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

# Substantive Order Review Hearing Monday, 3 February 2025

Virtual Hearing

Name of Registrant: Tye Reeves

**NMC PIN:** 07C0472E

Part(s) of the register: Registered Nurse - Adult Nursing

RNA Level 1 - April 2009

Relevant Location: Medway

Type of case: Misconduct

**Panel members:** Tracy Stephenson (Chair, Lay member)

Allwin Mercer (Registrant member)

James Kellock (Lay member)

**Legal Assessor:** Paul Hester

**Hearings Coordinator:** Zahra Khan

**Nursing and Midwifery** 

Council:

Represented by Bethany Brown, Case Presenter

**Mr Reeves:** Not present and not represented at the hearing

Order being reviewed: Conditions of practice order (12 months)

Fitness to practise: Impaired

Outcome: Conditions of practice order (12 months) to come into

effect on 15 March 2025 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 Mr Reeves was not in attendance and that the Notice of Hearing had been sent to Mr Reeves' registered email address by secure email on 16 December 2025.

Further, the panel noted that the Notice of Hearing was also sent to Mr Reeves's representative at the Royal College of Nursing (RCN) on 16 December 2025.

Ms Brown, 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 Mr Reeves' right to attend, be represented and call evidence, as well as the panel's power to proceed in his absence.

In light of all of the information available, the panel was satisfied that Mr Reeves 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 Mr Reeves

The panel next considered whether it should proceed in the absence of Mr Reeves. The panel had regard to Rule 21 and heard the submissions of Ms Brown who invited the panel to proceed in the absence of Mr Reeves. She submitted that Mr Reeves had voluntarily absented himself.

Ms Brown referred the panel to a letter from the RCN to the NMC, dated 31 January 2025, which stated:

'Our member will not be attending the hearing nor will they be represented. No disrespect is intended by their non-attendance. Our member has received the notice of hearing and is happy for the hearing to proceed in their absence. They are keen to engage with the proceedings'.

The panel accepted the advice of the legal assessor.

The panel decided to proceed in the absence of Mr Reeves. In reaching its decision, the panel considered the submissions of Ms Brown, the written submissions made on Mr Reeves' behalf, and the advice of the legal assessor. It had particular regard to 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 Mr Reeves or his representative at the RCN;
- Mr Reeves' representative at the RCN has informed the NMC that Mr Reeves has received the Notice of Hearing and confirmed that Mr Reeves is content for the hearing to proceed in his absence;
- Mr Reeves' representative at the RCN provided written submissions dated
   31 January 2025;
- There is no reason to suppose that adjourning would secure Mr Reeves' attendance at some future date; and
- There is a strong public interest in the expeditious review of the case.

In these circumstances, the panel decided that it is fair to proceed in the absence of Mr Reeves.

#### Decision and reasons on review of the substantive order

The panel decided to impose a current conditions of practice order for a period of 12 months.

This order will come into effect at the end of 15 March 2025 in accordance with Article 30(1) of the 'Nursing and Midwifery Order 2001' (the Order).

This is the second review of a substantive conditions of practice order originally imposed for a period of 12 months by a Fitness to Practise Committee panel on 15 February 2023. This was reviewed on 1 February 2024 when the panel imposed a further conditions of practice order for 12 months.

The current order is due to expire at the end of 15 March 2025.

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:

- On 30 July 2019 failed to record any details of a consultation with Patient A.
   (PROVED BY WAY OF ADMISSION)
- 2. On 29 August 2019 incorrectly recorded that Patient B had been administered an MMR vaccination when they had not. (PROVED BY WAY OF ADMISSION)
- 3. On 21 November 2019
  - a) incorrectly recorded that Patient C had been administered a B12 injection when they had not; or in the alternative (PROVED BY WAY OF ADMISSION)
  - b) ...
- 4. On 21 November 2019 failed to record that you had administered a B12 injection to Patient D. (PROVED BY WAY OF ADMISSION)
- 5. On 21 February 2020 in relation to Patient K

	a) gave the patient five or six vials of B12 and/or syringes to take home; (PROVED BY WAY OF ADMISSION)
	b)
6.	On 4 March 2020 in relation to Patient J
	a) incorrectly administered the MMR, Meningitis B and Infanrix Hexa vaccines which were not in accordance with their Allogeneic Post-Transplant Vaccination Schedule. (FOUND PROVED)
	b) failed to administer Revaxis and/or Menitorix vaccines which were due to be administered in accordance with their Allogeneic Post-Transplant Vaccination Schedule. (FOUND PROVED)
7.	On 23 April 2020 in respect of Patient E
	a)
	b)
	c) or in the alternative, wrongly recorded that you had administered the 12 month set of routine childhood vaccinations. (PROVED BY WAY OF ADMISSION)
8.	On 30 April 2020 in respect of Patient F
	a)
	b)
	c) or in the alternative, wrongly recorded that you had administered the 12 month set of routine childhood vaccinations. (PROVED BY WAY OF ADMISSION)

