

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

**Substantive Hearing  
Thursday, 3 August 2023- Friday, 4 August 2023**

Virtual Hearing

<b>Name of Registrant:</b>	Samantha Lindsay Bligh
<b>NMC PIN</b>	98J0361E
<b>Part(s) of the register:</b>	Sub part 1 RNA: Adult nurse, level 1 (22 October 2001)
<b>Relevant Location:</b>	Manchester
<b>Type of case:</b>	Conviction
<b>Panel members:</b>	Rachel Carter (Chair, Registrant member) Vicki Wells (Registrant member) Richardo Childs (Lay member)
<b>Legal Assessor:</b>	Fiona Moore
<b>Hearings Coordinator:</b>	Roshani Wanigasinghe
<b>Nursing and Midwifery Council:</b>	Represented by Assad Baddruddin, Case Presenter
<b>Mrs Bligh:</b>	Present and represented by Thomas Buxton, instructed by the Royal College of Nursing (RCN)
<b>Facts proved by admission:</b>	Charge 1
<b>Facts not proved:</b>	None
<b>Fitness to practise:</b>	Impaired
<b>Sanction:</b>	Suspension order (12 months)
<b>Interim order:</b>	Interim suspension order (18 months)

## **Details of charge**

*That you, a registered nurse:*

*1. You were convicted on 29th September 2021 at Manchester Crown Court of possession of criminal property, contrary to 329(1)(c) of the Proceeds of Crime Act 2002*

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

## **Decision and reasons on application for hearing to be held in private under Rule 19**

At the outset, Mr Buxton, on your behalf, informed the panel that this case involves reference to your health and personal circumstances. He therefore invited the panel to hear parts of this hearing in private. The application was made pursuant to Rule 19 of the Rules.

Mr Badruddin, on behalf of the Nursing and Midwifery Council (NMC), did not object to this application.

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 your health, the panel determined to hold those parts of the hearing in private in order to protect your privacy.

## **Background**

The NMC received an anonymous referral on 10 November 2019 regarding your conduct and criminal charges for possessing criminal property.

The offence relates to the theft and sale of electronic goods from Her Majesty's Prison Forest Bank in Salford and the offences are directly related to money laundering.

In May 2017, officers from Greater Manchester Police had commenced an investigation into criminal offences being committed by a number of staff at the Prison where at the relevant time you were working as a registered nurse.

It was found that members of prison security staff were stealing electronic goods from the prison over a period of two years. This included items such as CDs, DVDs, games consoles and accessories delivered into the Prison as a part of a legitimate prison industries contract where the goods would be repackaged and sent out to retailers.

Person A was in a senior position of trust at the prison and was responsible for security and involved in conducting searches. It was during these searches that Person A and other members of the security staff would steal multiple items, place them into bags and walk them off the premises. The parties would then sell the items through various mediums.

Greater Manchester Police had conducted bank checks for all of the parties involved and had identified sums of around £240,000 worth of transactions from stolen goods.

Your involvement with these events is said to have stemmed from you being transferred a total of £13,312.70 from Person A into your bank account and this amount was then transferred back into Person A's account in an attempt to hide the balance or launder the money.

You were charged for the offence of having possession of criminal property. You had pleaded not guilty to the offence resulting in a jury trial being held at Manchester Crown Court where on 29 September 2021 you were convicted of having possession of criminal property contrary to Section 329 (1)(c) of the Proceeds of Crime Act 2002. On 5 November 2021, you were sentenced to 9 months imprisonment, suspended for 12 months with an unpaid work requirement of 100 hours.

### **Decision and reasons on facts**

At the outset of the hearing, following the reading of the charges, the panel heard from Mr Buxton, who informed the panel that you made full admissions to charge 1.

The panel noted that charge 1 concerns your conviction. Having been provided with a copy of the certificate of conviction, and by way of your admission, the panel finds charge 1 is proved in accordance with Rule 31 (2) and (3).

### **Fitness to practise**

Having announced its findings on the facts, the panel then considered whether, on the basis of the facts found proved, your fitness to practise is currently impaired by reason of your conviction. 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.

### **Submissions on impairment**

Mr Badruddin made submissions on the issue of impairment and addressed the panel on the need to have regard to protecting 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.

Mr Badruddin submitted that through your conviction, you have breached 'The Code: Professional standards of practice and behaviour for nurses and midwives (2015)' (the Code) and referred the panel to relevant sections of the Code which, in the NMC's view, has been breached.

He submitted that as a registered professional, your conduct leading to the conviction, raises fundamental concerns regarding your position and trustworthiness. He submitted that it further raises attitudinal concerns about your conduct. He reminded the panel that the charge of which you were convicted is a serious offence, involving the attempt to launder a significant amount of money which was appropriated directly from the theft of goods from your employer at the time. He submitted that this offence is directly connected to your registration, your employment and your position as registered nurse. **[PRIVATE]**. Mr Badruddin submitted that you had a contract of employment, whether it was directly through the prison or not, it was linked directly to the prison, and therefore you held a position of trust at the prison and was required to explore a duty of candour.

