

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

**Substantive Order Review Hearing
Thursday, 15 January 2026**

Virtual Hearing

Name of Registrant: Kelsy Coelho-Jones

NMC PIN: 20C0031E

Part(s) of the register: Registered Nurse – Adult
(10 March 2020)

Relevant Location: Leeds

Type of case: Misconduct

Panel members: Wayne Miller (Chair, Lay member)
Ray Salmon (Lay member)
Daniel Robert Harris (Registrant member)

Legal Assessor: Angus Macpherson

Hearings Coordinator: Eidvile Banionyte

Nursing and Midwifery Council: Represented by Isabella Kirwan, Case Presenter

Miss Coelho-Jones: Present and not represented at this hearing

Order being reviewed: Suspension order (9 months)

Fitness to practise: Not Impaired

Outcome: **Order to lapse upon expiry in accordance with Article 30(1), namely end of 20 February 2026**

Decision and reasons on application for hearing to be held in private

At the outset of the hearing, Ms Kirwan, on behalf of the Nursing and Midwifery Council (NMC), made a request that this case be held partially in private on the basis that proper exploration of your case may involve reference to your private life. The application was made pursuant to Rule 19 of the 'Nursing and Midwifery Council (Fitness to Practise) Rules 2004', as amended (the Rules).

You indicated that you supported the 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.

The panel determined to go into private session in connection with your private life as and when such matters are raised in order to protect your privacy.

Decision and reasons on review of the substantive order

The panel decided to allow the order to lapse upon expiry in accordance with Article 30 (1) of the 'Nursing and Midwifery Order 2001' (the Order), namely at the end of 20 February 2026, when this order will come into effect.

This is the first review of a substantive suspension order originally imposed for a period of nine months by a Fitness to Practise Committee panel on 17 April 2025.

The current order is due to expire at the end of 20 February 2026.

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. On 21 March 2022:

- 1.1. Accessed patient 1's medical records without clinical justification;*
- 1.2. Accessed patient 2's medical records without clinical justification;*
- 1.3. Accessed patient 3's medical records without clinical justification;*
- 1.4. Accessed patient 4's medical records without clinical justification;*
- 1.5. Accessed patient 5's medical records without clinical justification;*
- 1.6. Accessed patient 6's medical records without clinical justification;*
- 1.7. Accessed patient 7's medical records without clinical justification;*

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:

'In coming to its decision, the panel had regard to the Fitness to Practise Library, updated on 27 March 2023, which states:

'The question that will help decide whether a professional's fitness to practise is impaired is:

"Can the nurse, midwife or nursing associate practise kindly, safely and professionally?"

If the answer to this question is yes, then the likelihood is that the professional's fitness to practise is not 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 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 is equally applicable to nurses and 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) ...'*

The panel determined that limbs a, b and c of Dame Janet Smith's "test" were engaged both in terms of her past conduct as well as the potential for Miss Coelho-Jones to repeat that misconduct in the future.

The panel finds that patients were put at risk of harm and were caused emotional harm as a result of Miss Coelho-Jones's misconduct. It noted that Miss Coelho-Jones' misconduct took place over a single isolated 18-minute period on 21 March 2022. Miss Coelho-Jones's misconduct had breached the fundamental tenets of the nursing profession, namely that she breached various parts of the Code, and therefore brought its reputation into disrepute.

Regarding insight, the panel considered that Miss Coelho-Jones had very limited insight. The panel considered all of Miss Coelho-Jones' responses during the local investigation and in particular the statement that she provided to the Trust during its local investigation. The panel was of the view that Miss Coelho-Jones had focused on the impact that the investigation had on her and she had not considered the seriousness of the allegations and the impact that such conduct could have on patients, her colleagues and the wider nursing profession.

Whilst noting and accepting Miss Coelho-Jones's right to deny the charges, the panel was of the view that it would still have been possible for her to have demonstrated insight into the seriousness and potential impact of the conduct set out in the charges. It concluded that Miss Coelho-Jones has not demonstrated an understanding of how accessing patient records without any clinical justification could put patients at a risk of harm nor has she demonstrated an understanding of why it is wrong to do so. The panel had no information from Miss Coelho-Jones on how accessing patient records without clinical justification would impact negatively on the reputation of the nursing profession and how it would impact the confidence of members of the public who engage with the WISH clinic. It noted that Miss Coelho-Jones has not sufficiently demonstrated how she would handle a similar situation differently in the future.

The panel was satisfied that the misconduct in this case is capable of being addressed. The panel considered the evidence before it in determining whether or not Miss Coelho-Jones has taken steps to strengthen her practice. The panel took into account she has not completed a reflective statement in relation to addressing the concerns set out in the charges nor has she provided evidence of any relevant training undertaken.

The panel took into account the character references provided on Miss Coelho-Jones' behalf. The panel was of the view that the character references are of limited value in terms of demonstrating her insight.

The panel concluded that there is a risk of repetition based on Miss Coelho-Jones' lack of insight and lack of evidence of strengthened practice. The panel therefore decided that a finding of impairment is necessary on the grounds of public protection.

