

**ROYAL COLLEGE OF VETERINARY SURGEONS**

**INQUIRY RE:**

**JULIE ELIZABETH HICKMAN RVN**

---

**DISCIPLINARY COMMITTEE DECISION**

---

1. The Charges

1.1 The Respondent faced the following charges:

*That, being registered in the Register of Veterinary Nurses, and whilst in practice at Blacks Vets, Dudley Hospital, 50A Hall Street, Dudley DY2 7 BT, you, on 8 November 2022:*

1. *In relation to Rosie Davies, a female Cavalier King Charles Spaniel who had undergone surgery on 7 November 2022:*

- a) *left Rosie unattended between approximately 01.05 and 04:23; and/or*
- b) *made entries in the clinical records for Rosie indicating that you had checked on and/or made clinical observations of and/or taken out and/or offered water to Rosie at 03:00 or thereabouts when you had not done so;*

2. *In relation to Billie Taylor, a female English Bull Terrier who had undergone surgery on 7 November 2022:*
  - a) *left Billie unattended between approximately 01:05 and 04: 23; and/or*
  - b) *made entries in the clinical records for Billie indicating that you had checked on and/or made clinical observations of and/or checked the catheter of and/or offered water to Billie at 03:00 or thereabouts when you had not done so;*
3. *In relation to Stitch Morgan, a male cross-breed dog who was hospitalised for monitoring:*
  - a) *left Stitch unattended between approximately 01:05 and 04:23; and/or*
  - b) *made entries in the clinical records for Stitch indicating that you had checked on and/or made clinical observations of and/or taken out Stitch at 03:00 or thereabouts when you had not done so;*
4. *Your conduct in relation to 1 (a) and/or 1 (b) and/or 2 (a) and/or 2 (b) and/or 3 (a) and/or 3 (b) above was potentially detrimental to animal welfare;*
5. *Your conduct in relation to 1 (b) and/or 2 (b) and/or 3 (b) above was:*
  - a) *dishonest; and/or*
  - b) *misleading;*

*AND that in relation to the above, whether individually or in any combination, you are guilty of disgraceful conduct in a professional respect.*

2. Representation and attendance.

- 2.1 The College was represented by Ms Alexis Hearnden, Counsel, instructed by Capsticks; the Respondent was represented by Mr Alex Jamieson, Counsel, instructed by Keoghs.

2.2 The Respondent was not present at the hearing.

3. Preliminary matters

3.1 Mr Jamieson applied for a direction, under Rule 21.2 of the Veterinary Surgeons and Veterinary Practitioners (Disciplinary Committee) (Procedure and Evidence) Rules Order of Council 2004, (“the Rules”) that matters relating to the Respondent’s health be heard in private.

3.2 Ms Hearnden did not object to this application.

3.3 After hearing legal advice, the Committee accepted the application and directed that matters relating to the Respondent’s health be heard in private.

3.4 Ms Hearnden, on behalf of the College, invited the Committee to proceed in the absence of the Respondent. She submitted that notice of this hearing had been properly served and the Respondent was represented, but not present in person. She also submitted that it seemed unlikely that the Respondent would attend if the matter was adjourned to some other date.

3.5 On behalf of the Respondent Mr Jamieson told the Committee that the Respondent wanted the matter to proceed. Her absence was occasioned by reason of her health.

3.6 After receiving legal advice, the Committee decided to exercise its discretion under rule 10.4 of the Rules to proceed in the Respondent’s absence. It was satisfied that the Notice of Inquiry had been properly served. The Respondent was represented and wanted the matter to proceed. Mr Jamieson would be afforded every opportunity to obtain any necessary further instructions from the Respondent during the hearing. It concluded that no useful purpose would be served by adjourning the hearing and that it was in the interests of both parties and in the interests of justice to proceed with the hearing.

4. Admissions

4.1 Mr Jamieson informed the Committee that, in accordance with the contents of her witness statement, the Respondent admitted all of the Charges.

4.2 The Committee accepted the Respondent's admissions and found the factual elements of the Charges to be Proved by way of admission.

5. Background

5.1 The Respondent was admitted to the Register of Veterinary Nurses in 2008. She was employed as a night nurse at Black's Veterinary Hospital from February 2022 until 6 January 2023. As a night nurse she worked a 13-hour shift which began at 19.30 and concluded at 08.30. She was entitled to a break of one hour during this period which she could take in parts if she chose. The hospital usually had between five and ten in-patients at any one time. The Respondent's responsibilities included the administration of medication and the monitoring of patients in accordance with any veterinary instruction. She was the only member of staff on duty overnight. A veterinary surgeon was always on call.