a) failed to refer the patient to a GP for a review; (FOUND PROVED)
b)
10. On 11 June 2020 in relation to Patient H
a)
b)
c) or in the alternative, wrongly recorded that you had administered the second set of routine childhood vaccinations. (PROVED BY WAY OF ADMISSION)
11. On 11 June 2020 in relation to Patient I
<ul> <li>a) incorrectly recorded that you had administered the first, second and third set of routine childhood vaccinations on that date; (PROVED BY WAY OF ADMISSION)</li> </ul>
b) failed to record the batch number of the vaccine(s) which were administered.

9. On 4 June 2020 and/or 12 June 2020 in relation to Patient G

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

(PROVED BY WAY OF ADMISSION)'

'The panel was of the view that since the original substantive hearing Mr Reeves has taken responsibility for his actions, demonstrated an understanding of why what he did was wrong and how his actions could have put patients at a risk of harm. The panel also noted that Mr Reeves had expressed how he now understood how his actions impacted negatively on the reputation of the nursing profession but did not

sufficiently cover how he will strengthen his clinical practice in relation to the clinical concerns.

The panel also took into account Mr Reeves' numerous training certificates, which were all dated either 22 January 2024 or 28 January 2024. In the panel's view the certificates of relevance to the current order are the Advanced Medicines Management for Nurses and AHPs Level 3 and Maintaining best practice in recordkeeping and documentation. The panel was of the view that Mr Reeves is taking steps to strengthen his practice by engaging in the relevant training courses. The panel determined that the information before it today demonstrates Mr Reeves' commitment to comply with the conditions of practice order. In the panel's view the training certificates are very recent and Mr Reeves has not had the opportunity to demonstrate safe practice in a nursing environment nor showcase what he has learned as he has been unable to secure employment in a nursing role. The panel was of the view that it would not be safe for Mr Reeves' to practice unrestricted at this time as there is no evidence that the failings would not be repeated, therefore there remains a real risk of repetition. The panel determined that a finding of impairment remains necessary on the grounds of public protection. The panel bore 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. It was of the view that a

well-informed member of the public would be concerned if Mr Reeves were permitted to practise at this time. The panel determined that a finding of impairment also remains necessary on public interest grounds.

For these reasons, the panel finds that Mr Reeves' fitness to practise remains impaired'.

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

'The panel noted the submissions made on Mr Reeves' behalf by the RCN to continue the existing conditions of practice order which the NMC supported. It also took note of Mr Reeve's reflective statement, dated 31 January 2024, which stated the following:

'...I would humbly request that the panel considers whether the conditions can be varied to make it less onerous as it is proving an obstacle to gaining employment to allow me to demonstrate remediation in full and rebuild my career, otherwise I feel it will be a never-ending cycle especially if I am unable to obtain work. But equally, I am happy for the Panel to extend the current conditions to provide me with further time to obtain relevant work...'

The panel determined that it would be possible to formulate appropriate and workable conditions which would address the failings highlighted in this case. The panel accepted that Mr Reeves has made an effort to comply with conditions of practice, particularly condition three and has been engaging with the NMC, however it was of the view that due to his current employment status he has not had the opportunity to demonstrate safe practice and therefore has been unable to fully comply with conditions imposed at the original hearing.

The panel was of the view that a conditions of practice order is sufficient to protect patients and to address the wider public interest, noting as the original panel did that the misconduct related to clinical failings which are remediable. In this case, there are conditions which can be formulated which will be workable and suitably protect patients during the period they are in force and which meets the public interest.

The panel was of the view that to impose a suspension order would be wholly disproportionate and would not be a reasonable response in the circumstances of Mr Reeves' case.

Accordingly, the panel determined, pursuant to Article 30(1)(c) to make a conditions of practice order for a period of 12 months, which will come into effect on the expiry of the current order, namely at the end of 15 March 2024.

The panel was of the view that Mr Reeves had met condition 3 in the existing order by completing training on medication management and administration, and recording. The panel therefore saw no need to continue this condition.

