

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

**Substantive Order Review Hearing
Tuesday, 6 January 2026**

Virtual Hearing

Name of Registrant: Victoria Christine Reed

NMC PIN: 99H0042E

Part(s) of the register: Registered Midwife
RM: Midwife (26 August 2002)

Relevant Location: Nottingham

Type of case: Misconduct

Panel members: Nicholas Rosenfeld (Chair, Lay member)
Asma Boujnah (Registrant member)
Elisabeth Fairbairn (Registrant member)

Legal Assessor: Andrew Granville-Stafford

Hearings Coordinator: Bethany Seed

Nursing and Midwifery Council: Represented by Zainab Mohamed, Case Presenter

Mrs Reed: Present and represented by Jerome Burch, instructed by
Thompsons Solicitors

Order being reviewed: Suspension order (12 months)

Fitness to practise: Impaired

Outcome: **Striking-Off order to come into effect on 11 February 2026 in accordance with Article 30 (1)**

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

At the outset of the hearing, Mr Burch, on your behalf, made a request that this case be held partly in private [PRIVATE]. The application was made pursuant to Rule 19 of the 'Nursing and Midwifery Council (Fitness to Practise) Rules 2004', (the Rules).

Ms Mohamed, on behalf of the Nursing and Midwifery Council (NMC) indicated that she supported the application [PRIVATE].

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, third party or by the public interest.

The panel determined to go into private [PRIVATE] when such issues are raised in order to protect your right to privacy.

Decision and reasons on review of the substantive order

The panel decided to replace the current suspension order with a striking off order.

This order will come into effect at the end of 11 February 2026 in accordance with Article 30(1) of the 'Nursing and Midwifery Order 2001' (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 10 January 2025.

The current order is due to expire at the end of 11 February 2026.

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

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

'That you, a registered nurse:

- 1) *Between 01 September 2020 to 15 September 2021, you accessed 1,214 clinical records without authority or clinical justification.*
- 2) *On or around 15 October 2021, during an investigation into your conduct you made the following representations which were untrue:*
 - a) *That before 11 September 2021, you had not logged on and reviewed patient records from home before and/or that you did not know that you could.*
 - b) *That between 10 and 15 September 2021, you had only accessed patient records on Lawrence Ward.*
- 3) *Your conduct set out in charge 2(a) and 2(b) was dishonest, in that you intended to minimise the extent of your access to clinical records.*

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:

'You accept that you had been scrolling through patient records for over a year and that this resulted in 1214 patient records being accessed. This was a clear breach of confidentiality, and the panel concluded that it put patients at risk of harm in that there was a risk that the patients affected would not be confident in sharing relevant medical information with health services in the future, leading to potential difficulties with their treatment plans.

The panel took account of the fact that prior to your misconduct that you had an unblemished career of some 18 years. The panel also took into account your remorse and apology for your conduct. The panel noted that

you have provided a reflective piece in terms of the difficulties you were experiencing at the time and how your behaviour impacted patients and colleagues.

However, you remain unclear as to why this misconduct occurred, and what you gained from it, if anything, and without this understanding the panel concluded that your insight is limited.

The panel also took into account that the conduct could not be sufficiently addressed at this stage as you have not been practicing as a registered midwife. The panel concluded that the misconduct in charge 1 is difficult to remediate due to its repetition over a significant period of time, and the misconduct in charges 2 and 3 are difficult to remediate due to its nature.

In those circumstances, the panel concluded that there is a risk of repetition. The panel therefore decided that a finding of impairment is necessary on the grounds of public protection.

The panel considered with care Ms Shah's submission that the regulatory process, together with a finding of misconduct, is sufficient to mark the seriousness of your behaviour, and that a finding of impairment of fitness to practise is not required in the circumstances. However, the panel disagreed with that view in light of the seriousness of the misconduct and the future risk of harm that you would pose to members of the public if permitted to practice unrestricted.

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 the proper professional standards for members of those professions.

The panel decided that your misconduct had breached fundamental tenets of the nursing profession and therefore brought its reputation into disrepute. It was satisfied that confidence in the nursing profession would be undermined if its regulator did not find charges relating to dishonesty extremely serious.

The panel determined that a well-informed member of the public, who was aware of the extent of your insight and remediation, would still be extremely concerned if no finding of impairment was made, in light of the seriousness of your misconduct. The panel concluded that public confidence in the profession, and the NMC as its regulator, would be undermined if a finding of impairment were not made in this case. Accordingly, the panel was satisfied that your fitness to practise is impaired on the ground of public interest.

Having regard to all of the above, the panel was satisfied that your fitness to practise is currently impaired.'

The original panel determined the following with regard to sanction:

'The panel next considered whether placing conditions of practice on your 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 SG:

- *No evidence of harmful deep-seated personality or attitudinal problems;*
- *Identifiable areas of the nurse or midwife's practice in need of assessment and/or retraining;*
- *No evidence of general incompetence;*
- *Potential and willingness to respond positively to retraining;*
- *[PRIVATE];*
- *Patients will not be put in danger either directly or indirectly as a result of the conditions;*
- *The conditions will protect patients during the period they are in force; and*

- *Conditions can be created that can be monitored and assessed.*

The panel 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 misconduct identified in this case was not something that can be addressed through retraining as at the time of the conduct you had completed the mandatory training to know that this pattern of action was a breach of data confidentiality. The panel also considered that this would not address the dishonesty found proved in this case and that there were concerns remaining regarding your ability to be open and honest.