The panel bore in mind 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 proper professional standards for members of those professions.

The panel determined that a finding of impairment on public interest grounds is required. The panel bore in mind that information that patients share with sexual health clinics can be sensitive and that by accessing them without any clinical justification, public confidence in healthcare, the nursing profession and Spectrum (as a healthcare provider and employer) could be damaged. The panel was of the view that Miss Coelho-Jones' conduct, as found proved in the charges, may discourage patients from engaging with sexual health clinics and patients could potentially delay their treatment. It took into consideration that as a nurse Miss Coelho-Jones holds a position of trust and that by accessing patient records without any clinical justification she has abused her position. The panel concluded that a member of the public would be shocked and dismayed if a finding of impairment was not made given the seriousness of Miss Coelho-Jones' misconduct.

In addition, the panel concluded that public confidence and the maintenance of standards in the profession and the NMC would be undermined if a finding of impairment were not made in this case. The panel therefore also finds Miss Coelho-Jones's fitness to practise impaired on the grounds of public interest.

Having regard to all of the above, the panel was satisfied that Miss Coelho-Jones's fitness to practise is currently impaired.'

The original panel determined the following with regard to sanction:

'Having found Miss Coelho-Jones'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 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:

- *Miss Coelho-Jones's conduct put patients at risk of suffering harm and two patients were caused actual harm.*
- *Miss Coelho-Jones's conduct was deliberate.*
- *Miss Coelho-Jones has demonstrated very limited insight.*
- *There is a risk that Miss Coelho-Jones may repeat her misconduct.*

The panel took into account the character references provided on Miss Coelho-Jones's behalf. The panel took into consideration that the character references are unrelated to her work as a registered nurse, and it determined that they do not provide sufficient weight to be considered as mitigation in relation to the misconduct found.

The panel first considered whether to take no action but concluded that this would be inappropriate in view of the seriousness of the case and risk of repetition identified in Miss Coelho-Jones's practice. The panel decided that it would be neither proportionate nor in the public interest to take no further action. It also determined that it would not protect the public nor mark the seriousness of the misconduct.

It then considered the imposition of a caution order but again determined that, due to the seriousness of the case, and the public protection issues identified, an order that does not restrict Miss Coelho-Jones'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 Miss Coelho-Jones'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. It also determined that a caution order would not mark the seriousness identified.

The panel next considered whether placing conditions of practice on Miss Coelho-Jones'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 took into account the factors where a conditions of practice order would be appropriate as outlined in the SG. The panel noted its earlier finding that Miss Coelho-Jones has not demonstrated any evidence of harmful deep-seated personality or attitudinal problems. The panel is of the view that the misconduct identified in this case was not something that can be addressed through retraining. The panel was not satisfied that appropriate conditions can be created that can be monitored and assessed. It determined that any conditions which would be imposed on Miss Coelho-Jones would be tantamount to a suspension order. The panel determined that there are no practical or workable conditions that could be formulated, given the nature of the charges found proved in this case.

Furthermore, the panel concluded that the placing of conditions on Miss Coelho-Jones's registration would not adequately address the seriousness of this case and would not protect the public.

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 or midwife has insight and does not pose a significant risk of repeating behaviour;*
- *...*
- *...*

The panel bore in mind that this was an isolated incident which took place over an 18-minute period on a single date, 21 March 2022. The panel took into account its earlier finding that Miss Coelho-Jones has not demonstrated any evidence of harmful deep-seated personality or attitudinal problems. It noted that it had no evidence that Miss Coelho-Jones has repeated her misconduct since this incident despite having an opportunity to do so whilst she continued working at the Trust for several months. The panel bore in mind its earlier findings that Miss Coelho-Jones has demonstrated very limited insight and that she poses a risk of repeating her misconduct but considered that it was not a significant risk.

The panel was satisfied that in this case, the misconduct was not fundamentally incompatible with remaining on the register and can be addressed.

The panel noted that the burden will be with Miss Coelho-Jones to demonstrate to a future reviewing panel that she would like to remain on the NMC register and that she no longer poses a risk of repeating the conduct found proved.

It did go on to consider whether a striking-off order would be proportionate but, taking account of all the information before it, the panel concluded that it would be disproportionate. It noted that Miss Coelho-Jones's misconduct was an isolated incident that took place over an 18-minute period on 21 March 2022. It was of the

view that Miss Coelho-Jones's misconduct did raise fundamental questions about her professionalism. However, it determined that public confidence in the professions can be maintained if she remains on the NMC register and her misconduct is addressed by way of a lesser sanction. The panel also determined that a striking off order was not the only sanction which would sufficiently protect patients, members of the public and maintain professional standards. The panel acknowledges that a suspension order may have a punitive effect but that it would be unduly punitive in Miss Coelho-Jones's 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 Miss Coelho-Jones. 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.

The panel determined that a suspension order for a period of nine months is appropriate in this case, in the absence of any mitigating factors, Miss Coelho-Jones's lack of insight and the harm caused to the patients involved. The panel was satisfied that a period of nine months would sufficiently mark the seriousness of the misconduct, address the public protection concerns and satisfy the public interest.

