Nursing and Midwifery Council
Fitness to Practise Committee

Substantive Order Review Hearing
Wednesday, 5 August 2026

Virtual Hearing

Name of Registrant:	Jesica Lynn Madyavanhu
NMC PIN:	01B1302E
Part(s) of the register:	Registered Nurse – Sub part 1 RNA - Adult (12 March 2004)
Relevant Location:	Oxford/Enfield
Type of case:	Misconduct
Panel members:	James Carr (Chair, Lay member) Elaine Whitton (Registrant member) Tricia Breslin (Lay member)
Legal Assessor:	Lachlan Wilson
Hearings Coordinator:	Sara Glen
Nursing and Midwifery Council:	Represented by Lucia Brieskova, Case Presenter
Ms Madyavanhu:	Present and represented by Laura Herbert, Counsel instructed by The Royal College of Nursing (RCN)
Order being reviewed:	Conditions of practice order (12 months)
Fitness to practise:	Not Impaired
Outcome:	**Order to lapse upon expiry in accordance with Article 30 (1), namely 8 September 2026**

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

Ms Herbert made a request that this case be held in partly in private on the basis that proper exploration of your case may involve reference to [PRIVATE]. The application was made pursuant to Rule 19 of the 'Nursing and Midwifery Council (Fitness to Practise) Rules 2004', as amended (the Rules).

Ms Brieskova indicated that she supported the application to the extent that any reference to [PRIVATE] should be heard in private as and when such matters arise.

The legal assessor reminded the panel that while Rule 19(1) provides, as a starting point, that hearings shall be conducted in public, Rule 19(3) states that the panel may hold hearings partly or wholly in private if it is satisfied that this is justified by the interests of any party or by the public interest.

Having heard that proper exploration of your case may involve reference to [PRIVATE], the panel determined to hold the hearing in private as and when such matters arise in order to protect your right to privacy.

Decision and reasons on review of the substantive order

The panel decided to allow the current conditions of practice order to lapse upon expiry.

This order will lapse at the end of 8 September 2026 in accordance with Article 30(1) of the 'Nursing and Midwifery Order 2001' (the Order).

This is the first review of a substantive conditions of practice order originally imposed for a period of 12 months by a Fitness to Practise Committee panel on 8 August 2025.

The current order is due to expire at the end of 8 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, a registered nurse:

1. On one or more of the dates set out in Schedule 1, you worked full time as a nurse for Oxford Foundation NHS Trust and also worked full time as a nurse at Enfield CCG.

2. Your actions at charge 1 were dishonest in that:

a) …

b) …

c) You represented to Enfield CCG that you were working separate hours at Oxford Foundation Trust, when you knew that you were not.

d) On 18 September 2020, during a meeting with Oxford Foundation Trust, you represented that you were on the phone to a difficult family when you were in communication with Enfield CCG.

3. …

AND in light of the above, your fitness to practise is impaired by reason of your misconduct.

Schedule 1 Dates

a) 24 August 2020
b) 26 August 2020
c) 01 September 2020
d) 02 September 2020
e) 09 September 2020

f) 16 September 2020'

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.

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

'The question that will help decide whether a professional's fitness to practise is impaired is:
"Can the nurse, midwife or nursing associate practise kindly, safely and professionally?"
If the answer to this question is yes, then the likelihood is that the professional's fitness to practise is not impaired.'

Nurses occupy a position of privilege and trust in society and are expected at all times to be professional. Patients and their families must be able to trust nurses to care for them in line with the fundamental tenets of nursing at the most vulnerable moments of their lives or the lives of their loved ones. To justify that trust, nurses must be honest and open and act with integrity. They must make sure that their conduct at all times justifies both their patients' and the public's trust in the profession.
In this regard the panel considered the judgment of Mrs Justice Cox in the case of CHRE v NMC and Grant in reaching its decision. In paragraph 74, she said:

'In determining whether a practitioner's fitness to practise is impaired by reason of misconduct, the relevant panel should generally consider not only whether the practitioner continues to present a risk to members of the public in his or her current role, but also whether the need to uphold proper professional standards and public confidence in the profession would be

undermined if a finding of impairment were not made in the particular circumstances.'