Furthermore, the panel concluded that the placing of conditions on your 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;*
- *[PRIVATE]*
- *In cases where the only issue relates to the nurse or midwife's lack of competence, there is a risk to patient safety if they were allowed to continue to practise even with conditions.*

The panel considered the dishonesty elements in this case. The panel noted that the nature of the dishonesty was premediated in that you knowingly gave a false account of having accessed patient records when this was explored with you at the investigation interview on 14 October

2021. You had been alerted to this allegation in the telephone call of 15 September 2021 with Ms 2 so you were aware that the matters were under investigation and had a period to consider your response. You knew you had a duty of candour to admit to your actions. Instead, you intentionally sought to cover up the incidents when you knew you had accessed numerous other clinical records without authority or clinical justification prior to 11 September 2021.

The panel considered that these actions created a risk of harm to patients in that concerns about breaches in confidentiality may lead to the withholding of relevant clinical information which could compromise treatment plans and outcomes.

The panel accepted, however, that there was no evidence of any personal gain resulting from your actions and there appeared to be no rationale for you accessing those records. In all regards the panel considered that the behaviour was without any intended purpose. You apologised and accepted the impact of your behaviour on patients and colleagues and on the wider public confidence. The panel accepted your oral evidence that you were experiencing [PRIVATE] personal circumstances at the relevant time. The panel also took into account your unblemished career as a midwife and evidence that there had been no other concerns about your practice and your conduct in the past.

Considering all of these factors, the panel concluded that imposing a suspension order would mark the seriousness of your misconduct whilst allowing you the opportunity to develop your insight and provide evidence to reassure a future panel that there is no risk of repetition of this behaviour. The panel considered that a period of suspension would be sufficient to protect patients, maintain public confidence for midwives and uphold professional standards and public confidence in the regulator.

The panel was satisfied that in this case, your misconduct, whilst serious, was not fundamentally incompatible with remaining on the register. Whilst

the panel considered that your attitude at the time of misconduct in accessing records was unacceptable, the dishonesty was limited to one issue culminating in the meeting on 14 October 2021 and the panel concluded that there was no deep-seated attitudinal problem in relation to your misconduct as a whole as there was no personal gain or intended purpose identified. The panel balanced the public interest of marking the seriousness of the misconduct with a striking-off order with the effect of denying the public the services of an otherwise competent and experienced midwife.

It did consider a striking-off order but, taking account of all the information before it, including the mitigation provided, the panel concluded that it would be disproportionate. The panel had concluded that there was no personal gain for you as a result of your misconduct, other than concealing your past behaviour. A well-informed member of the public would consider the public confidence in the profession is maintained as a suspension from the register is a significant and proportionate sanction. A striking-off order is not the only sanction available to the panel.

Balancing all of these factors the panel has concluded that a suspension order would be the appropriate and proportionate sanction.'

Decision and reasons 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 ability to practise kindly, safely and professionally. 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, your reflective statement and the email communication between the NMC and your

representative. It has taken account of the submissions made by Ms Mohamed on behalf of the NMC.

Ms Mohamed submitted that the only new information before this panel today is your reflective statement. She submitted that it is a matter for this panel to determine whether your reflective statement demonstrates that you have developed sufficient insight into your misconduct. She submitted that you have not practised as a Registered Midwife since 2021, that the panel has not received any evidence today that you have fully addressed the concerns identified at the substantive hearing and that there is no evidence before the panel that you can practise safely and professionally in a clinical setting.

Ms Mohamed submitted that there remains a risk of repetition in this case, and therefore a finding of current impairment remains necessary to protect the public. She submitted that in respect of public interest, public confidence in the profession would be seriously damaged if you were permitted to return to practise at this time, as the case relates to dishonesty which is directly linked to patient care. Ms Mohamed submitted that it is a matter for the panel to determine whether you are currently impaired, and which sanction, if any, is necessary and proportionate in these circumstances.

The panel also had regard to Mr Burch's submissions on your behalf. Mr Burch invited the panel to allow the current suspension order to lapse, which would allow you to reapply for entry to the register once the order has expired.

Mr Burch submitted that the misconduct relates to dishonesty and openness which is serious. He submitted that you admitted the charges at the substantive hearing. He submitted that the charges relate to a period of one year, there was not direct personal gain or harm caused to patients, and that the previous panel found no evidence of any deep-seated attitudinal issues. He further submitted that at the time that the misconduct occurred, you were dealing with difficult personal circumstances.

