Nursing and Midwifery Council Fitness to Practise Committee

Substantive Order Review Hearing Thursday 9 October 2025

Virtual Hearing

Name of Registrant: Elka Tzvetkova

NMC PIN: 11A0047C

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

Effective – 5 January 2011

Relevant Location: North Devon

Type of case: Misconduct

Panel members: Anica Alvarez Nishio (Chair, Lay member)

Victoria Rees (Registrant member)

Ray Salmon (Lay member)

Legal Assessor: Paul Hester

Hearings Coordinator: Emma Hotston

Nursing and Midwifery

Council:

Represented by Isabella Kirwan, Case Presenter

Ms Tzvetkova: Not present and not represented (but written submissions

provided by Royal College of Nursing (RCN))

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

Fitness to practise: Impaired

Outcome: Conditions of practice order (9 months) to come into

effect at the end of 18 November 2025 in accordance

with Article 30(1)

Decision and reasons on service of Notice of Hearing

The case presenter submitted evidence that, while Ms Tzvetkova was not in attendance, the Notice of Hearing had been sent to Ms Tzvetkova's registered email address by secure email on 9 September 2025, and that the Notice of Hearing was also sent to Ms Tzvetkova's representative at the Royal College of Nursing (RCN) on 9 September 2025.

Ms Kirwan, 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 Ms Tzvetkova's right to attend, be represented and call evidence, as well as the panel's power to proceed in her absence. While the panel noted that the Notice of Hearing had been sent to an address that differed from the email address in the NMC register, given the submissions made by the registrant's representative in the registrant's bundle and in light of the other information available, the panel was satisfied that Ms Tzvetkova 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 Ms Tzvetkova

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

Ms Kirwan referred the panel to the documentation from Ms Tzvetkova's representative which stated that Ms Tzvetkova was content for the hearing to proceed in her absence.

The panel accepted the advice of the legal assessor.

The panel decided to proceed in the absence of Ms Tzvetkova.

In reaching this decision, the panel considered the submissions of Ms Kirwan, the representations made on Ms Tzvetkova's behalf, and the advice of the legal assessor. It had regard to the relevant case law and to the overall interests of justice and fairness to all parties. It noted that:

- Ms Tzvetkova informed the NMC that she has received the Notice of Hearing and confirmed she is content for the hearing to proceed in her absence;
- No application for an adjournment has been made by Ms Tzvetkova; on the contrary, she has indicated through her representative that she is content for the hearing to proceed in her absence;
- There is no reason to suppose that adjourning would secure her attendance at some future date:
- Ms Tzvetkova has, through her representative, been able to provide updating information and submissions in relation to the hearing which the panel can take into account. This minimises any prejudice in proceeding in her absence; and
- There is a strong public interest in the expeditious review of the case, which
 has to take place before the expiry of the substantive order on 18
 November 2025.

In these circumstances, the panel has decided that it is fair and in the interests of justice to proceed in the absence of Ms Tzvetkova.

Decision and reasons on review of the substantive order

The panel decided to impose a conditions of practice order for a further period of nine months. This order will come into effect at the end of 18 November 2025 in accordance with Article 30(1) of the 'Nursing and Midwifery Order 2001' (the Order).

The current order is due to expire at the end of 18 November 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:

- 1) On 9 July 2019, failed to:
 - a) Administer and/or ensure administration of Phenytoin to Patient A [Found Proved].
 - b) ...
 - c) Escalate that Patient A had not received their full prescribed dose of Sodium Valproate [Found Proved].

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:

'The panel next went on to decide if as a result of the misconduct, your fitness to practise is currently impaired.

. . .

The panel found that Patient A was put at risk of harm as a result of your misconduct. Your misconduct breached the fundamental tenets of the nursing profession, to prioritise and care for patients and work collaboratively with colleagues. The panel therefore determined that your conduct brought the nursing reputation into disrepute.

The panel considered your registrant's response bundle, which included references from former colleagues, a reflective piece and training

certificates. The panel was of the view that the misconduct identified in this case is capable of being addressed. However, the panel carefully considered the evidence before it in determining whether or not you have taken steps to strengthen your practice. The panel took into account your reflective piece. The panel acknowledged that whilst you have reflected on what you would do differently in the future, you do not appear to accept responsibility for ensuring that Patient A received their medication. The panel gave particular regard to the following:

'As a starting point the amount of people which were assigned to the nurse (nurse: patient ratio) was not safe to be managed especially as there was critically ill patient.

The handover from the night nurse was not properly and was incomplete. The medical team didn't act speedily and didn't intervene after they were told.'