The panel was of the view that a competency assessment in relation to medication management and administration would now be relevant to reduce the risk and enable Mr Reeves to return to safe practice. Therefore, this requirement was added to condition 2 of the existing order.

It decided to impose the following conditions which it considered are workable, appropriate and proportionate in this case:

For the purposes of these conditions, 'employment' and 'work' mean any paid or unpaid post in a nursing, midwifery or nursing associate role. Also, 'course of study' and 'course' mean any course of educational study connected to nursing, midwifery or nursing associates.

- 1. You must not be the sole nurse in charge and must work alongside at least one registered nurse on the same shift, but not always directly observed by that registered nurse.
- 2. You must work with your line manager to create a personal development plan (PDP) to support you. Your PDP must address the concerns about record keeping and the management and escalation of unwell patients. The PDP must include a medications management and administration practical competency assessment.
- You must send your NMC case officer a copy of your PDP within 21 days of its creation.
- You must send your NMC case officer a report from your line manager prior to the next review of this order. This report must

show your progress towards achieving the aims set out in your PDP.

- 3. You must meet with your line manager, mentor or supervisor at least monthly to discuss your progression with your PDP.
- 4. You must keep us informed about anywhere you are working by:
- Telling your case officer within seven days of accepting or leaving any employment.
- Giving your case officer your employer's contact details.
- 5. You must immediately give a copy of these conditions to:
- Any organisation or person you work for.
- Any agency you apply to or are registered with for work.
- Any employers you apply to for work (at the time of application).
- Any establishment you apply to (at the time of application), or with which you are already enrolled, for a course of study.
- Any current or prospective patients or clients you intend to see or care for on a private basis when you are working in a self-employed capacity
- 6. You must tell your case officer, within seven days of your becoming aware of:
- Any clinical incident you are involved in.
- Any investigation started against you.
- Any disciplinary proceedings taken against you.

- 7. You must allow your case officer to share, as necessary, details about your performance, your compliance with and / or progress under these conditions with:
- · Any current or future employer.
- · Any educational establishment.
- Any other person(s) involved in your retraining and/or supervision required by these conditions

This conditions of practice order will take effect upon the expiry of the current conditions of practice order, namely the end of 15 March 2024 in accordance with Article 30(1).

Before the end of the period of the order, a panel will hold a review hearing to see how well Mr Reeves has complied with the order. At the review hearing the panel may revoke the order or any condition of it, it may confirm the order or vary any condition of it, or it may replace the order for another order.

Any future panel reviewing this case would be assisted by:

- Mr Reeves' continued engagement with the NMC;
- Mr Reeves' attendance at any future hearings;
- References or testimonials of any paid or unpaid work Mr Reeves has undertaken;
- Any evidence of further training Mr Reeves has undertaken;
- A further reflective statement demonstrating insight with particular reference to what Mr Reeves has learned from his training and how he has/will incorporate this into his practice; and
- The NMC to supply the panel with the first and second reflective statements enabling the panel to see the development of Mr Reeves' reflection'.

#### **Submissions**

The panel considered carefully whether Mr Reeves' 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 carried out a comprehensive review of the order in light of the current circumstances. Whilst it noted the decision of the last panel, this panel exercised its own judgement as to current impairment.

The panel had regard to all of the documentation before it, including the NMC bundle and Mr Reeves' bundle.

Ms Brown submitted that the question of whether Mr Reeves' fitness to practise remains impaired is a matter for the panel's professional judgement. She referred the panel to the RCN's written submissions, dated 31 January 2025, which stated that Mr Reeves has not worked as a registered nurse since the previous review hearing. The letter also confirms that Mr Reeves has been unable to find employment due to the conditions but continues to seek nursing employment. The submissions also confirm that as a result of being unable to secure nursing employment, Mr Reeves has not been able to provide evidence of compliance with all conditions and acknowledges that the panel may therefore wish to extend the current order.

Ms Brown told the panel that Mr Reeves' representative at the RCN submitted that the level of risk has not changed and therefore the RCN requests that continuation of the order is to be made in its current form. She clarified the pages that include Mr Reeves' original reflective statement which was received in 2023 and the second reflective statement provided to the previous reviewing panel in 2024. She then informed the panel that the NMC has not been provided with an up-to-date reflective piece from Mr Reeves for today, and that within Mr Reeves' reflective statement dated 2024, he states that he has reflected on his failings which taught him lessons.