In paragraph 76, Mrs Justice Cox referred to Dame Janet Smith's "test" which reads as follows:

'Do our findings of fact in respect of the doctor's misconduct, deficient professional performance, adverse health, conviction, caution or determination show that his/her/ fitness to practise is impaired in the sense that S/He:

a) …

b) has in the past brought and/or is liable in the future to bring the medical profession into disrepute; and/or

c) has in the past breached and/or is liable in the future to breach one of the fundamental tenets of the medical profession; and/or

d) has in the past acted dishonestly and/or is liable to act dishonestly in the future.'

The panel determined that limbs 'b,' 'c,' and 'd' of Grant are engaged in this case.

The panel found that the simple acts of your misconduct in Charges 2c and 2d were in themselves remediable, and that you had made attempts to remedy your actions however this alone was insufficient. The panel has also considered the dishonest nature of each of the misconduct charges found proved.

The panel concluded that, although you had shown some insight, your reflections on dishonesty did not demonstrate a satisfactory level of insight

into the seriousness of the misconduct, or the impact it caused on colleagues and the public confidence in the profession.

The panel determined that your dishonest behaviour was an attitudinal concern and when coupled with your insufficient level of insight was likely to be repeated.

The panel accepted that there was no direct risk to patients and that no physical and emotional harm as a result of your misconduct was caused. However, given your dishonest misconduct, confidence in the nursing profession would be undermined if its regulator did not find that your fitness to practice is impaired

The panel acknowledged your apology detailed in your reflective piece. It however found that it lacked sufficient depth of understanding of why your actions were dishonest or indeed why you acted dishonestly.

In relation to the limited insight you had developed, the panel took into account, your reflective piece, in which:

'What I Should Have Done Differently

I regret the misinterpretation of my intentions and the procedural confusion that may have arisen. In hindsight, I would have formalised declarations earlier and documented the working arrangements more clearly.

I now fully understand that, regardless of my intentions or the non-clinical nature of my responsibilities, this could give rise to significant concerns about transparency, governance, and compliance with the NMC Code, particularly with respect to promoting professionalism and trust (NMC Code, section 20), and preserving safety (NMC Code, section 15).

I understand now that maintaining strict boundaries between roles is essential, not only in terms of hours worked but also in the clear separation of responsibilities, expectations, and access to clinical systems.

This experience has highlighted the importance of communication and openness with line managers. I regret that my actions, even if unintended, may have caused a breakdown in trust or raised concerns regarding my professional integrity.

I fully accept that this has had an impact on my professional standing and that of the organisations I worked for. I deeply regret any distress this situation may have caused colleagues or service users.

They helped me understand that ethical practice is not simply about intent but about perception, clarity, and consistency in actions.'

The panel bore in mind the overarching objective 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 concluded that a well-informed member of the public, who was aware of the seriousness of the misconduct and the level of your insight and remediation, would be extremely concerned if no finding of impairment was made. The panel concluded that public confidence in the profession, and the NMC as its regulator, would be undermined if a finding of impairment was not made in this case and further that such a finding is necessary to declare and uphold proper standards amongst members of the profession.

Accordingly, the panel was satisfied that your fitness to practise is impaired on the grounds of the wider public interest limbs of its overarching objective.

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 accepted the advice of the legal assessor. He advised the panel that the purpose of the imposition of a sanction is not to punish, but it is to adequately address any public protection or public interest concerns identified. He reminded the panel that not all instances of dishonesty are of equal seriousness, and that not all findings of dishonesty would indicate the imposition of a striking-off order. He advised the panel to consider all the available sanctions before it in ascending order, in reaching its decision.