The panel found that whilst you have shown insight, it has been very limited as you have failed to show remorse for your actions, have not taken responsibility for your role in the incident and the consequences namely that a vulnerable patient did not receive their prescribed medication. The panel also found that as a result of your limited insight there is a risk of repetition.

The panel noted your previous experience in a neurological hospital ward and had regard to your testimonials from former colleagues which said:

'She was always very proactive, informing the relevant teams for any complications...

She is extremely assertive, capable enough to take urgent decisions when a patient worsens suddenly.'

The panel considered that, as an experienced nurse described as one who was capable of making decisions in urgent situations, you should have escalated any issues to a more senior member of the team if you had concerns about patient safety. The panel further considered that you should have had an awareness of the importance of checking the drug chart of a patient in your care and of clarifying medication needs if in doubt. The panel was of the view that if your misconduct was to be repeated to another patient then your failure could have a more serious outcome. 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 the proper professional standards for members of those professions.

In addition, the panel concluded that public confidence in the profession would be undermined if a finding of impairment were not made in this case and therefore also finds your fitness to practise impaired on the grounds 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:

'Having found your 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:

- Your limited insight into the impact of your misconduct.
- · Your conduct put Patient A at risk of harm.

The panel also took into account the following mitigating features:

• You have undertaken relevant training to address some of the concerns raised.

...

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, in particular:

- 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;
- 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 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 you would be willing to comply with conditions of practice.

The panel noted that the misconduct in this case was an isolated incident that does not appear to have been repeated and that you have today through your representative have expressed remorse for the part you played and the consequences to Patient A. The panel also noted that you have demonstrated a willingness to strengthen your practise as you have undertaken relevant training courses to mitigate some of the risks identified. The panel was of the view that it was in the public interest that, with appropriate safeguards, you should be able to return to practise as a nurse.

Balancing all of these factors, the panel determined that the appropriate and proportionate sanction is that of a conditions of practice order.

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

Having regard to the matters it has identified, the panel has concluded that a conditions of practice order will mark the importance of maintaining public confidence in the profession, and will send to the public and the profession a clear message about the standards of practice required of a registered nurse.

The panel determined that the following conditions 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 ensure that you are supervised by another registered nurse when undertaking a medication administration round. You must be supervised until you have been deemed competent in completing the medication administration round by a Band 6 nurse or above.
- 2. You must have monthly meetings with your line manager, supervisor or mentor to discuss:
 - a) Communicating effectively with colleagues.
 - b) Managing and escalating risk.
- 3. A report must be sent to the NMC, prior to any review hearing, from your line manager, supervisor or mentor detailing:
 - a) Your communication with colleagues.
 - b) Risk management in your practice.
- 4. You must keep the NMC informed about anywhere you are working by:
 - a) Telling your case officer within seven days of accepting or leaving any employment.
 - b) Giving your case officer your employer's contact details.
- 5. You must immediately give a copy of these conditions to:
 - a) Any organisation or person you work for.
 - b) Any agency you apply to or are registered with for work.
 - c) Any employers you apply to for work (at the time of application).
 - d) Any establishment you apply to (at the time of application), or with which you are already enrolled, for a course of study.
- 6. You must tell your case officer, within seven days of your becoming aware of:
 - a) Any clinical incident you are involved in.
 - b) Any investigation started against you.
 - c) 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:
 - a) Any current or future employer.
 - b) Any educational establishment.
 - c) 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 is to allow you sufficient time to find employment and engage with the conditions of practice order.'

Decision and reasons on current impairment

The panel has considered whether Ms Tzvetkova's fitness to practise remains impaired.

The panel had regard to the NMC guidance 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 safely, kindly and professionally'. In considering this case, the panel has carried out a comprehensive review of the order in light of the current circumstances. While 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 written submissions from Ms Tzvetkova's representative. It has taken account of the submissions made by Ms Kirwan on behalf of the NMC. She reminded the panel that the persuasive burden is on Ms Tzvetkova to bring evidence to demonstrate that her fitness to practise is no longer impaired. She submitted that Ms Tzvetkova has not discharged this burden and her fitness to practise remains impaired.

Ms Kirwan submitted that, since the previous order, there has been insufficient new evidence received from Ms Tzvetkova to demonstrate strengthening of her practice, including evidence of working under supervision, or the undertaking of sufficient relevant training or development. She submitted that the NMC recognises that Ms Tzvetkova has had issues in seeking appropriate employment and has not had an opportunity to work

under supervision. However, due to the absence of evidence of Ms Tzvetkova's current clinical practice, there is insufficient new evidence to prove that she is no longer impaired and the risk to public protection remains.

