1 refuse all but the most trivial gifts, favours or hospitality as accepting them could be interpreted as an attempt to gain preferential treatment

21.3 act with honesty and integrity in any financial dealings you have with everyone you have a professional relationship with, including people in your care'

The panel appreciated that breaches of the Code do not automatically result in a finding of misconduct.

However, the panel was of the view that due to a finding of dishonesty in circumstances directly linked to nursing, Mrs Goodfellow's conduct had the potential to cause harm to patients, particularly by undermining the trust and confidence between the nurse and patient/relative and blurring professional boundaries. The panel determined that Mrs Goodfellow's actions did fall seriously short of the conduct and standards expected of a nurse and amounted to misconduct.

Decision and reasons on impairment

The panel next went on to decide if as a result of the misconduct, Mrs Goodfellow's fitness to practise is currently impaired.

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

In this regard the panel considered the judgment of Mrs Justice Cox in the case of *CHRE v NMC and Grant* in reaching its decision. In paragraph 74, she said:

'In determining whether a practitioner's fitness to practise is impaired by reason of misconduct, the relevant panel should generally consider not only whether the practitioner continues to present a risk to members of the public in his or her current role, but also whether the need to uphold proper professional standards and public confidence in the profession would be undermined if a finding of impairment were not made in the particular circumstances.'

In paragraph 76, Mrs Justice Cox referred to Dame Janet Smith's "test" which reads as follows:

'Do our findings of fact in respect of the doctor's misconduct, deficient professional performance, adverse health, conviction, caution or determination show that his/her/their fitness to practise is impaired in the sense that S/He/They:

- a) has in the past acted and/or is liable in the future to act so as to put a patient or patients at unwarranted risk of harm; and/or*
- b) has in the past brought and/or is liable in the future to bring the medical profession into disrepute; and/or*
- c) has in the past breached and/or is liable in the future to breach one of the fundamental tenets of the medical profession; and/or*

d) has in the past acted dishonestly and/or is liable to act dishonestly in the future.'

The panel finds that patients could have been put at risk and could have been caused physical and emotional harm as a result of Mrs Goodfellow's misconduct. The panel noted the Code (21) that accepting gifts could '*be interpreted as an attempt to gain preferential treatment*'. The panel determined that the acceptance of gifts could have led to preferential treatment of an individual patient, and this could have caused a lack of care and attention to other patients in Mrs Goodfellow's care. The panel therefore determined that the first limb of the test is engaged.

The panel was satisfied that confidence in the nursing profession would be undermined if its regulator did not find charges relating to dishonesty extremely serious. Mrs Goodfellow's misconduct had breached the fundamental tenets of the nursing profession and therefore brought its reputation into disrepute. In the circumstances, the panel found that all four limbs of the Grant test were satisfied in the past.

Regarding insight, the panel considered that there has been no evidence of insight shown by Mrs Goodfellow until her recent admissions of some dishonesty in her Case Management Form. However, the panel was of the view that these admissions were in the context of Mrs Goodfellow's seeking to minimise her involvement and the seriousness of her conduct. The panel also noted that there was no evidence of remorse or remediation shown by Mrs Goodfellow. The panel determined that the lack of significant insight, remorse and remediation is concerning and adds to the seriousness of the misconduct found.

The panel determined that whilst this was an isolated incident, there is a risk of repetition based on the lack of significant insight, remediation and remorse shown by Mrs Goodfellow. Further, the panel had received no reflective piece, nor testimonials or references or any information as to Mrs Goodfellow's current circumstances that could mitigate its concerns over the risk of repetition. In these circumstances, the panel was of the view that all four limbs of the Grant test were satisfied in the future.

The panel therefore decided that a finding of impairment is necessary on the grounds of public protection.

The panel bore in mind that the overarching objectives of the NMC; to protect, promote and maintain the health, safety, and well-being of the public and patients, and to uphold and protect the wider public interest. This includes promoting and maintaining public confidence in the nursing and midwifery professions and upholding the proper professional standards for members of those professions.

