

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

**Substantive Order Review Meeting  
Tuesday 25 July 2023**

Virtual Meeting

**Name of registrant:** Sathimol Edattukunnel Raghavan

**NMC PIN:** 14J00300

**Part(s) of the register:** Registered Nurse – Sub Part 1  
Adult Nursing – October 2014

**Relevant Location:** Brent

**Type of case:** Misconduct

**Panel members:** Derek McFaull (Chair, Lay member)  
Kathryn Smith (Registrant member)  
Pauline Esson (Registrant member)

**Legal Assessor:** John Donnelly

**Hearings Coordinator:** Renee Melton-Klein

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

**Fitness to practise:** Impaired

**Outcome:** **Suspension order (6 months) to come into effect at the end of 29 August 2023 in accordance with Article 30(1)**

## **Decision and reasons on service of Notice of Meeting**

The panel noted at the start of this meeting that the Notice of Meeting had been sent to Mrs Raghavan's registered email address by secure email on 19 June 2023.

The panel took into account that the Notice of Meeting provided details of the review including the time, date, and the fact that this meeting was heard virtually.

The panel accepted the advice of the legal assessor.

In the light of all of the information available, the panel was satisfied that Mrs Raghavan has been 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).

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

The panel decided to impose a substantive suspension order for a period of 6 months. This order will come into effect at the end of 29 August 2023 in accordance with Article 30(1) of the Nursing and Midwifery Order 2001 (as amended) (the Order).

This is the first review of a substantive suspension order originally imposed for a period of 12 months by a Fitness to Practise Committee panel on 29 July 2022.

The current order is due to expire at the end of 29 August 2023.

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

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

*That you, a Registered Nurse:*

1. *Between 26 July 2019 & 16 August 2019 misappropriated money donated to James Ward, London Northwest University NHS Trust by relatives of Patient A. **[PROVED]***
2. *Your actions at 1 above were dishonest in that you intended to retain some or all of the money for yourself. **[PROVED]***
3. *On 13 August 2019 represented to Colleague A that:*
  - a) *You had directed the relatives of Patient A to take the donation money downstairs, when you had not **[PROVED]***
  - b) *You did not have the donation money, when you did **[PROVED]***
4. *Your representations at 3 a) and/or b) were dishonest in that you were stating things about the donation money to Colleague A which you knew were untrue. **[PROVED]***
6. *Between 25 February 2020 and 11 July 2020 practised as a Nurse while suspended from the Register of Nurses, Midwives and Nursing Associates **[PROVED]***

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

The original panel determined the following with regard to impairment:

*The panel next went on to decide if as a result of the misconduct, Mrs Raghavan'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. 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 did not find that patients were put at risk and were caused physical and emotional harm as a result of Mrs Raghavan's misconduct. The panel noted that the concerns had nothing to do with Mrs Raghavan's clinical practice. In reaching its conclusion, the panel also took into account the written statement of Person A implying that her or her family had not suffered any harm:*

*"My position has always been very clear - that the nurse in question, did not do anything wrong and followed instructions in my presence from her supervisor."*

*The panel determined that Mrs Raghavan's dishonesty was a one-off and opportunistic conduct relating to money. It found that Mrs Raghavan's misconduct had breached the fundamental tenets of the nursing profession and therefore brought its reputation into disrepute. The panel has found that the dishonesty in this case is a grave concern and that Mrs Raghavan failed to be open and honest with her colleagues and did not fulfil her duty of candour. It concluded that confidence in the nursing profession would be undermined if its regulator did not find charges relating to dishonesty extremely serious. The panel considered that, whilst limbs (b), (c) and (d) of the test were engaged, it was not satisfied that there was a requirement for a finding of impairment on the ground of public protection.*

*Regarding insight, the panel acknowledged that Mrs Raghavan subsequently admitted being in possession of the money and gave the money back. It did consider this as a limited form of remediation. However, the panel had regard to Mrs Raghavan's email to the NMC dated 23 December 2021 cited by Ms Evans which it found demonstrated very limited insight into the implications of her dishonesty on colleagues, the family members of Patient A and for the reputation of the profession.*

*The panel considered that dishonesty is not an easily remediable concern, although it noted that there can be a degree of remediation in certain circumstances. The*

*panel carefully considered the evidence before it in determining whether or not Mrs Raghavan has demonstrated insight and remorse and taken steps to strengthen her practice. The panel has no information before it on Mrs Raghavan's current situation, no reflection pieces or information as to whether she is enhancing her practice, and no evidence of insight or remorse.*

*The panel is therefore of the view that there is insufficient insight to suggest that such dishonest conduct will not be repeated in the future.*