Ms Brown submitted that it is accepted that Mr Reeves, at the previous hearing, showed determination to continue his career in nursing when an offer of employment was made. However, Ms Brown submitted that Mr Reeves has been unable to demonstrate safe

practise in nursing since the last review and there has been no further update provided to show whether he has worked inside or outside of nursing, therefore no testimonials or references have been provided from any paid or unpaid work. Further, as requested by the previous panel, there has been no updated reflection provided to the panel today.

Ms Brown told the panel that, since the first review hearing, the NMC has received very little communication from Mr Reeves. She said that Mr Reeves did make a query with the NMC regarding whether an aesthetics role required his NMC PIN and an e-mail response was sent by the NMC, which has been provided to the panel in the main bundle, confirming that it did not require his PIN. She informed the panel that the NMC have not had any updates since and no further reflective account or confirmation as to whether Mr Reeves worked within that role.

Ms Brown submitted that there has been no further information provided to confirm where and what role Mr Reeves has been working, if any, nor is there any evidence to show that he strengthened his practice or that he has been able to apply any training undertaken to his clinical practice.

Ms Brown submitted that the concern of the previous panel was that Mr Reeves' reflection did not sufficiently cover how he would strengthen his clinical practice in relation to clinical concerns and that although training had been undertaken previously, he had not had the opportunity to demonstrate safe practice in a nursing environment or showcase what he had learned.

Ms Brown submitted that, considering the lack of update from Mr Reeves, save for the submissions made by his RCN representative, there is still a risk of repetition and impairment remains on both grounds of public protection and public interest as confidence in the profession would be undermined if a finding of impairment were not to be made in this case.

In relation to sanction, Ms Brown submitted that the seriousness of the case makes no action or a caution order inappropriate. She submitted that the NMC confirms there is no change to the current position regarding the conditions of practice order. She submitted that as there is no update on Mr Reeves' employment status, he has not secured a nursing

position, and the panel may decide that the conditions imposed by the previous panel are still appropriate and should continue. She submitted that the panel may decide that the imposition of a suspension or a striking off order would be disproportionate and unreasonable in the context of this case and the NMC supports this view.

In these circumstances, Ms Brown invited the panel to confirm the conditions of practice order today, in its current form.

The panel had regard to written submissions from the RCN made on Mr Reeves' behalf via a letter dated 31 January 2025. This stated:

#### 'Enclosures:

#### 1. Reflections

We set out below our member's representations and ask that this letter be placed before the panel at the hearing.

### <u>Submissions</u>

The Registrant has not worked as a registered nurse since the last review hearing and has never had any regulatory sanction levied upon him before now. The Registrant has been unable, despite his best efforts, to secure employment as a nurse due to the Conditions and has not worked as a registered nurse. The Registrant advises he remains committed to the profession and wishes to return to nursing. He continues to seek employment and is committed to the process of remediation and insight (please see reflections attached). The Registrant is also under severe financial pressure and has provided insight to previous panels.

As the Registrant is not employed as a nurse and has not had a line manager, he is unable to provide further information requested in Conditions two. We acknowledge that the original period of this Order is due to end shortly and due to registrant's inability to get a nursing job he has been unable to provide complete evidence of compliance with all the Conditions. The Registrant therefore acknowledges that the Panel may wish to extend the Conditions for a further period.

It is respectfully submitted that the level of risk originally assessed has not changed and there are no grounds or increase in risk that necessitates a more severe variation to the current conditions. Consequently, we assert that there are no grounds to impose any additional restrictions upon our members' registration. We respectfully submit the continuation of the order in its current form. The Registrant is aware of his right to request an early review of the order and will avail himself of the opportunity where new information is available that changes the substantive position.

Should the panel be minded to make a different or more adverse decision we would kindly ask that this matter be adjourned to enable representation. However, we would strongly contend that such is not necessary in light of the above'.

## **Decision and reasons on current impairment**

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 Mr Reeves' fitness to practise remains impaired.

The panel noted that the last reviewing panel found that Mr Reeves had taken responsibility for his actions, demonstrated an understanding of why what he did was wrong and how his actions could have put patients at a risk of harm. The panel also noted that Mr Reeves had expressed how he now understood how his actions impacted negatively on the reputation of the nursing profession but did not sufficiently cover how he will strengthen his clinical practice in relation to the clinical concerns.

At this hearing, the panel took into account Mr Reeves' reflective pieces dated 2023 and 2024. However, it noted the absence of any recent reflective piece, testimonials or training as recommended by the previous panel. As Mr Reeves has been unable to secure employment, he has not yet had the opportunity to demonstrate strengthened practice. It

therefore determined that there has been no change of circumstances in the last year, nor has Mr Reeves fully demonstrated his insight.

