

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

**Substantive Order Review Hearing
Thursday 30 July 2026**

Virtual Hearing

Name of Registrant:	Parveen Kelly
NMC PIN:	99I7519E
Part(s) of the register:	Registered Midwife RM Midwife (November 2002)
Relevant Location:	Oxfordshire
Type of case:	Lack of competence
Panel members:	Mark Gower (Chair, lay member) Mordecai Edziye Dadzie (Registrant member) Zeenath Uddin (Registrant member)
Legal Assessor:	Nicholas Levisaur
Hearings Coordinator:	Rene Aktar
Nursing and Midwifery Council:	Represented by Sally Denholm, Case Presenter
Mrs Kelly:	Not present and unrepresented at the hearing
Order being reviewed:	Suspension order (12 months)
Fitness to practise:	Impaired
Outcome:	Suspension order (6 months) to come into effect on 1 September 2026 in accordance with Article 30 (1)

Decision and reasons on service of Notice of Hearing

The panel was informed at the start of this hearing that Mrs Kelly was not in attendance and that the Notice of Hearing had been sent to Mrs Kelly's registered email address by secure email on 1 July 2026.

Ms Denholm, on behalf of the Nursing and Midwifery Council (NMC), submitted that it had complied with the requirements of Rules 11 and 34 of the 'Nursing and Midwifery Council (Fitness to Practise) Rules 2004', as amended (the Rules).

The panel accepted the advice of the legal assessor.

The panel took into account that the Notice of Hearing provided details of the substantive order being reviewed, the time, date and that the hearing was to be held virtually, including instructions on how to join and, amongst other things, information about Mrs Kelly's right to attend, be represented and call evidence, as well as the panel's power to proceed in her absence.

In the light of all of the information available, the panel was satisfied that Mrs Kelly has been served with notice of this hearing in accordance with the requirements of Rules 11 and 34.

Decision and reasons on proceeding in the absence of Mrs Kelly

The panel next considered whether it should proceed in the absence of Mrs Kelly. The panel had regard to Rule 21 and heard the submissions of Ms Denholm who invited the panel to continue in the absence of Mrs Kelly. She submitted that Mrs Kelly had voluntarily absented herself.

Ms Denholm submitted that she had seen an email dated 10 July 2026 where Mrs Kelly indicated that she would attend the hearing, beyond that there had been no engagement at all by Mrs Kelly with the NMC in relation to these proceedings. As a consequence, there was no reason to believe that an adjournment would secure her attendance on some future occasion.

The panel accepted the advice of the legal assessor.

The panel has decided to proceed in the absence of Mrs Kelly. In reaching this decision, the panel has considered the submissions of Ms Denholm, and the advice of the legal assessor. It has had particular regard to any relevant case law and to the overall interests of justice and fairness to all parties. It noted that:

- No application for an adjournment has been made by Mrs Kelly;
- Mrs Kelly has not engaged with the NMC and has not responded to any of the letters sent to her about this hearing, except for the recent email dated 10 July 2026;
- There is no reason to suppose that adjourning would secure her attendance at some future date;
- This is a mandatory review; and
- There is a strong public interest in the expeditious review of the case.

In these circumstances, the panel has decided that it is fair to proceed in the absence of Mrs Kelly.

Decision and reasons on review of the substantive order

The panel decided to confirm the current suspension order but one of six months.

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

This is the third review of a substantive suspension order originally imposed for a period of six months by a Fitness to Practise Committee panel on 1 August 2024. This was reviewed on 22 January 2025 when the suspension order continued and 23 July 2025, and the reviewing panel imposed a further suspension for a period of twelve months.

The current order is due to expire at the end of 1 September 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, between 27 August 2019 and 31 January 2020 failed to demonstrate the standards of knowledge, skill and judgment required to practise without supervision as a Band 6 midwife, in that you.

1) Did not work to an adequate standard during your three week supernumerary period.

2) Did not work to an adequate standard during your extended supernumerary period.

3) Between 7 November 2019 and 27 January 2020 were unable to fully complete the objectives of a formal Performance Improvement Plan, in that you;

a) Failed to pass a Fetal Monitoring Assessment in that you;

i) Failed to pass a Continuous Electronic Fetal Monitoring Assessment.

ii) Failed to pass an Intermittent Auscultation test.

b) Failed to pass/complete the Passport to Practice.

c) Failed to pass a Band 6 progression form/assessment.

d) Failed to attend/pass training sessions regarding;

i) Cannulation and Venepuncture.

ii) Injectables.

e) Failed to undertake the pre-requisite E-learning sessions;

i) Venepuncture E-learning Package.

ii) Blood Transfusion E learning Package.

iii) Cannulation Video.