*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.*

*The panel concluded that public confidence in the profession would be undermined if a finding of impairment were not made in this case and therefore finds Mrs Raghavan's fitness to practise currently impaired on the grounds of public interest.*

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

The original panel determined the following with regard to sanction:

*Having found Mrs Raghavan'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, 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:*

- *Mrs Raghavan stood to make a personal gain, even if in the end, she did not as the money was returned,*
- *Mrs Raghavan did not declare that she had the money for some two weeks,*
- *During the investigation, Mrs Raghavan denied having the money,*
- *Mrs Raghavan misled the investigation as to where the money was, and*
- *There is no evidence of remediation, remorse, or reflections on the impact of her dishonesty on the public trust before the panel.*

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

- *Mrs Raghavan admitted to being in possession of the money during the Trust's internal investigation,*
- *Her dishonesty was not premediated, but rather opportunistic,*
- *This was a single course of conduct and there had been no evidence that it was repeated,*
- *The panel has seen no evidence of Mrs Raghavan having deep seated personality issues,*
- *Person A, who donated the money, stated that her perception was that Mrs Raghavan had done nothing wrong.*

*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 interest issues identified, an order that does not restrict Mrs Raghavan'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 Raghavan's misconduct was not at the lower end of the spectrum and that a caution order would be inappropriate in view of the issues identified. The panel decided that it would be neither proportionate nor in the public interest to impose a caution order.*

*The panel next considered whether placing conditions of practice on Mrs Raghavan's registration would be a sufficient and appropriate response. The panel is mindful that any conditions imposed must be proportionate, measurable and workable. The panel determined that a conditions of practice order is not relevant to her misconduct. It 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. The finding of dishonesty identified in this case was not something that can be addressed through retraining. Furthermore, the panel concluded that the placing of conditions on Mrs Raghavan's registration would not adequately address the seriousness of this case.*

*The panel then went on to consider whether a suspension order would be an appropriate sanction. The SG states that a 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 Committee is satisfied that the nurse/midwife has insight and does not pose a significant risk of repeating behaviours.*

*In considering the imposition of a suspension order, the panel noted that misconduct is on the serious end of the spectrum. It considered that dishonesty is a serious matter and that most cases of dishonesty result in a strike-off order. The panel also expressed concerns about the lack of evidence demonstrating insight on the part of Mrs Raghavan and had already concluded that due to this lack of evidence, it could not say today that there was no risk of repetition.*

*However, the panel determined that, based on the evidence before it, the panel considered that there is no risk to the public. It took into account that there is no evidence before it about deep-seated attitudinal issues or repetition on the part of Mrs Raghavan. It considered that the misconduct was an opportunistic incident and*



*comprised of a single course of conduct. It noted that Mrs Raghavan's opportunistic behaviour may have been motivated by personal gain, but that there was no actual gain from it as she subsequently admitted having the money and returned it. It noted that Mrs Raghavan is a nurse of 25 years' experience and that it did not have the benefit of Mrs Raghavan's presence at this hearing, nor was she represented.*

*The panel considered that the choice between a suspension order and a strike off order was finely balanced. It considered the principle of proportionality, the bigger picture and the need to protect the public interest, but also the need to balance the benefits to the public in retaining the services of an experienced and competent nurse. It took into account the SG on suspension and that Mrs Raghavan was already subject to an interim suspension order for a period of two years. It noted all the points in the submissions from Ms Evans and gave very serious consideration to a strike off order but ultimately decided that a strike off order would be a disproportionate sanction to satisfy the public interest. It determined that a strike off order was not the only mechanism which would satisfy the public interest. It concluded that a suspension order for a period of 12 months would be sufficient and proportionate to maintain public confidence and to send the right message to the profession. The panel was satisfied that in this case, her misconduct was not fundamentally incompatible with Mrs Raghavan remaining on the register.*

*Whilst the panel acknowledges that a suspension may have a punitive effect, it would be unduly punitive in Mrs Raghavan's case to impose a striking-off order. The panel noted the hardship such an order will inevitably cause Mrs Raghavan. However this is outweighed by the 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.*

*In making this decision, the panel carefully considered the submissions of Ms Evans in relation to the sanction that the NMC was seeking in this case. However,*

*the panel considered that a strike off order would be disproportionate at this time for the reasons it has outlined above.*

*The panel determined that a suspension order for a period of up to one year was appropriate in this case to mark the seriousness of the misconduct. It would give Mrs Raghavan sufficient time to complete some vital actions in order to prepare a detailed reflective statement. This would be to demonstrate her insight into the impact of her behaviour, to express her remorse, and to make clear that there was no risk of repetition of her dishonest behaviour.*

*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, including a strike off order.*

*Any future panel reviewing this case would be assisted by:*

- Mrs Raghavan's attendance at the next review hearing, in person,*
- Evidence of remediation, remorse, or insight, focussing on the impact of your behaviour towards your colleagues and the nursing profession,*
- Evidence of reflection on the impact of the dishonesty on the public interest*
- Information regarding Mrs Raghavan's personal and professional situation,*
- Testimonials from a line manager or supervisor that detail Mrs Raghavan's current work practices, if Mrs Raghavan has been in employment, and*
- Evidence of Mrs Raghavan's continuing professional development.*

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

This panel has considered carefully whether Mrs Raghavan'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.