The last reviewing panel determined that Mr Reeves was liable to repeat matters of the kind found proved. Today's panel has not received any new information and therefore determined that Mr Reeves is still 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 Mr Reeves' fitness to practise remains impaired.

### Decision and reasons on sanction

The panel accepted the advice of the legal assessor.

Having found Mr Reeves's 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 also took 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.

The panel 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 Mr Reeves' 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 Mr Reeves' 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 imposing a further conditions of practice order on Mr Reeves' registration would be a sufficient and appropriate response. The panel is mindful that any conditions imposed must be proportionate, measurable and workable.

The panel determined that it would be possible to formulate appropriate and practical conditions which would address the failings highlighted in this case. The panel accepted that Mr Reeves has been unable to comply with conditions of practice due to his current employment status but is engaging with the NMC, is seeking employment, and appears to be willing to comply with any conditions imposed.

The panel was of the view that a further conditions of practice order is sufficient to protect patients and the wider public interest. In this case, there are conditions that could be formulated which would protect patients during the period they are in force.

The panel was of the view that to impose a suspension order or a striking-off order would be wholly disproportionate and would not be a reasonable response in the circumstances of Mr Reeves' case.

Accordingly, the panel determined, pursuant to Article 30(1)(c) to make a conditions of practice order for a period of 12 months to allow Mr Reeves the opportunity to further develop his insight, secure employment, and demonstrate safe practice. This order will come into effect on the expiry of the current order, namely at the end of 15 March 2025.

The panel decided to impose the following continued conditions which it considered are appropriate and proportionate in this case:

'For the purposes of these conditions, 'employment' and 'work' mean any paid or unpaid post in a nursing, midwifery or nursing associate role. Also,

'course of study' and 'course' mean any course of educational study connected to nursing, midwifery or nursing associates.

- 1. You must not be the sole nurse in charge and must work alongside at least one registered nurse on the same shift, but not always directly observed by that registered nurse.
- 2. You must work with your line manager to create a personal development plan (PDP) to support you. Your PDP must address the concerns about record keeping and the management and escalation of unwell patients. The PDP must include a medications management and administration practical competency assessment.
  - You must send your NMC case officer a copy of your PDP within 21 days of its creation.
  - You must send your NMC case officer a report from your line manager prior to the next review of this order. This report must show your progress towards achieving the aims set out in your PDP.
- 3. You must meet with your line manager, mentor or supervisor at least monthly to discuss your progression with your PDP.
- 4. You must keep us informed about anywhere you are working by:
  - Telling your case officer within seven days of accepting or leaving any employment.
  - Giving your case officer your employer's contact details.
- 5. You must immediately give a copy of these conditions to:
  - Any organisation or person you work for.
  - Any agency you apply to or are registered with for work.
  - Any employers you apply to for work (at the time of application).

- Any establishment you apply to (at the time of application), or with which you are already enrolled, for a course of study.
- Any current or prospective patients or clients you intend to see or care for on a private basis when you are working in a self-employed capacity
- 6. You must tell your case officer, within seven days of your becoming aware of:
  - Any clinical incident you are involved in.
  - Any investigation started against you.
  - Any disciplinary proceedings taken against you.
- 7. You must allow your case officer to share, as necessary, details about your performance, your compliance with and / or progress under these conditions with:
  - Any current or future employer.
  - Any educational establishment.
  - Any other person(s) involved in your retraining and/or supervision required by these conditions'

The period of this order is for 12 months.

This conditions of practice order will take effect upon the expiry of the current conditions of practice order, namely the end of 15 March 2025 in accordance with Article 30(1).

Before the end of the period of the order, a panel will hold a review hearing to see how well Mr Reeves has complied with the order. At the review hearing the panel may revoke the order or any condition of it, it may confirm the order or vary any condition of it, or it may replace the order with another order.

Any future panel reviewing this case would be assisted by:

- Mr Reeves' continued engagement with the NMC.
- Mr Reeves' attendance at any future hearings.
- References or testimonials of any paid or voluntary work Mr Reeves has undertaken.
- Any evidence of recent relevant training or professional development Mr Reeves has undertaken.
- An updated reflective statement demonstrating further insight with particular reference to what Mr Reeves has learned from his training and how he has/will incorporate this into his practice.
- The NMC to supply the panel with the first and second reflective statements enabling the panel to see the development of Mr Reeves' reflection.
- Mr Reeves to update the panel with future nursing plans and to specify which roles he has applied for (can be within or outside of the nursing profession).

This will be confirmed to Mr Reeves in writing.

That concludes this determination.