- iv) Anaphylaxis Competency for 'Age 12 and over'.*
- v) Anaphylaxis Competency for 'All Ages'.*
- vi) Vascular Access Devices E-learning Package.*

4) On 14 November 2019, during the third stage of labour for an unknown patient;

- a) Attempted to deliver the placenta, before checking for;*
 - i) The lengthening of the umbilical cord.*
 - ii) Whether the uterus had taken on a globular shape.*
 - iii) Whether the uterus had become firmer.*
 - iv) Whether the uterus had risen in the abdomen.*
 - v) A separation bleed.*
- b) Incorrectly attempted to pull on the umbilical cord before checking the uterus had contracted.*
- c) Incorrectly asked the unknown patient to bear down as you began to use the controlled cord traction method.*
- d) ...*

5) On or around 25 November 2019;

- a) Were unable to demonstrate a full understanding of;*
 - i) Delivering placenta using the controlled cord contraction method, in that you stopped applying traction after a brief pull.*
 - ii) Completing Newborn Early Warning Score observation charts.*
 - iii) The preparation of a birthing bed.*
 - iv) Intravenous infusions during labour.*
 - v) How to set up an Alaris pump for infusions.*

6) On or around 26 November 2019;

a) *Did not know that you needed to change the position of patients with epidurals every 1 hour.*

b) *Did not know that bladder care was at 2 hour intervals.*

c) *Did not know the guidelines for pyrexia in labour regarding a temperature of 37.5 degrees.*

d) *Considered conducting a vaginal examination for an unknown patient with a dense epidural block on her side, to avoid having to turn the patient.*

e) *Did not know how to turn a CTG machine off by the front button.*

f) *Were unfamiliar with how to get a woman onto clean sheets by turning her from side to side.*

g) *Did not know how perform intermittent catheterization.*

7) *On or around 3 December 2019 whilst caring for an unknown patient in labour;*

a) *Were unsure about the loading dose of IV Benzylpenicillin.*

b) *Were unable to prepare a syntocinon infusion.*

c) *Were unable to set up syntocinon in an Alaris pump.*

d) *Did not document any of the care provided to an unknown patient in the clinical notes.*

e) *Did not keep up to date with the partogram.*

f) *...*

8) *On or around 4 December 2019 whilst caring for an unknown patient during labour;*

a) Did not appropriately titrate the rate of syntocinon whilst the patient had been contracting 5-6:10 for 20 minutes.

b) ...

9) ...

10) ...

11) ...

12) *On or around 4 January 2020 did not know how to connect a y-connector.*

13) *Between 9 November & 27 December 2019, during a period of 4 supervised shifts with Colleague A;*

a) Were unable to make a plan of care for a woman in labour.

b) Did not know how to read/use a CTG.

c) ...

d) Failed to demonstrate basic knowledge relating to;

i) Suturing instruments.

ii) Suturing technique.

e) ...

f)”

The original reviewing panel determined the following with regard to impairment:

“The panel considered whether Mrs Kelly’s fitness to practise remains impaired.

The panel noted that the original panel found that Mrs Kelly had insufficient insight. At this hearing, the panel had received no evidence from Mrs Kelly to demonstrate that she had reflected on her practice or that she had any insight into the issues identified.

The panel noted that Mrs Kelly resigned from her post in July 2020 and it appears that she has not practised as a midwife in this country for the last 4 and a half years. There was therefore no evidence before the panel of Mrs Kelly’s practice being strengthened.

The panel were of the view that some of the failings categorised by the previous panel as: ‘Training, skills and comprehension’, and specifically the: ‘Failure to undertake the required e-learning modules/package’ could have been remedied before the current review as this can be undertaken remotely and without working clinically. The panel found that there is no evidence that Mrs Kelly has tried to remedy the concerns in her practice.

The lack of competence relates to a number of fundamental areas of midwifery practice, which occurred over a significant period of time. The original panel determined that Mrs Kelly was liable to repeat matters of the kind found proved. Today’s panel has received no new information and Mrs Kelly has not provided any of the evidence recommended by the previous panel. In light of this, this panel determined that Mrs Kelly is liable to repeat matters of the kind found proved. The panel therefore decided that a finding of continuing impairment is necessary 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 required.

For these reasons, the panel finds that Mrs Kelly's fitness to practise remains impaired."

The original reviewing panel determined the following with regard to sanction:

"The panel considered the imposition of a further period of suspension. It was of the view that a suspension order would protect the public and satisfy the public interest. The panel concluded that a suspension order would be the appropriate and proportionate response, and would also afford Mrs Kelly adequate time to further develop her insight and take steps to strengthen their practice.

The panel determined to impose a suspension order for the period of 6 months, this duration reflecting the seriousness of the concerns and the lack of progress which Mrs Kelly has made in terms of demonstrating insight and strengthened practice. A period of 6 months would also provide Mrs Kelly with an opportunity to engage meaningfully with the NMC and provide reflections and evidence of insight and training as well as her future intentions.