5.2 In the afternoon of 7 November 2022, Dr BH, MRCVS, and a Clinical Director at the Practice, operated on Rosie, a Cavalier King Charles Spaniel, to assess her throat and in particular to determine whether Rosie suffered from Brachycephalic Obstructive Airway Syndrome and laryngeal collapse. Dr BH examined her throat under general anaesthetic and diagnosed significant laryngeal collapse. He shortened her soft palate and removed her tonsils. She was admitted as an in-patient overnight for very close monitoring for discomfort and distress and the administration of medication where necessary.

5.3 On the evening of the same date, Dr BH operated, as an emergency, on Billie, an English Bull Terrier, who was unwell and vomiting. He carried out an exploratory laparotomy and removed a piece of fatty tissue from around Billie's intestine. Billie

was admitted as an in-patient overnight for monitoring, pain relief and the administration of antibiotics.

- 5.4 Also present as an in-patient at the hospital and being monitored for seizures was Stitch, a male, cross-breed dog.
- 5.5 At about 04:30 on 8 November Dr BH received a telephone call from the Respondent who told him that she was concerned about Rosie's breathing. When he arrived at the hospital, some 30 minutes later, he found that Rosie had been placed on oxygen. He administered oxygen and adrenaline and a sedative which helped to reduce her temperature. He considered her condition at that point to be quite serious. He carried out an emergency tracheotomy with the assistance of the Respondent. Unfortunately, however, Rosie's condition continued to deteriorate, and she was put to sleep on 9 November 2022. For the avoidance of any doubt, the College did not allege that any failure on the part of the Respondent caused the death of Rosie.
- 5.6 Dr BH became concerned, however, about the Respondent's monitoring of Rosie overnight. In particular, his concern was stimulated by a remark the Respondent made to him on 8 November that *"I've come back from my break and found her like this"*. He wondered how long the Respondent's break had been and wanted to check that Rosie had been monitored properly. He raised his concerns and in consequence Ms KS and Ms SL, respectively Group Nursing Manager and Practice Manager, viewed the available CCTV footage. This included motion sensitive footage of the dog ward. The footage showed that the Respondent had not been present in the dog ward between 01.04 and 04.23 on 8 November 2022.
- 5.7 The clinical record for Rosie contained entries, made by the Respondent, which indicated that at 03:00 the Respondent had taken Rosie's pulse, observed her respiratory rate, offered her water and taken her out of her kennel.

- 5.8 The clinical record for Billie contained entries, made by the Respondent, which indicated that at 03:00 the Respondent had taken Billie's pulse, observed her respiratory rate and the colour of her mucous membranes, checked Billie's catheter and offered her water.
- 5.9 The clinical record for Stitch contained entries, made by the Respondent, which indicated that at 03:00 the Respondent had taken Stitch's pulse, observed his respiratory rate and taken him out of his kennel.
- 5.10 In her witness statement prepared for these proceedings the Respondent accepted that these entries were false. She said that her health was poor at the time and that she must have fallen asleep between 01:05 and 04:23. When she did visit the dog ward, shortly after that time, she found Rosie's breathing to be a cause for concern and immediately contacted Dr BH. She stated that she made the false entries in a state of panic so as to make it appear that she had not been absent on her break for as long as had in fact been the case.

6. Disgraceful Conduct in a professional respect

- 6.1 Ms Hearnden submitted that the facts admitted by the Respondent amounted to disgraceful conduct in a professional respect. She referred the Committee to the following paragraphs of the *Code of Professional Conduct for Veterinary Nurses* ("the Code"):

1.1 *Veterinary nurses must make animal health and welfare their first consideration when attending to animals.*

1.3 *Veterinary nurses must provide veterinary nursing care that is appropriate and adequate.*

2.5 *Veterinary nurses must keep clear, accurate and detailed clinical nursing and client records.*