The panel identified the following aggravating features:

- *Limited insight with regards to the dishonest elements of the incidents*
- *More than one incident of dishonesty*

The panel identified the following mitigating features:

- *Apology and remorse in relation to the acts other than their dishonest nature*
- *The challenging and unprecedented work environment during Covid-19*
- *No regulatory and/or disciplinary concerns since the incidents*

Before determining the most appropriate sanction in this case, the panel took reference of NMC Guidance SAN-2 which deals with sanctions for particularly serious cases which stated:

'Particular care is required where the professional has denied charges of dishonesty which are found proved by the panel. The panel must bear in mind the principle that professionals facing charges involving dishonesty, should have a proper opportunity to resist very serious allegations. That must be balanced against the necessity of protecting people receiving care and the public from professionals whose honesty and integrity they cannot rely upon.

- *there is a distinction to be drawn between an allegation of conduct which is intrinsically dishonest, like fraud or forgery, as opposed to an allegation which relates to conduct (record-keeping, for example) which is capable of being performed either honestly or dishonestly. A rejected defence of honesty is less likely to be properly regarded as an aggravating factor if it is based on a disagreement between the panel and the professional about facts relating to the professional's subjective state of mind (for example a situation where the professional's defence is that a record-keeping error was innocent, but the panel concludes that it was deliberate/dishonest).*

- *a professional's refusal to admit objective facts they can reasonably be expected to be aware of (such as where they were at a particular time, or what they did) is more likely to be relevant to sanction than when a panel disbelieves their evidence about their state of mind or motivation. An example of failing to admit objective facts might be telling the panel 'I told my manager that I was feeling unwell and had to finish my shift early' in circumstances where the panel concludes that no such conversation ever*

took place. That kind of rejected evidence is more likely to be relevant to sanction than a professional telling the panel 'my record-keeping error was a mistake' when the panel finds that the motivation was deliberate dishonesty. The fact that the panel did not accept the professional's evidence about their subjective state of mind is less likely to be relevant to sanction.'

Having regard to all of the above and its determination on a finding of impairment, the panel determined that although your misconduct included an act of dishonesty, it does not reach the highest level of seriousness.

The panel next went to consider each of the available sanctions before it in ascending order.

The panel first considered whether to take no action and decided that this would be inappropriate in view of the seriousness of the case. The panel decided that it would not be proportionate or 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, 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 although your misconduct was on the lower spectrum of seriousness, a caution order would be inappropriate in view of the public interest issues identified. The panel decided that it would be neither proportionate nor appropriate to impose a caution order.

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 criteria set out in SG, that includes:

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

The panel determined that it would be possible to formulate relevant, proportionate, measurable, realistic and workable conditions which would address the concerns highlighted in this case and protect the wider public.

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

The panel also considered the imposition of a suspension order.

The panel found that to impose a suspension order would be punitive and disproportionate in view of its findings that your dishonesty was at the lower spectrum of seriousness.

The panel has concluded that a conditions of practice order should be imposed and 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 tell the NMC within 14 days of any nursing or midwifery appointment (whether paid or unpaid) you accept within the UK or elsewhere and provide the NMC with contact details of your employer.*

2. *You must tell the NMC about any professional investigation started against you and/or any professional disciplinary proceedings taken against you within 14 days of you receiving notice of them.*

3. *You must keep a reflective practice profile. This profile will include:*

   a. *Details of discussion with your line manager around how you have strengthened your understanding and insight into the importance of honesty as a nurse.*
   b. *How you have used this strengthened insight to promote a culture of professional honesty within your workplace.*
   You must send your case officer a copy of the profile quarterly.

4. *You must obtain a report from your line manager every six months. Each report must contain details of your:*

   a. *Compliance with these conditions and progress made on your reflective portfolio.*

   You must send your case officer the first report within six months of these conditions coming into effect.

5. *If working for more than one organisation, you must disclose this fact in writing to each organisation at the point of the acceptance of the additional work.*

The period of this order is for 12 months.

Before the end of the period of the order, a panel will hold a review hearing to see how well you have 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:

- *Your continued engagement with, and attendance at any future process;*
- *Documentary evidence thereof;*
- *An updated reflective account addressing the importance of honesty;*
- *Feedback report from your line manager focussing on your strengthened practise in relation to honesty;*
- *Compliance with the conditions which have been set out above.'*

Decision and reasons on current impairment

The panel has considered 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 the ability of a professional on our register to practise as a nurse, midwife or nursing associate safely and effectively 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, as well as your bundle containing a testimonial, training certificates and an up to date reflective statement. It has taken account of the submissions made by Ms Brieskova on behalf of the NMC.