Mr Badruddin submitted that all four limbs of the test by Mrs Justice Cox in the case of *Council for Healthcare Regulatory Excellence v (1) Nursing and Midwifery Council (2) Grant [2011] EWHC 927 (Admin)* applied to this case. He submitted that nurses hold a privileged position in society stemming from the foundation of trust and dignity, and that your actions leading to the conviction would deter members of the public considering access to medical care. He said that members of the public would be reluctant to put forward their trust and their position of vulnerability to someone who was convicted and received the custodial sentence for the attempt to hide and conceal that money. He submitted that you having received a custodial sentence in itself has the potential to seriously undermine the trust and confidence in this profession and therefore you have breached the fundamental tenets of the nursing profession, in which you are required to act with honesty and integrity. In respect of the dishonesty element of the test, Mr Badruddin submitted that it is linked to your conviction. Mr Badruddin reminded the panel that your defence was that you were unaware at the time, or that you were not fully aware,

which was rejected by the jury. He submitted that the sentencing remarks of the Judge were clear that you must have known, or at least suspected.

Mr Badruddin submitted that your level of insight into these concerns and the effect it has had on the victims are limited. He submitted that HMP Forest Bank had a significantly adverse impact because of these actions. Mr Badruddin submitted that the sums had entered your account and remained there for a period of weeks and that you had not raised any concerns with the authorities regarding it. He reminded the panel that these prison industry contracts are a key focus of rehabilitation which allows prisoners to work and earn an income. By placing such a contract into jeopardy, places the prisoners into jeopardy, and they were under your direct care.

He submitted that the conviction and your registered nurses' position are intrinsically linked. He submitted that you had a duty to the prisoners and your employer, and you had failed to act upon it. Given these factors, Mr Badruddin submitted that there is a lack of insight, remorse and remediation into the regulatory concerns. He therefore submitted that the public protection and public confidence in the nursing profession and in the NMC as a regulator would be undermined if finding of impairment on these grounds was not made in respect of your case.

Mr Buxton submitted that you accept that you are impaired on the grounds of public interest. He submitted however that he disagreed with the NMC's view regarding public protection. Mr Buxton reminded the panel that it was never suggested, as part of the Crown's case, that you were actively involved, in the sense of conspiring to launder proceeds of those thefts. Furthermore, Mr Buxton submitted that the amount of money that was deposited into your savings account was comparatively small.

Mr Buxton submitted that the offence was not directly linked to your professional practice. He reminded the panel that, although you had a contract of employment to provide healthcare services within the prison, it is not the same as having carried out the

dishonesty in the course of your work. The monies were paid into your account by Person A.

He submitted that the conduct in question was about you having money deposited in a bank account outside of work. He submitted that you had no connection with the dealings and had no knowledge of it. He submitted that these concerns have not caused any actual harm or caused any risk of harm. He referred the panel to a number of references provided on your behalf which attest to your safe clinical ability. Mr Buxton therefore submitted that to say that because of what happened reputationally, members of the public may be deterred from considering access to medical services and thereby running the risk of harm is *"too far"*.

Mr Buxton accepted that there is a public interest concern and that you are impaired on this ground. However, he invited the panel to find you not impaired on public protection grounds, as these events took place, in terms of the criminality, outside of clinical practice.

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

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

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

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

In this regard the panel considered the judgment of Mrs Justice Cox in the case of *CHRE v NMC and Grant* 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/ 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) has in the past acted dishonestly and/or is liable to act dishonestly in the future.'*



The panel found that all four limbs of Grant were engaged both as to the past and future.

The panel found that this case involves serious criminal conduct where you were convicted for being involved with the attempt to launder a significant amount of money which was appropriated directly from the theft of goods from your place of work at the time. The panel bore in mind that you accepted your dishonesty. It noted that you said during your oral evidence that *“deep down I knew something wasn’t quite right, but I chose not to act”*. You further indicated that you accepted your conviction, but at the time, you had lied to yourself by turning a *“blind eye”*. You acknowledged that you failed to act on your suspicions when you should have followed your gut instinct. You also said *“I was dishonest but consider myself honest.”* The panel bore in mind your responsibilities as a registered nurse and your duty to be candid. The panel appreciated that these concerns did not occur in a clinical setting. However, by holding the position of a registered nurse, you had and have a responsibility to always act with honesty and integrity. The panel noted the sentencing remarks in which the Crown Court Judge was clear that you must have known or suspected that the sum of £13,312.70 transferred into your account was the proceeds of Person A’s criminal conduct.