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 Raghavan's fitness to practise remains impaired.

The panel noted that the original panel found that Mrs Raghavan had some limited insight in that she subsequently admitted being in possession of the money and gave the money back. At this meeting, the panel had nothing before it to demonstrate that Mrs Raghavan has any further insight and/or remorse for her actions or had taken any further steps to address the concerns. This panel found that her continued lack of engagement with her regulator demonstrated a further lack of insight.

In its consideration of whether Mrs Raghavan has taken steps to strengthen her practice, the panel noted that the original panel had concluded that dishonesty is not an easily remediable concern. This panel was of the view that it may be possible to demonstrate some remediation in regard to dishonesty, but having nothing before it in the way of information about her current employment, a reflective piece, engagement, nor any evidence of insight or remorse, the panel concluded that she had not addressed the concerns.

The original panel determined that Mrs Raghavan was liable to repeat matters of the kind found proved. Today's panel has received no new information and in light of this the panel determined that Mrs Raghavan is still liable to repeat matters of the kind found proved. The panel therefore decided that a finding of continuing impairment is necessary on the grounds of public interest.

This 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 Raghavan's fitness to practise remains impaired.

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

Having found Mrs Raghavan 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 an order that does not restrict Mrs Raghavan'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 Raghavan's misconduct was not at the lower end of the spectrum and that a caution order would be inappropriate in view of the issues identified. The panel decided that it would be neither proportionate nor in the public interest to impose a caution order.

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

mind the seriousness of the facts found proved at the original hearing and concluded that a conditions of practice order would not adequately satisfy the public interest. Furthermore, the panel was of the view that the finding of dishonesty identified in this case was not something that can be addressed through retraining. Accordingly, the panel was not able to formulate conditions of practice that would adequately address the concerns relating to Mrs Raghavan's misconduct.

The panel considered the imposition of a further period of suspension. The panel took note of the original panels view that prior to its imposition of a substantive suspension order for 12 months, the choice between a suspension order and a strike off order was finely balanced. This panel carefully considered that as Mrs Raghavan has not engaged during this 12 month substantive suspension order, in addition to being under an interim suspension order for two years prior, that a strike off order may be the appropriate sanction at this time. However, the panel was of the view that there may be a chance that Mrs Raghavan would still like to engage and noted in an email dated 23 December 2021 that she indicated that she wished to have her PIN restored.

The panel was of the view that though a strike off order may be appropriate at this time, a further and possibly last short suspension order would afford Mrs Raghavan a final chance to engage with her regulator and time to fully reflect on her previous failings and related dishonesty. It considered that Mrs Raghavan's need to gain a full understanding of how the dishonesty of one nurse can impact upon the nursing profession as a whole and not just the organisation that the individual nurse is working for.

The panel concluded that a further short suspension order of 6 months would be an appropriate and proportionate response and would afford Mrs Raghavan adequate time to further develop her insight and take steps to strengthen their practice if she wishes to engage at this point. It would also give Mrs Raghavan an opportunity to approach past and current health professionals to attest to her honesty and integrity in the workplace since the substantive hearing.

The panel determined therefore that a suspension order is the appropriate sanction which would continue to both protect the public and satisfy the wider public interest. Accordingly, the panel determined to impose a suspension order for the period of 6 months would

provide Mrs Raghavan with an opportunity to engage with the NMC. It considered this to be the most appropriate and proportionate sanction available.

This suspension order will take effect upon the expiry of the current suspension order, namely the end of 29 August 2023 in accordance with Article 30(1).

Before 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:

- Mrs Raghavan's engagement with the NMC
- Evidence of remediation, remorse, or insight, focusing on the impact of your behaviour towards your colleagues and the nursing profession,
- Evidence of reflection on the impact of the dishonesty on the public interest
- Information regarding Mrs Raghavan's personal and professional situation,
- Testimonials from a line manager or supervisor that detail Mrs Raghavan's current work practices, if Mrs Raghavan has been in employment, and
- Evidence of Mrs Raghavan's continuing professional development.

This will be confirmed to Mrs Raghavan in writing.

That concludes this determination.