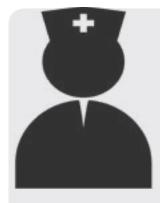
CASE STUDY

A nurse who repeatedly mistreated a vulnerable patient in her care

PROTECTING THE PUBLIC: SECTION 29 POWERS IN PRACTICE



Background

We appealed a decision to suspend a nurse for 12 months. The Nurse was witnessed repeatedly poking and striking a vulnerable patient. We thought this behaviour warranted stronger action to protect the public.

A vulnerable patient who could not speak up for himself

The nurse was working in a specialist unit for adults with learning disabilities and challenging behaviour. Her patient had been in the unit for almost a year and a half. He had a diagnosis of autistic spectrum disorder, severe mental impairment and challenging behaviour. He was extremely vulnerable and did not have the ability to make staff, carers or family aware of any improper behaviour or abuse.

What the witnesses reported

Two witnesses reported that they observed the nurse poking her patient several times in the chest as well as hitting him on the side of the head, with a broom or mop handle. The nurse also cuffed him around the head with enough force to cause him to flinch and pull away. These concerns were notified to the Nursing and Midwifery Council (NMC). The nurse disputed the charged, lied about her behaviour and showed little understanding about the impact of her actions on her patient. The NMC's fitness to practise panel suspended her for 12 months.

Why we decided to appeal

When we reviewed the case, we were concerned that the panel did not seem to take enough account of her 'detached manner' and there was no explanation provided for it. The violent nature of the conduct, the abuse of her position of trust towards her patient and her departure from the Code of practice did not appear to have been considered by the panel, who also noted in the paper work for the case '... that there was 'a high risk of repetition...'.

The grounds of our Appeal

There were several grounds for our appeal, but these included that the nurse's conduct was fundamentally incompatible with continued registration; and the panel had failed to think about the public interest in the standards expected of how a nurse should treat a patient. We also had issue with the panel's conclusion that there was no evidence of a harmful, deep-seated attitudinal problem in the nurse's treatment of her patient and even though she had denied what she had done, their belief that there was the potential for her to develop insight.

Appeal upheld

"..for a nurse to repeatedly strike a vulnerable patient, especially in the knowledge that her conduct was likely to increase the patient's distress, constituted a serious departure from the relevant professional standards...and her conduct amounted to an abuse of trust and an abuse of position...."

This was the view of the Court which upheld our appeal and substituted the decision made by the panel and asked for the nurse to be struck off.

Find out more



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