Regarding insight, the panel considered your oral evidence and your supporting statement dated 2 August 2023. The panel noted that you apologised for your actions and provided an explanation for why, in your view, you abused your position of trust in this way. The panel noted that you had explained to it the consequences of your actions on your employer, patients, public and the potential damage to the reputation of the profession. It bore in mind that on 5 November 2021, you were sentenced to 9 months imprisonment, suspended for 12 months and with an unpaid work requirement of 100 hours. The panel was therefore of the view that your conviction is still recent and that not enough time has passed to remediate the seriousness of your actions. It also bore in mind that the sums had entered your account and remained there for a period of weeks and that you had not raised any concerns regarding it, even though deep down you had your suspicions. The

panel was therefore of the view that by your poor judgement in choosing “*not to act*”, you have in the past and are liable in the future to put patients at unwarranted risk of harm; have in the past and are liable in the future to bring the nursing profession into disrepute; have in the past and are liable in the future to breach one of the fundamental tenets of the nursing profession and have in the past and are liable in the future to act dishonestly in the future.

In reaching this decision, the panel had sight of the following sections of *The Code: Professional standards of practice and behaviour for nurses and midwives* (2015) (The Code):

***“You uphold the reputation of your profession at all times. You should display a personal commitment to the standards of practice and behaviour set out in the Code. You should be a model of integrity and leadership for others to aspire to. This should lead to trust and confidence in the professions from patients, people receiving care, other health and care professionals and the public.*”**

## ***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*

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

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

The panel considered that any concerns regarding the lack of honesty and integrity by its very nature can be difficult to remediate, and your dishonesty which resulted in a criminal conviction is particularly serious. The panel noted that there are no concerns involving your clinical nursing practice and took into account the testimonials of your work colleagues which were all supportive of your good practice. It then considered whether there is a current public protection concern. It took the view that it was not possible to compartmentalise the public and private aspects of your life in the manner that Mr Buxton sought to advance. In your reflection, you acknowledge that it brings into question whether you pose a risk to the public and how the public may feel about a nurse having a conviction in relation to dishonesty as your behaviour clearly impacts upon the nursing profession.

The panel considered that you had insight into your failings and that you were remorseful of your actions. However, the panel is of the view that there remains a risk of repetition based on the seriousness of the conviction and your lack of judgement. The panel therefore decided that a finding of impairment is necessary on the grounds of public protection.

The panel bore in mind that the overarching objectives of the NMC are to protect, promote and maintain the health, safety and well-being of the public and patients, and to uphold/protect the wider public interest, which includes promoting and maintaining public confidence in the nursing and midwifery professions and upholding the proper professional standards for members of those professions. The panel determined that, in this case, a finding of impairment on public interest grounds was also required. The panel determined that the public would be shocked and appalled by your actions, and your actions have brought the profession into disrepute. Any other finding would undermine public confidence in the profession, and the NMC as its regulator.

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

## **Sanction**

The panel has considered this case very carefully and has decided to make a suspension order for a period of 12 months. The effect of this order is that the NMC register will show that your registration has been suspended.

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

## **Submissions on sanction**

In his submissions on sanction, Mr Badruddin invited the panel to impose a striking-off order. Mr Badruddin outlined what the NMC considered to be the aggravating and mitigating features of this case, and submitted that, because of the seriousness of the facts underlying your conviction, the only sanction that would suitably satisfy the public protection and public interest would be to permanently remove your name from the register.

Mr Badruddin invited the panel to consider SAN-2, 'Considering sanctions for serious cases', of the fitness to practice library when considering its decision. He submitted that honesty is of central importance to a nurse's practice and that dishonesty will always be serious, and a nurse who has acted dishonestly will always be at some risk of being removed from the register.

Mr Badruddin submitted that in this particular case, there are factors which call into question whether you should remain on the register. He reminded the panel that you have breached your professional duty of candour, and suggested that the offence had been

motivated by personal financial gain. He reminded the panel that although the transfer of the money was an isolated incident, your involvement was not, as it had continued for several weeks.

Mr Badruddin submitted that it is accepted that your clinical practice is not being called into question and that you have been practising since 2011 without any other issues. However, he submitted that the public protection, public interest concerns and public confidence in the nursing profession would be seriously undermined if a striking-off order was not imposed today.

Mr Buxton invited the panel to impose a suspension order.

He reminded the panel that you recognise the seriousness of these matters and have fully engaged with these proceedings. He reminded the panel to look carefully at the individual circumstances, the nature and conduct of this case. He submitted that but for Person A, neither this offence nor the dishonest conduct would have ever occurred. He submitted that this was a single instance of turpitude and that it was entirely out of character.

Mr Buxton submitted that it is acknowledged that the panel has determined that there is a risk of repetition. However, he informed the panel that you have been in practice since this incident for four plus years without any issues. He submitted that since this incident, you have '*tightened up*' your standards and have given the panel your word that your behaviour would not be repeated again.