Mr Burch submitted that your reflective statement dated 2 January 2026 addresses how you would act in the future during stressful periods. He submitted that you are currently employed as a General Assistant at a Health Spa which is a full-time role where you have access to member's records, and you are well liked by colleagues and members. He

submitted that this demonstrates your strengthening practice working in a non-registered role where you have access to member's personal records. He submitted that whilst no testimonials have been submitted for this panel to consider, there is reference in your reflective statement to training that you have completed. He further submitted that you have completed a Level 3 diploma in Health and Social Care which you completed last summer and paid for yourself. He submitted that you have also looked into doing a CPD accredited online course and are intending to fund and complete this in future.

Mr Burch clarified that you do wish to have the option to revalidate as a Registered Midwife by completing a return to practise course. He submitted that if this panel allows the order to expire, you can complete the return to practise course and reapply for admission to the NMC register. He submitted that the NMC would then consider any previous findings of a Fitness to Practise Committee, in light of your current reflective statement addressing the matter of your previous impairment. He submitted that it is a matter for the panel to determine whether you remain impaired at this time.

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 your fitness to practise remains impaired.

The panel noted that the original panel found that you had limited insight. At this hearing the panel heard evidence of your current level of insight. The panel considered that your reflective statement, dated 2 January 2026, did not substantially demonstrate that your insight had developed since the substantive hearing in January 2025. The reflective statement lacked depth and understanding as to why the misconduct occurred. The panel acknowledged that the reflective statement [PRIVATE] or how you would apply this if you were permitted to return to clinical practice. The panel did note that you have engaged with the regulatory process and have attended the hearing today, but it determined that the reflective statement provided did not adequately address the areas of concern identified by the original substantive Fitness to Practise panel.

In its consideration of whether you have taken steps to strengthen your practice, the panel took into account that you have not practised as a Registered Midwife since 2021. It also noted that in your reflective statement, you have referenced some training that you have completed, and some articles you have read. However, the panel noted that it has seen no evidence by way of examples as to how you have applied this learning in your current employment. The panel noted that you indicated that you have “sourced *The Mandatory Training Group, which offers a CPD-accredited online training course on the Statutory Duty of Candour*” but this has not actually been undertaken. The panel further noted that it has received no testimonials from your current employer or colleagues addressing your misconduct.

The original panel determined that you were liable to repeat matters of the kind found proved. Today’s panel has heard no new information that undermines the previous panel’s findings. The panel considered that in light of your limited insight, and lack of strengthened practice, you remain liable to repeat matters of the kind found proved.

The panel therefore decided that a finding of continuing impairment is necessary on the ground 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 was of the view that a member of the public with knowledge of your misconduct would be extremely concerned if a finding of current impairment was not made given the seriousness of the misconduct and your current level of insight and strengthened practice. The panel considered that public confidence in the midwifery profession would be undermined if you were permitted to return to practise unrestricted at this time. 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 your fitness to practise remains impaired.

Decision and reasons on sanction

Having found your 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, and the public protection issues identified, an order that does not restrict your 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 your 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 a conditions of practice order on your 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 admitted at the original hearing and concluded that a conditions of practice order would not adequately protect the public or satisfy the public interest. The panel noted that the misconduct relates to dishonesty and is very serious. It noted that the misconduct occurred in respect of 1214 records accessed without clinical justification to do so, and over a period of a year. The panel considered that this is evidence of some attitudinal concern, which has not been adequately addressed during this period of suspension, and therefore was of the view that there are no workable conditions that could be formulated to safely protect the public.

The panel next considered imposing a further suspension order. The panel noted that you have not demonstrated any developed insight into your previous failings. The panel was of

the view that evidence would be required to show that you no longer posed a risk to the public, consisting of testimonials, evidence of training and a more developed reflective statement.

The panel considered that the previous panel was clear in its recommendation as to what steps you could take during the 12-month suspension to improve your level of insight and to strengthen your practice. The panel acknowledged that you provided a reflective statement, however this panel considered that it was insufficient in addressing your insight into your misconduct, and how you could act differently in the future. The panel noted that you have referenced some relevant training you have completed, but this panel had no evidence before it of the training certificates. The panel was of the view that there is evidence of an attitudinal concern, given that you have not demonstrated any meaningful insight or provided evidence of any relevant training despite the guidance of the previous panel's determination.

The panel had regard to the NMC Guidance REV-2a *Standard reviews of substantive orders before they expire* (last updated: 20 August 2024), which states:

“If the panel concludes that continuing or imposing a conditions of practice order or suspension order is unlikely to result in the professional returning to safe unrestricted practice within a reasonable period of time, it should ensure that the professional is removed from the register.”

The panel was of the view that a further period of suspension would not serve any useful purpose in all of the circumstances. The panel considered that you have had a year to provide evidence of improved insight and strengthened practice and have not adequately done so. The panel considered your application to allow the order to lapse so that the option of readmission and revalidation remains available to you. However, the panel considered that your misconduct is fundamentally incompatible with remaining on the NMC register, due to the seriousness of the misconduct, and your apparent lack of understanding as to why this occurred. Therefore, the panel determined that it was necessary to take action to prevent you from practising in the future and concluded that the only sanction that would adequately protect the public and serve the public interest was a striking-off order.

This striking-off order will take effect upon the expiry of the current suspension order, namely the end of 11 February 2026 in accordance with Article 30(1).

This decision will be confirmed to you in writing.

That concludes this determination.