Therefore, due to the serious nature of the concerns, an extension of the current conditions of practice order is now the most appropriate and proportionate sanction to protect the public and satisfy the wider public interest and public confidence in the profession. This would provide Ms Tzvetkova with adequate further time to find employment and address the concerns with her fitness to practise, in order to return to safe and unrestricted practice.

Ms Kirwan acknowledged that Ms Tzvetkova's representatives asked for an extension to the conditions of practice order of nine months, in order to manage any risks to the public and satisfy public interest in the case.

Ms Kirwan invited the panel to consider an extension of the current conditions of practice order by six to nine months to provide Ms Tzvetkova with the time she requires to find appropriate employment and apply her clinical competencies to the degree required to meet the conditions of practice.

The panel took into account the written submissions provided by Ms Tzvetkova's representative, which were accompanied by various pieces of documentary evidence, including a Curriculum Vitae, job applications and responses, training records, a reflective statement and testimonials. These explained that:

- Ms Tzvetkova is currently not in employment and has not worked in a nursing role throughout the entire period the current conditions of practise order has been imposed.
- Ms Tzvetkova is an experienced nurse with over 40 years of caring and nursing experience, as evidenced by her Curriculum Vitae. Nursing has been her life profession, and Ms Tzvetkova is keen to return to nursing in the future.
- Ms Tzvetkova has found the conditions of practice order a barrier to finding suitable
 employment in a nursing role, and while she has made numerous applications for
 registered nurse positions, she has not yet been able to secure an appropriate
 position that enables her to meet the conditions of practice.

- Ms Tzvetkova is committed to return to nursing and despite not yet being employed, she has taken steps to ensure her own professional development by undertaking training relevant to the allegations, including the following training courses:
 - Mandatory and Statutory (Practical) Training Course 24 February 2025
 - Medication Administration Training 27 February 2025
- Ms Tzvetkova has also undertaken further reflection on the incident relating to the allegations in a reflective statement.

Ms Tzvetkova's representatives invited the panel to continue the existing conditions of practice for a further period of nine months to enable her to obtain a nursing role and demonstrate compliance with the conditions. Ms Tzvetkova's representative submitted that the set of substantive conditions as they currently are, would fully manage any possible risk to the public, and satisfy any public interest in the case.

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 Ms Tzvetkova's fitness to practise remains impaired.

The panel noted that the persuasive burden is on Ms Tzvetkova to demonstrate that she is no longer impaired and was of the view that she has not discharged this burden.

The panel had regard to the written statements provided by Ms Tzvetkova's representative and Ms Tzvetkova's written reflection. The panel acknowledged that this is not a case where deep-seated attitudinal concerns have been identified. It acknowledged that Ms Tzvetkova has demonstrated some insight through her written reflection, although minimal. The panel noted that this reflection lacks depth and specificity of insight and remorse for her misconduct, as the reflection is too generalised and does not directly address matters related to this case. It also does not demonstrate a sufficient understanding of the impact of her actions on the patient and their family. Therefore, the panel decided that Ms Tzvetkova has not demonstrated sufficient insight or remediation, at this time.

The panel noted that Ms Tzvetkova has provided evidence to the panel of her training, despite not being currently employed. The panel noted that whilst Ms Tzvetkova has undertaken relevant additional training in Medication Administration, in addition to Mandatory and Statutory (Practical) training, in order to strengthen her practice and gain insight, it had insufficient new evidence before it to suggest that Ms Tzvetkova had developed insight and remorse into her actions.

The panel took into account that, although Ms Tzvetkova has undertaken some relevant training, it primarily consisted of the mandatory training and not training specific to these charges. Further, there is no evidence that she has been able to implement her learning in clinical nursing practice.

The panel also had regard to Ms Tzvetkova's efforts to find employment. It had sympathy with the difficulties Ms Tzvetkova has encountered in seeking employment but was currently not satisfied that she has explored all potential routes to employment.

The panel considered that while it was encouraging that Ms Tzvetkova has demonstrated commitment to strengthening her practice and to seeking work in order to demonstrate her progress, she has not worked in a nursing role since the conditions of practice order was imposed in October 2024.

Ms Tzvetkova has therefore not had the opportunity to demonstrate that she has strengthened her practice to the extent that she can return to practise safely, kindly and professionally. She has therefore not provided sufficient evidence to discharge the persuasive burden that she is no longer impaired and demonstrate that she has addressed the areas of regulatory concern by finding appropriate employment, in order to meet the conditions of practice.