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:

- Miss Coelho-Jones' attendance and engagement at any future NMC review hearing.*

- *A reflective statement which addresses the findings of this panel including the impact of the proven conduct on patients, members of the public, colleagues and the wider nursing profession.*
- *Evidence of continuing professional development undertaken.*
- *Any relevant paid or unpaid workplace testimonials or references that detail Miss Coelho-Jones' current work practices.'*

Submissions on current impairment

The panel has considered carefully whether your 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, and the documentation provided by you. It has taken account of the submissions made by Ms Kirwan on behalf of the NMC, your evidence and your submissions.

Ms Kirwan outlined the background to the case and referred the panel to the hearing bundle. She also referred the panel to the substantive panel's decision.

Ms Kirwan submitted that you have provided a number of documents for today's hearing: a reflective statement, which does appear to address what the substantive panel has requested, including the impact of the conduct on patients, members of the public, colleagues and the wider nursing profession. She submitted that you also have provided evidence of some continuing professional development in the form of training records, one of which relates to GDPR. Ms Kirwan submitted that you also provided paid and/or unpaid workplace testimonials and references.

Ms Kirwan submitted that it was a matter for the panel to assess whether it is satisfied, taking into account all of the evidence before it, as to whether you are currently impaired.

You have given evidence to the panel under affirmation.

You told the panel about your personal circumstances at the time of the local investigation. You explained how this affected your insight and that you were focusing on yourself and probably did not have the best attitude towards the investigation. You explained that you have had a couple of years to reflect and you now know that you could have dealt with things differently. You accepted that your fitness to practise was impaired at the time of the last hearing and since then you have learned to accept responsibility.

You read your reflective statement to the panel.

You told the panel about your current role as a child minder and why you are enjoying it. You explained that this reminded you why you wanted to be a nurse. You said that you learned a lot about yourself working as a child minder.

You also told the panel that the last couple of years have shown to you the importance of reflection and that you have matured. You explained that now, if faced with any concerns in relation to data protection or patient care and safety, you would flag it up immediately to someone senior in order to preserve patient safety. You also explained that this situation has made you realise the importance of transparency, being able to take accountability and the importance of reflective practice. You acknowledged that at the beginning you did not handle the situation in an appropriate professional way.

You told the panel that you understand now that you could have provided a reflective statement for your substantive hearing, even if you were not attending, but that you were [PRIVATE] to be able to do it then.

You explained that you want to be a role model for your daughter and that you wish to return to nursing.

You told the panel about your nursing career history.

You explained to the panel the importance of public trust and confidence in the profession.

Closing submissions

Ms Kirwan submitted that it was the matter for the panel to assess whether you are still currently impaired and if so, what sanction would be appropriate.

You explained that you understood how breaches of confidentiality can cause harm to patients and undermine the public confidence in the profession.

You told the panel that you wish to return to nursing and if given an opportunity, a chance to complete additional training in information governance and data protection.

You explained that you have now been able to reflect, show full insight and would be able to practise safely and responsibly.

You explained that you are happy to comply with any conditions if imposed.

The panel heard and accepted the advice of the legal assessor.

Decision and reasons on current impairment

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 your fitness to practise remains impaired.

The panel noted that the original panel found that in your response to the local investigation and in your statement to the Trust you had shown very limited insight. In contrast, at this hearing the panel determined that you showed a good degree of insight. The panel considered that you engaged well during this hearing; you demonstrated that you are very remorseful. Whilst you are still denying you had in fact accessed patient records, you have demonstrated insight into the seriousness and potential impact of the conduct found proved. You also have demonstrated an understanding of how accessing patient records without any clinical justification could put patients at a risk of harm and the

impact this could have on the public's trust towards the nursing profession. The panel was of the view that, with regards to the local investigation, you have now shown an understanding about how you could have done things differently. You explained in detail why you did not at the time.

In its consideration of whether you have taken steps to strengthen your practice, the panel took into account your training certificates and in particular the GDPR training completed in May 2025. It also took into account your explanation with regards to the [PRIVATE] and why you had not been able to complete additional courses, which you hope to complete once you return to practice.

The original panel determined that you were liable to repeat matters of the kind found proved, based on your lack of insight and lack of strengthened practice. Today's panel, has noted that the matters found proved related to one single incident, which occurred in an 18-minute window. It was of the view that you have fully reflected and explained how you would deal with things going forward, that your insight was genuine and consistent. The panel was of the view that you have taken all of the recommended steps by the substantive panel, including providing a workplace reference, and have addressed the concerns. In light of this, this panel determined that you are now not liable to repeat matters of the kind found proved. The panel therefore decided that a finding of continuing impairment is not appropriate on the grounds of public protection.

The 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 not appropriate.

For these reasons, the panel finds that, although your fitness to practise was impaired at the time of the incidents, given all of the above, your fitness to practise is not currently impaired.

In accordance with Article 30(1), the substantive suspension order will lapse upon expiry, namely the end of 20 February 2026.

This will be confirmed to you in writing.

That concludes this determination.