Private and confidential



1 June 2010 PRE/ Code A (12053 Direct line: Code A Fax No: 020 7242 9579 Email: fitness.to.practise@nmc-uk.org DX: 37970 Kingsway



Preliminary Proceedings Committee

I refer to our previous correspondence.

The Preliminary Proceedings Committee considered your case on 12 and 13 April 2010 and decided to decline to proceed with the matter.

The panel considered the allegations very carefully and evaluated the information before it including the letter of complaints from Mr Page and <u>Code A</u> the clinical and nursing notes, the drug chart for Mrs Page, the evidence given at the Coroner's inquest, together with the response made by Mr Chris Green (RCN Solicitor) on behalf of the registrant.

The panel note that pursuant of Rule 8 (1) a. of the 1993 Rules Council's staff, have particularised three allegations which have been put before the registrant in this case. The panel are grateful for this preliminary work. However, the panel have noted that Mr Page's letter to the Council arises from concerns about a police investigation into deaths at Gosport War Memorial Hospital. The police allegations relate to the administration of medication via syringe drivers. The panel believe that for completeness they should consider the matter of the commencement of the syringe driver in relation to the care of Mrs Page as part of allegation 1.

The panel note that the Council wrote to Mr Page to ask him to provide specific allegations against the registrant and no response was received.

1. Decision: Declined to proceed with this allegation

Reasons:

In respect of the registrant's involvement in the establishment of the syringe driver, the drug chat shows that the registrant was not involved in the administration of the syringe driver on the 3 March 1998. The panel have considered all of the available material and have concluded that there are no other allegations related to the care of Mrs Page. For this reasons the panel have declined to proceed with this matter.

2. **Decision:** Declined to proceed with this allegation

Reasons:

The registrant was not involved in the care of Mrs Devine until the 19 November 1999 when she was the nurse in charge of the late shift. It appears that the registrant met with **Code A** when she arrived on the ward. There is no evidence that the registrant did provide Mrs Devine with an explanation about **Code A** medication. While the allegation may be capable of proof the fact that the registrant did not provide the information has to be considered in the context that the registrant did arrange for **Code A** to be seen by Dr Barton. This happened a short time later. Taking this into consideration the panel have concluded that the allegation is not capable of resulting in removal from the register. Accordingly, the panel have declined to proceed with this matter.

3. Decision: Declined to proceed with this allegation

Reasons:

The registrant was not involved in the care of Mrs Devine until the 19 November 1999 when she was the nurse in charge of the late shift. It appears that the registrant met with <u>Code A</u> when she arrived on the ward. There is no evidence that the registrant did provide Mrs Devine with an explanation about <u>Code A</u> deterioration. While the allegation may be capable of proof the fact that the registrant did not provide the information has to be considered in the context that the registrant specifically arranged for <u>Code A</u> to be seen by Dr Barton to discuss Mrs Devine's deterioration. This happened a short time later and after the discussion between <u>Code A</u> and Dr Barton the registrant remained with <u>Code A</u> to answer any further questions. Taking this into consideration the panel have concluded that the allegation is not capable of resulting in removal from the register. Accordingly, the panel have declined to proceed with the allegation. In considering this matter, the committee sat with a legal assessor.

Legal assessor's advice to the Preliminary Proceedings Committee:

The role of this PPC (under Rule 9 (1) of the 1993 Rules) is to consider allegations of misconduct and, subject to any determination under Rule 8(3), where it considers that the allegations may lead to removal from the register, direct the Registrar to send to the practitioner:

- (a) a Notice of Proceedings;
- (b) copies of statements obtained by Council during the investigation of the allegations and any other documents the Preliminary Proceedings Committee considers appropriate which are in the Council's possession unless such documents have already been sent to the practitioner under Rule 8(2) or otherwise;
- (c) a request that the practitioner respond, in writing, to the Notice of Proceedings;

The PPC should bear in mind that the public have an interest in the maintenance of standards and the investigation into complaints of serious professional misconduct against practitioners; that public confidence in the NMC and the nursing profession requires, and complainants have a legitimate expectation that such complaints (in the absence of some special and sufficient reason) will be publicly investigated by the PPC and that justice should in such cases be seen to be done. This must be most particularly the case where the practitioner continues to be registered and practise.

The stage which has been reached is that

- (a) the Registrar has sent to each practitioner concerned a summary of the allegations against him/her;
- (b) each practitioner has been given a chance to submit a preliminary response to summary of allegations, which response has been made available to this PPC.

The PPC has a filtering role. The test to be applied is somewhat lower than a real prospect of success. The PPC will only be able to form a preliminary view as to whether there is a reasonable prospect of success on the material before it.

The PPC's is to decide whether the complaint ought to proceed. The PPC may evaluate the available evidential material in order to determine whether, in its opinion, such material appears to raise a question as to whether the allegations may lead to removal from the register. It may conduct an investigation into the prospects of the allegations and may refuse to refer if satisfied that, in its opinion, such material does not appear to raise a question as to whether the allegations may lead to removal from the register, but it does so with the utmost caution bearing in mind the one sided nature of their procedures under the Rules which provide that, whilst the practitioner is afforded access to the complaint and is able to respond to it, the complainant has no right of access or to make an informed reply to the response, and the limited material likely to be available before the PPC.

It is not the role of the PPC to resolve conflicts of evidence. The PPC must bear in mind its limited filtering role and must balance due regard for the interests of the practitioner against the interests of the complainant and the public and must bear in mind the need for reassurance of the complainant and the public that complaints are fully and properly investigated and there is no cover up. Any doubt should be resolved in favour of the investigation proceeding.

It is apparent that the exercise which is contemplated is one in which available material is to be *evaluated* to determine whether that material appears to raise a question of *whether the allegations may lead to removal from the register.* "Evaluation of material" must refer to consideration of the evidential material, not simply to an analysis of whether the complaint itself (if supported by evidence) would amount to serious professional misconduct.

If the PPC is considering exercising its powers under Rule 8(3) (b) of the Rules, it should first have regard to the matters set out in paragraphs 56 and 95 of Standlen J.'s judgement in The Queen on the application of Michael McNicholas.

If you have	any questions ar	ising from this	s letter, please	do not hesita	ite to contact
	Code A				

Yours sincerely

Code A