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 - especially as it had found Mrs Goodfellow to be dishonest in the workplace - and therefore also finds Mrs Goodfellow's fitness to practise impaired on the grounds of public interest.

Having regard to all of the above, the panel was satisfied that Mrs Goodfellow's fitness to practise is currently impaired.

Sanction

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

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

Representations on sanction

The panel noted the NMC submissions on sanction in the Charge for Notice of Hearing in which the NMC considers a range between a 12-month suspension order and a striking off order as proportionate, and it submitted in its Statement of Case that a striking off order was appropriate.

Decision and reasons on sanction

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

The panel took into account the following aggravating features:

- Breach of trust/crossing professional boundaries;
- The associated dishonesty;
- The potential for damage to reputation of the profession.

The panel also took into account the following mitigating features. Some personal/health mitigation was mentioned in the completed Case Management Form, but the panel determined this had no direct bearing on the conduct in question. The panel also considered there to be slight mitigation through some eventual admissions, however it did not consider this as a fully mitigating feature for the reasons set out above.

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 Goodfellow'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 Goodfellow's misconduct was not at the lower end of the spectrum and included dishonesty, such that a caution order would be inappropriate in view of the seriousness of

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

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

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

- *A single instance of misconduct but where a lesser sanction is not sufficient;*
- *No evidence of harmful deep-seated personality or attitudinal problems;*
- *No evidence of repetition of behaviour since the incident;*

The conduct, as highlighted by the facts found proved, was a significant departure from the standards expected of a registered nurse. The panel noted Mrs Goodfellow's limited engagement with the NMC; lack of reflection; the blurring of professional boundaries; her minimising of the seriousness of these matters; and her dishonesty. All these factors indicated an attitudinal problem in Mrs Goodfellow.

The panel noted Mrs Goodfellow's submission that she is no longer able to work as a registered nurse due to her own personal circumstances and that she would no longer like to work as a registered nurse. The panel determined that a suspension would serve no purpose in allowing Mrs Goodfellow to remain on the register when she has made it clear that she no longer intends to practice as a registered nurse.

In this particular case, the panel determined that a suspension order would not be a sufficient, appropriate or proportionate sanction in light of the seriousness of this case and Mrs Goodfellow's attitude.

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

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

Mrs Goodfellow's actions were significant departures from the standards expected of a registered nurse and are fundamentally incompatible with her remaining on the register. The panel was of the view that the findings in this particular case demonstrate that Mrs Goodfellow's actions were serious and to allow her to continue practising would undermine public confidence in the profession and in the NMC as a regulatory body.

The panel determined that the finding of dishonesty coupled with the lack of reflection, significant insight, remediation, and remorse cannot be appropriately dealt with through any sanction less than a strike-off order. The panel considered that Mrs Goodfellow has departed from the standards expected of a registered nurse and has breached the fundamental tenets of the nursing profession. The panel therefore determined public confidence in the profession would be seriously diminished through allowing Mrs Goodfellow to continue to be on the register.

Balancing all of these factors and after taking into account all the evidence before it during this case, the panel determined that the appropriate and proportionate sanction is that of a striking-off order. Having regard to the matters it identified, in particular the effect of Mrs Goodfellow's actions in bringing the profession into disrepute by adversely affecting the public's view of how a registered nurse should conduct herself, the panel has concluded that nothing short of this would be sufficient in this case.

The panel considered that this order was necessary to mark the importance of protecting the public and maintaining public confidence in the profession, and to send to the public and the profession a clear message about the standard of behaviour required of a registered nurse.

This will be confirmed to Mrs Goodfellow in writing.

Interim order

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

Representations on interim order

The panel took account of the representations made by the NMC that an 18-month interim suspension order should be imposed if a restrictive sanction is imposed.

Decision and reasons on interim order

The panel was satisfied that an interim order is necessary for the protection of the public and is otherwise in the public interest. The panel had regard to the seriousness of the facts found proved and the reasons set out in its decision for the substantive order in reaching the decision to impose an interim order.

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

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

That concludes this determination.