- 3.1 *Veterinary nurses must take reasonable steps to address adverse physical or mental health or performance that could impair fitness to practise; or, that results in harm, or a risk of harm, to animal health or welfare, public health or the public interest.*
- 6.2 Ms Hearnden submitted that the Respondent had breached each of these requirements in circumstances where she was solely responsible for the overnight monitoring of patients at the hospital. She reminded the panel that the Respondent's admissions included an admission of dishonesty which was itself at the top end of the spectrum of gravity for misconduct.
- 6.3 Mr Jamieson told the Committee that the Respondent admitted that she was guilty of disgraceful conduct in a professional respect. He reminded the Committee that there were health matters to be considered which would be explored in more detail during a later part of this hearing. These provided the context for the Respondent's conduct. He also reminded the Committee that the Respondent had displayed a high standard of care in assisting Dr BH to carry out an emergency tracheotomy on Rosie.
- 6.4 The legal assessor advised the Committee that the question of disgraceful conduct was a matter for its judgment and that appropriate standards of conduct were to be found in the Code.
- 6.5 The Committee noted that the Respondent was the only veterinary professional who was present at the hospital throughout the night. She was therefore in a position of particular responsibility, and the more so as one of the patients, Rosie, had undergone complex surgery earlier in the day, as a result of respiratory difficulties, and was therefore in a particularly vulnerable condition. Both Billie and Stitch were also vulnerable (hence their in-patient status) but perhaps not quite to the same extent. In the Committee's assessment the Respondent's failure to monitor these patients in the dog ward as frequently as was appropriate created a risk of harm to

them and also breached the trust of their owners. They had left their animals at the hospital in the expectation that the ward would be appropriately monitored. Failure to do so was in the Committee's assessment disgraceful conduct in a professional respect.

- 6.6 The making of dishonest and misleading entries in the clinical record was, in the Committee's assessment, self-evidently disgraceful conduct in a professional respect.
- 6.7 The Committee concluded that the matters admitted by the Respondent involved serious breaches of paragraphs 1.1, 1.3 and 2.5 of the Code.
- 6.8 In making false entries in the clinical records so as to safeguard her own position the Respondent had not made animal health and welfare her first consideration when attending to animals.
- 6.9 In failing properly to monitor the condition of in-patients and in creating inaccurate records the Respondent was in serious breach of her responsibilities under Paragraphs 1.1, 1.3 and 2.5 of the Code.
- 6.10 In relation to paragraph 3.1 of the Code, the Committee noted that the Respondent's obligation was to take reasonable steps to address adverse physical or mental health. The Respondent was at the time receiving treatment for a health condition and the matters with which the Committee was concerned arose on a single occasion and were not alleged to be part of more general failings occasioned by adverse physical or mental health. In all the circumstances the Committee did not consider that a conclusion that the Respondent was in breach of this paragraph was justified.
- 6.11 The Committee was in no doubt, however, that the Respondent's failure to monitor properly three patients in an overnight ward in a hospital and the subsequent creation of false records to suggest that appropriate monitoring had taken place amounts to disgraceful conduct in a professional respect.



7. Sanction

7.1 Ms Hearnden informed the Committee that there were no previous regulatory findings against the Respondent. She reminded the Committee that any sanction should serve to protect and promote the health and welfare of animals, maintain public confidence in the profession and promote and maintain proper professional standards. She acknowledged that consistency of decision – making was desirable but cautioned against over-reliance upon the decisions in other disciplinary cases as the facts in each case were unique.

7.2 Mr Jamieson made written and oral submissions. He referred to the Respondent's hard work in becoming a registered veterinary nurse and the difficult circumstances in which she had gained her professional expertise. He submitted that the testimonial evidence before the Committee clearly showed that the Respondent had worked to a high standard since her admission to the Register in 2008 and that this remained the case despite a deterioration in her health which had begun in 2016. He emphasised that the Respondent's absence from the hearing was due entirely to her fragile state of health.

7.3 [REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

7.4 Mr Jamieson submitted that the Respondent's voluntary disclosure that, since the events with which these proceedings are concerned, [REDACTED] [REDACTED] had led to the loss of subsequent veterinary employment suggested that her level of insight was now good. He submitted that the conduct which had led to these proceedings was inconsistent with her long and previously unblemished career. He emphasised that the decisions she had made on 8 November 2022 had been made when she was in very poor health, [REDACTED] [REDACTED] and without the opportunity for reflection. He told the Committee that the Respondent was now systematically working on her health and had sought employment outside a clinical environment because she realised that she was not fit enough, at present, to work in such an environment.

7.5 The legal assessor reminded the Committee of the need to apply the principles distilled in the Sanctions Guidance and of the obligation to arrive at a sanction which was proportionate in that it was sufficient, but no more than sufficient, to protect the public and satisfy the public interest.