Furthermore, the panel are of the view that the current conditions of practice are fair and appropriate, including the level of supervision required and the need for feedback from a manager.

In light of this, this panel determined that Ms Tzvetkova currently remains liable to repeat matters of regulatory concern of the kind found proved and continues to need to demonstrate that she can successfully apply her training, insight and stress management strategies in a clinical environment in order to practise without further incident. 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. This is because members of the public would have their confidence in the profession and the NMC undermined in circumstances whereby a nurse who represented a risk of harm to the public were permitted to return to practice without restriction.

For these reasons, the panel finds that Ms Tzvetkova's fitness to practise remains impaired on the grounds of both public protection and the wider public interest.

Decision and reasons on sanction

Having found Ms Tzvetkova'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 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 given the seriousness of the case nature. The panel decided that to take no action would not be sufficient to protect the public nor would it adequately address the public interest concerns previously identified.

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 Ms Tzvetkova'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 Ms Tzvetkova'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 order would not be sufficient to protect the public from the risks associated with any repetition of past failings, nor would it adequately address the public interest concerns previously identified.

The panel next considered whether imposing a further conditions of practice order on Ms Tzvetkova's registration would be a sufficient and appropriate response. The panel had regard to the nature of Ms Tzvetkova's misconduct. The panel took into account that Ms Tzvetkova has demonstrated developing insight and has demonstrated, through certificates evidencing the training that she has undertaken, to address past areas of concern and strengthen her practice. The real issue today is that Ms Tzvetkova has not yet secured employment to demonstrate that the steps she has taken to strengthen her practice can be successfully applied in a clinical environment nor shown sufficient insight.

The panel accepted that Ms Tzvetkova has been unable to comply with the previous conditions of practice due to her not being able to commence employment, but she continues to engage with the NMC and continues to be willing to comply with any new conditions of practice order imposed.

The panel therefore determined that a further conditions of practice order is sufficient to protect patients and to address the wider public interest, noting as the original panel did that there was no deep seated attitudinal problems. In this case, there are conditions that could be formulated which would protect patients during the period they are in force.

The panel noted that Ms Tzvetkova's representatives had requested a conditions of practice order of nine months and the panel was also of the view that this would allow her sufficient time to find suitable employment and demonstrate insight and remediation of her practice before the next review and would be the appropriate and proportionate outcome in the circumstances.

The panel recognised and was sympathetic to the fact that Ms Tzvetkova has made considerable efforts to find employment. The panel reminds her that if her circumstances change and she is able to take steps earlier than anticipated to secure employment and demonstrate safe practice, or in the event of any other change in her circumstances, it is open to her to contact the NMC to request an early review of this order.

Accordingly, the panel determined, pursuant to Article 30(1)(c) to make a conditions of practice order for a further period of nine months, which will come into effect on the expiry of the current order, namely at the end of 18 November 2025.

The panel decided that the public would be suitably protected, as would the reputation of the profession, by the implementation of the following conditions of practice:

'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.

- You must ensure that you are supervised by another registered nurse when undertaking a medication administration round. You must be supervised until you have been deemed competent in completing the medication administration round by a Band 6 nurse or above.
- 2. You must have monthly meetings with your line manager, supervisor or mentor to discuss:
 - a) Communicating effectively with colleagues.
 - b) Managing and escalating risk.
- 3. A report must be sent to the NMC, prior to any review hearing, from your line manager, supervisor or mentor detailing:
 - a) Your communication with colleagues.
 - b) Risk management in your practice.

- 4. You must keep the NMC 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:
 - a) Any organisation or person you work for.
 - Any agency you apply to or are registered with for work.
 - c) Any employers you apply to for work (at the time of application).
 - d) Any establishment you apply to (at the time of application), or with which you are already enrolled, for a course of study.
- 6. You must tell your case officer, within seven days of your becoming aware of:
 - a) Any clinical incident you are involved in.
 - b) Any investigation started against you.
 - c) 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:
 - a) Any current or future employer.
 - b) Any educational establishment.
 - c) Any other person(s) involved in your retraining and/or supervision required by these conditions.'

The period of this order is for nine months.

This conditions of practice order will take effect upon the expiry of the current conditions of practice order, namely the end of 18 November 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 Ms Tzvetkova 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:

- Demonstration of developing depth of insight and strengthening of practice through providing a new written reflection that is focused on the incident of this case.
- Evidence of continuing professional development beyond mandatory training.
- A report from your employer on your competency in performing medication administration rounds, communicating with colleagues and managing and escalating risk.

This will be confirmed to Ms Tzvetkova in writing.

That concludes this determination.