At the outset of the hearing, Ms Brieskova addressed the panel and submitted that it may be aware that a new matter has been referred to the NMC for screening. Therefore, Ms Brieskova told the panel that it should not be concerned with any of these matters at this hearing. She submitted that there has been no breach of the current substantive conditions of practice order and that you have kept the NMC up to date throughout.

Ms Brieskova took the panel through the background of the case and referred the panel to the relevant documentation in the bundle.

Ms Brieskova submitted that there is plenty of evidence of your compliance with the conditions set out in the substantive conditions of practice order.

She submitted that to your credit, you have complied with all of the conditions. She submitted that you have provided quarterly reflective practice profiles, of which you have provided three dated 12 December 2025, 1 April 2026 and 11 June 2026 and also that you have provided an up to date reflective statement, a testimonial and training certificates dated 4 August 2026. She submitted that as part of your conditions, you were also required to provide a report from your manager, which you have provided and this is dated 8 April 2026. Ms Brieskova submitted that this provides positive feedback about you in various supervision sessions.

Ms Brieskova submitted that in your documents dated 4 August 2026 there is a up to date reflective statement written by you and a testimonial from Ms Priya Hussain which is very complimentary and provided positive feedback about you. She submitted there is also evidence of recent training that you have undertaken in order to strengthen your practice. Ms Brieskova submitted that there is plenty of evidence provided by you of compliance with your conditions as set out in the substantive conditions of practice order. She asked the panel to consider carefully whether there is current impairment, and if so, what the most and appropriate sanction is to protect the public and is in the wider public interest.

Ms Brieskova submitted that the NMC is neutral with regard to the outcome of today's substantive order review hearing and that it is a matter for the panel to decide.

The panel also had regard to the submissions from Ms Herbert on your behalf.

Ms Herbert reminded the panel that the recent allegations do not form part of the current conditions.

Ms Herbert acknowledged that the previous panel determined that your dishonest behaviour was an attitudinal concern and when coupled with your insufficient insight, it was likely to be repeated. Ms Herbert submitted that your quarterly reflective pieces and your up to date reflective statement demonstrate insight and significant growth since the conditions of practice order was imposed. She submitted that in your reflective statement, you recognise and accept the previous panel's decision and the gap in your knowledge between recognising the standards and actually applying them in real life. She submitted that you look at how your actions have affected others, properly focus on not trying to explain away the panel's findings by looking at the actual harm and potential harm that could have been caused by your actions. She submitted that you show understanding that in high pressure situations, accountability matters more than personal circumstances, and that it is not up to you to make decisions about what is appropriate or not, but that it needs to be about upholding standards.

Ms Herbert submitted that you recognise the impact of your actions on your workplace, people you worked with, the people using the service and on the profession as a whole as well as the potential consequences for your actions. She submitted that you are able to recognise that being honest is not just about avoiding direct lies, but it is about timely disclosure, accurate records and clear explanations to avoid misunderstandings. She submitted that you have properly treated this conditions of practice order not as a paper exercise, but as a way of addressing previous flaws in your behaviour.

Ms Herbert submitted that in the up to date reflection there is reference to the ICB matters and the loss of your employment. She submitted that it is clear, and that the NMC is in agreement that you have complied with your conditions, informed the NMC of what happened and of those conclusions. Ms Herbert submitted that you have reflected on the ICB process and have recognised that sometimes the way you communicate is an important thing to address. She submitted that this shows that you have a good sense of self-awareness and recognise that the way you express yourself sometimes may appear to minimise the concern and that this is not what you wish to do.

Ms Herbert submitted that you have completed additional training to strengthen your practice. This training includes '*Duty of Candour*', '*Professional Boundaries*' and that there

are also certificates on your continued professional development in relation to health and safety and legal updates.