7.6 In considering sanction the Committee placed significant emphasis upon the Respondent's previous long and unblemished career, the medical report [REDACTED] [REDACTED], and the testimonial evidence provided by those who had worked with the Respondent. In the Committee's judgment the combined effect of this evidence was to indicate, convincingly, that the Respondent's conduct on 8 November 2022 was significantly affected by her poor health at the time and was an episode which was out-of-character.

7.7 [REDACTED]  
[REDACTED]  
[REDACTED]  
[REDACTED]  
[REDACTED]

[REDACTED]  
[REDACTED]  
[REDACTED]  
[REDACTED]

- 7.8 The Committee noted the Respondent's subsequent difficulties which, by her own admission, involved the [REDACTED] from the veterinary practice at which she was then working. Whilst this meant that the incident for which it was considering sanction could not strictly be judged to be an isolated lapse in her conduct, the Committee did not consider that the mitigating factors which it identified in this decision were significantly undermined by it. It was also noteworthy that despite this episode the veterinary practice concerned had provided a testimonial which was very supportive and had written:

*"that if she overcame the problem [REDACTED] we would certainly consider employing her again, however this would have obviously been in a more monitored day time role."*

- 7.9 Taking all of that into account, the Committee recognised that it was nonetheless concerned with a case which involved dishonesty, and dishonesty which had not been admitted at an early stage. There were also aggravating factors in that, as previously noted, the Respondent's conduct involved a risk of injury to animals and a breach of trust towards the owners of those animals.

- 7.10 The mitigating factors which the Committee identified were that this was an unusual and out- of- character event in the Respondent's professional history. The testimonials submitted showed that, prior to this episode, her standards of care for animals had been consistently high; her behaviour was significantly influenced by her[adverse health] [REDACTED]  
[REDACTED]

- 7.11 The Committee also attached some importance to the fact that this was not a case in which patients had been left unattended because the Respondent had left the premises to pursue some purpose of her own. She had, unintentionally, fallen asleep.
- 7.12 The Committee was also satisfied that the Respondent now fully appreciated the implications of her disgraceful conduct. In her witness statement she had not only expressed her remorse but her appreciation of the impact behaviour of this kind was liable to have upon the reputation of the profession. The Committee noted the supportive content of the references from a Senior Practitioner [REDACTED], dated 26 August 2025, and from [ a Coach] [REDACTED], dated 3 September 2025. The former wrote that the Respondent had shown over the course of ten months *“a good understanding [REDACTED]”* and the latter, who had known the Respondent for nine months, wrote that he commended her for *“her improvements, as well as her ability to recognise and address the challenges she has faced”*. The Committee considered that there was no longer a significant risk of repetition.
- 7.13 The Committee considered the available sanctions in ascending order.
- 7.14 This was too serious a case in which to take no action.
- 7.15 Although some elements of this case might seem to lend themselves to a postponement of sanction, the Committee was mindful that Mr Jamieson had emphasised that it was important for the Respondent’s health that this case was now resolved and the Committee appreciated the force of that.
- 7.16 The Committee did not consider that a reprimand or warning was an appropriate sanction. The Respondent’s disgraceful conduct, influenced as it was by her health, was not at the lower end of the spectrum. In the Committee’s judgment a reprimand or warning would not be sufficient to meet the public interest.

7.17 The Committee next considered suspension. It noted, in particular, Paragraph 71 of the Sanctions Guidance which is in the following terms:

*“Suspension may be appropriate where some or all of the following apply*

- a) The misconduct is serious but a lesser sanction is inappropriate and the conduct in question falls short of being fundamentally incompatible with remaining on the register;*
- b) The respondent.... has insight into the seriousness of the misconduct and there is no significant risk of repeat behaviour;*
- c) The respondent... is fit to return to practice after the period of suspension”.*

7.18 In the Committee’s judgment each of these factors applied in the present case.

Further, the Committee was satisfied that a significant period of suspension would properly reflect the gravity of the Respondent’s disgraceful conduct, serve to maintain the reputation of the profession and promote and maintain proper standards of conduct. The Committee considered that a period of suspension of six months was sufficient to satisfy this public interest.

7.19 In accordance with its usual practice the Committee also considered the sanction immediately above that of suspension. It concluded that, in the light of the mitigating circumstances and the steps which the Respondent had taken to develop an appropriate level of insight, the sanction of removal would be disproportionate and unduly punitive.

7.20 The Committee therefore directs that the Respondent’s registration in the Register of Veterinary Nurses is to be suspended for a period of six months.

**DISCIPLINARY COMMITTEE**  
**12 SEPTEMBER 2025**