He reminded the panel of the testimonials presented on your behalf which attest to your good character and practice, and in particular, one where it indicates that your conduct above, does not reflect your character. He said you have been presented as someone who can be trusted and of integrity.

Given all the above, Mr Buxton invited the panel to impose a sanction short of a striking-off order.

## **Decision and reasons on sanction**

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

The panel took into account the following aggravating features:

- Serious actions which led to a custodial sentence of 9 months imprisonment, suspended for 12 months with an unpaid work requirement of 100 hours;
- You provided a not guilty plea at the Crown Court trial; and
- You admitted to the panel that you were dishonest in your actions.

The panel did not accept Mr Badruddin's submission that this offence was motivated by personal financial gain because it had not heard any evidence to support this submission.

The panel also took into account the following mitigating features:

- There are no previous convictions;
- There are no concerns as to your clinical practice, and you have continued to practise as a nurse without incident since your conviction;
- You are of previous good character;
- You have demonstrated insight;
- Your actions did not put patients at direct risk of harm;
- You accepted the charge and impairment on public interest grounds at the outset of these proceedings;
- You demonstrated remorse; and

- Multiple positive testimonials were provided which attest to your character and clinical practice.

The panel noted that you have engaged with these proceedings and there are no previous regulatory concerns.

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.

Next, in considering whether a caution order would be appropriate in the circumstances, the panel took account of the SG, which 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 was of the view that your behaviour was not at the lower end of the spectrum of fitness to practise and 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 your nursing registration would be a sufficient and appropriate response. The panel is mindful that any conditions imposed must be proportionate, measurable and workable.

The panel was of the view that there are no practical or workable conditions that could be formulated, given the seriousness and the nature of the conviction in this case. The panel noted that the concerns in this case relate solely to your conduct and behaviour outside of your clinical practice; there were no identifiable areas of clinical nursing practice which needed to be addressed.

The panel also determined that the public interest elements of this case would not be met by the imposition of a conditions of practice order, given your conviction.

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 incident 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; and*
- *The Committee is satisfied that the nurse or midwife has insight and does not pose a significant risk of repeating behaviour.*

The panel was satisfied that these factors are applicable in this case and the conviction was not fundamentally incompatible with remaining on the register.

The panel bore in mind that your conviction occurred outside of your clinical practice and that you have been practising as a nurse for the past four years without concerns. It further bore in mind the positive testimonials presented on your behalf and that there has been no repetition of the conduct found proved which led to your conviction. The panel considered that a period of temporary removal from the register was necessary to mark the seriousness of the case, declare and uphold the relevant professional standards expected of a registered nurse, and maintain trust and confidence in the professions and the NMC as regulator. The panel determined that a period of suspension will provide you with the appropriate opportunity to demonstrate that you are able to be trustworthy, proactive when concerned and fully accountable for your actions.

The panel did consider whether a striking-off order would be proportionate in your case. Taking account of all the information before it, the panel concluded that this would be disproportionate. The panel determined that, although there had been a clear breach of fundamental tenets of the profession, your actions are not fundamentally incompatible with remaining on the register. The panel had no evidence before it that you had repeated this



behaviour, or that any other regulatory or disciplinary concerns had been raised since the offence.

Whilst the panel acknowledges that a suspension order may have a punitive effect, it considered it would be unduly punitive in the circumstances of your case to impose a striking off order.

Balancing all of these factors the panel has concluded that a suspension order would be the appropriate and proportionate sanction.

The panel noted the hardship such an order will inevitably cause you. However, this is outweighed by the public protection and public interest in this case.

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

The panel determined that a suspension order for a period of one year was appropriate in this case to mark the seriousness of the conviction.

At the end of the period of suspension, another panel will review the order. At the review hearing the panel may revoke the order, or it may confirm the order, or it may replace the order with another order.

Any future panel reviewing this case would be assisted by:

- Your attendance and engagement at a future review hearing;
- Evidence of undertaking a role that demonstrates honesty, integrity, trust and confidence;
- Testimonials which attest to your honesty and integrity; and
- Written reflection on your progress over the period of suspension.

This will be confirmed to you in writing.

### **Interim order**

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

### **Submissions on interim order**

The panel took account of the submissions made by Mr Badruddin who invited the panel to impose an interim suspension order for a period of 18 months. He submitted that this interim order is necessary on the grounds of both public protection and in the public interest.

Mr Buxton made no representations.

### **Decision and reasons on interim order**

The panel was satisfied that an interim order is necessary on the grounds of public protection and public interest. The panel had regard to the seriousness of your conviction, 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 to adequately protect the public and the public interest if this order is appealed. This order is for a period of 18 months to allow time for any appeal to progress.

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

That concludes this determination.