Ms Herbert submitted that you have deeply reflected on your actions that led to the conditions of practice order being imposed, your dismissal from your place of employment and what led to this. She submitted that you have also reflected on the fact that nurses must be honest even when nobody is watching and even if the disclosure is uncomfortable and not to your benefit. She submitted that you recognise that this is even more heightened in the senior role that you had the privilege of having and that accountability is important.

Ms Herbert submitted that when looking at whether this behaviour is likely to be repeated and if there is an ongoing risk, the answer to this is no and therefore you are no longer impaired.

The panel accepted the advice of the legal assessor.

The panel had regard to the NMC guidance REV-2 namely '*Substantive order reviews'* last updated 14 October 2022 and DMA-1 '*Impairment*' last update 28 January 2026.

The panel is aware that there are other ongoing issues in relation to you. It considered that in her submissions, Ms Brieskova, on behalf of the NMC, made it clear to the panel that it was not to consider any of those issues in its deliberations of this case and as such, the panel has not considered them. The panel makes it clear that in its decision making, it did not consider the circumstances of these issues nor make any adjudication or connection between those issues and any matters discussed in this case.

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 insufficient insight into the seriousness of your misconduct, the impact it caused on colleagues and on the impact on the public confidence on the profession. At this hearing, the panel considered the three reflective practice reports dated 8 December 2025, 24 March 2026, 8 June 2026 and your recent bundle which included an up to date reflective statement, training certificates and a testimonial. The panel considered that you demonstrate a clear improvement in your level of insight throughout the documents. It noted that in your most recent reflective statement, you show remorse, acceptance of the previous panel's findings and acknowledge that what you did was wrong. You said that you can see that your actions were "*a serious failure of judgement*" and were able to show how you should have done things differently. You clearly highlighted how your practise has changed as a result of your reflections and additional learning. The panel concluded that you show strong insight into the implications of your behaviour on service users, managers and your colleagues and show understanding of how your actions could have impacted negatively on the reputation of the nursing profession. Considering all of this, the panel concluded that your current insight has significantly developed from where it was at your substantive hearing.

The panel also considered the testimonial by Priya Hussain who states that she has known you in a professional capacity since 2016. The panel noted that the testimonial is very supportive and positive in nature and that Ms Hussain said that she is fully aware of the NMC Fitness to Practice proceedings. She also said;

> '*In my professional opinion, Jessica is fit to practise as a registered nurse without restrictions. I believe she has demonstrated insight, reflection and remediation and has continued to uphold the values of the nursing profession. She has shown she can practise safely, effectively and professionally whilst maintaining public confidence in nursing…I believe the nursing profession would suffer a loss if Jessica were removed from the NMC register.*'

In its consideration of whether you have taken steps to strengthen your practice, the panel took into account the additional relevant training that you have undertaken which included '*Duty of Candour*' dated 22 July 2026, '*Professional Boundaries in Health and Social Care*' dated 22 July 2026, and '*Mandatory and Statutory (Practical) Training Course*' dated 18

May 2026. The panel considered that in your up to date reflective statement, you have demonstrated by way of examples how you have applied your learning from your reflection on your misconduct and how you have learned from the process.

The original panel determined that due to your insufficient level of insight and dishonesty you were liable to repeat matters of the kind found proved. Today's panel has had sight of a positive testimonial, evidence of your continued professional development and it has also had sight of your developed insight over the course of the last year. The panel considers that you now have strong insight into your behaviour and that in light of all the information before it, the panel determined that you are now not liable to repeat matters of the kind found proved. The panel therefore decided that a finding of continuing impairment is not 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 not required and the seriousness of your misconduct has been marked sufficiently by the substantive conditions of practice order imposed. The panel considered that the public interest consideration, in this case, is met as you will still be under restriction until the substantive conditions of practice order expires on 8 September 2026.

The panel determined that through your full compliance with your substantive conditions of practice order, full and continued engagement with the NMC and proceedings, your strengthening of practice and fully developed insight, the panel finds that, although your fitness to practise was impaired at the time of the previous panel's determination, given all of the above, your fitness to practise is not currently impaired.

In accordance with Article 30(1), the substantive conditions of practice order will lapse upon expiry, namely the end of 8 September 2026.

This will be confirmed to you in writing.

That concludes this determination.