This suspension order will take effect upon the expiry of the current suspension order, namely the end of 1 March 2025 in accordance with Article 30(1).

Before 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:

- Mrs Kelly's engagement and attendance at the substantive order review hearing.*
- A detailed written reflective account which demonstrates Mrs Kelly's insight into the key issues identified in her clinical practice.*

- *Mrs Kelly's willingness to engage in retraining or a development programme in relation to the areas identified.*
- *A clear plan of action in respect of Mrs Kelly's midwifery practice."*

Decision and reasons on current impairment

The panel has considered carefully whether Mrs Kelly's 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. It has taken account of the submissions made by Ms Denholm.

Ms Denholm submitted that there is no material change in circumstances since the original substantive hearing and the recent review hearing. She submitted that there has been no reflective piece provided to acknowledge that the concerns were serious and has the risk of causing serious harm to patients.

Ms Denholm submitted that there has been no further training certificates and no new information to confirm that Mrs Kelly has upskilled her practice. She submitted that there has been an absence of any insight, despite the recommendations given on three previous occasions.

Ms Denholm submitted that the first three limbs of Grant are engaged. She invited the panel to make a finding of impairment on the basis that there remains a risk of repetition on both public protection and public interest grounds.

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 Mrs Kelly's fitness to practise remains impaired.

The panel noted that the last reviewing panel found that Mrs Kelly had insufficient insight. 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 first considered whether Mrs Kelly's fitness to practise remains impaired.

The panel noted that there has been a lack of engagement since the last review hearing and that Mrs Kelly has not demonstrated remediation in relation to the varied concerns raised about her practice. It noted that Mrs Kelly has not shown evidence of any meaningful insight into the impact which her actions and behaviour may have on public confidence in the profession. The panel further noted that no context was provided and no further information was provided despite the recommendations that were provided to her.

The panel determined there remains an ongoing risk to the public and to public confidence in the profession and it concluded that Mrs Kelly's fitness to practise remains impaired by reason of her lack of competence. 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 midwifery profession and upholding proper standards of conduct and performance. The panel determined that, in this case, Mrs Kelly's fitness to practise remains impaired on both public protection and public interest grounds.

For these reasons, the panel finds that Mrs Kelly's fitness to practise remains impaired.

Decision and reasons on sanction

Having found Mrs Kelly's fitness to practise remains 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.

In the circumstances, the panel have concluded that to take no action would be inappropriate in view of the seriousness of the case. The panel decided that such a course would not protect the public nor be in the public interest.

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 Mrs Kelly'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 Mrs Kelly'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 a caution would not protect the public nor be in the public interest.

The panel next considered whether an extension of the conditions of practice on Mrs Kelly's registration would be a sufficient and appropriate response. The panel is mindful that any conditions imposed must be proportionate, measurable and workable. In addition, the panel took note of Mrs Kelly's lack of engagement with the NMC since the last review as she had not provided any new information or evidence. On this basis, the panel concluded that a conditions of practice order is unworkable in this case.

The panel considered the imposition of a period of suspension. It was of the view that a suspension order would allow Mrs Kelly further time to fully reflect on her lack of competence and will provide her with the opportunity to clearly articulate her future plans in relation to, and beyond, her midwifery profession. The panel concluded that a six-month suspension order would be the appropriate and proportionate response and, if she decided

that she did after all wish to continue in practice as a midwife, would afford Mrs Kelly adequate time to further develop her insight and engage with the NMC and state how she would do this. The panel determined therefore that a suspension order is the appropriate sanction which would both protect the public and satisfy the wider public interest.

The panel did consider a strike-off order but determined that at this stage this period of suspension will give Mrs Kelly the opportunity to meaningfully engage with the NMC. The panel considered that any future panel may find that if sufficient time has passed without engagement, reflection and insight, that a striking-off order may be the appropriate outcome. The panel determined that in light of the email dated 10 July 2026, that she had intended to participate in the hearing, a short period of suspension would afford Mrs Kelly sufficient time to demonstrate to a reviewing panel what the future plan is. There is a public interest in midwives returning to practice if they are safe to do so. A six-month suspension order will provide sufficient time for Mrs Kelly to engage and to demonstrate that she can return to practice safely.

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

Before 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 a clear indication from Mrs Kelly as to her future intentions, namely whether to retire from midwifery, or whether she wanted to continue in those professions. If it be the latter, then a future panel would also be assisted by:

- Mrs Kelly's engagement with the NMC and any future proceedings.
- Evidence of professional development, including, evidence of any relevant training or courses undertaken and testimonials from a line manager or supervisor that detail current work practices.
- A comprehensive reflective document demonstrating that Mrs Kelly has developed insight into her misconduct.

This will be confirmed to Mrs Kelly in writing.

That concludes this determination.