

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

**Substantive Order Review Hearing
Monday, 3 August 2026**

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:	Dale Simon (Chair, lay member) Ivan McGlen (Registrant member) Louise Print-Lyons (Lay member)
Legal Assessor:	Justin Gau
Hearings Coordinator:	Hanifah Choudhury
Nursing and Midwifery Council:	Represented by Lucia Brieskova, Case Presenter
Ms Tzvetkova:	Present and represented by Wafa Shah, instructed by Royal College of Nursing (RCN)
Order being reviewed:	Conditions of practice order (9 months)
Fitness to practise:	Impaired
Outcome:	Conditions of practice order extended for nine months to come into effect at the end of 18 August 2026 in accordance with Article 30 (1)

Decision and reasons on review of the substantive order

The panel decided to extend the current conditions of practice order for a period of nine months.

This order will come into effect at the end of 18 August 2026 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 18 October 2024. The order was reviewed on 9 October 2025 where the panel extended the conditions of practice order for a further nine months.

The current order is due to expire at the end of 18 August 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 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 first reviewing panel determined the following with regard to impairment:

'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.'

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

'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.

- 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 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.'*

Decision and reasons on current impairment

The panel has considered carefully whether your fitness to practise remains impaired. Whilst there is no statutory definition of fitness to practise, the NMC has defined fitness to practise as 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 and your response bundle which included reflective pieces, training certificates and testimonials.

Ms Brieskova, on behalf of the Nursing and Midwifery Council (NMC), submitted that the NMC adopted a neutral position at this review. She submitted that it was a matter for the panel to determine whether the evidence provided by you since the previous review, including evidence of reflection, training and any skills developed, was sufficient to demonstrate that your fitness to practise was no longer impaired. She submitted that the panel should consider whether the previous concerns had been adequately remediated, bearing in mind that you have remained in a broadly similar position to that considered at the last review. She invited the panel to determine whether the evidence before it was sufficient to conclude that there was no longer a risk to the public and that the wider public interest no longer required a finding of impairment.

Ms Shah on your behalf submitted that, although you had been unable to obtain nursing employment whilst subject to the conditions of practice order, the evidence before the panel demonstrated that you had made consistent efforts to secure employment and had not wasted the intervening period. She submitted that the bundle contained evidence of job applications, correspondence with prospective employers, training certificates and reflective work which demonstrated your commitment to returning to nursing and addressing the concerns that led to the order. She submitted that your inability to demonstrate compliance with the conditions was through no fault of your own but because you had been unable to obtain a nursing role.

The panel queried the dates of the reflective pieces and the testimonials. Ms Shah explained that the reflective pieces had been written in April and July 2026 but the testimonials had both been submitted to earlier panels for consideration.

Ms Shah submitted that the panel should consider varying the conditions of practice order to make it less onerous and more attractive to prospective employers. She submitted that, if the order was extended, it should be for six months rather than nine months. She further submitted that Condition 1 should be amended to clarify that supervision of medication administration would cease once, within six weeks of starting a role, and once you had successfully completed a medication competency assessment. She submitted that this would not alter the substance of the condition but would provide greater clarity that the supervision was not indefinite. She also submitted that Condition 2 should be amended to require supervisory meetings every two months, rather than monthly, as this would maintain appropriate regulatory oversight while reducing the burden on a prospective employer.

Ms Shah submitted that the panel should also take into account your training, reflection and current employment as a personal assistant. She acknowledged that, as you were not working in a nursing role and did not administer medication, you were unable to provide evidence of improved medication administration in practice. She invited the panel to consider whether all of the existing conditions remained necessary in light of the evidence before it.

The panel heard and accepted the advice of the legal assessor.

In reaching its decision, the panel was mindful of the need to protect the public, maintain public confidence in the profession and to declare and uphold proper standards of conduct and performance.

The panel considered whether your fitness to practise remains impaired.

The panel noted that, through no fault of your own, you have been unable to obtain employment in a nursing role since the last review. As a result, you have not had the opportunity to address the concerns identified in this case or to demonstrate compliance with the conditions of practice order in a clinical setting.

The panel acknowledged the training, reflection and efforts you have made to secure employment. However, it determined that there has been no material change in circumstances since the previous review. As you have been unable to have your skills tested in a clinical environment, the panel could not be satisfied that the risk identified by previous panels has been fully addressed. It therefore concluded that a risk of harm to the public remains and that a finding of current impairment continues to be necessary to maintain public confidence in the profession and uphold proper professional standards.

For these reasons, the panel finds that your fitness to practise remains impaired.

Decision and reasons on sanction

Having found your fitness to practise currently impaired, the panel then considered what, if any, sanction it should impose in this case. The panel noted that its powers are set out in Article 30 of the Order. The panel has also taken into account the 'NMC's Sanctions Guidance' (SG) and has borne in mind that the purpose of a sanction is not to be punitive, though any sanction imposed may have a punitive effect.

The panel first considered whether to take no action but concluded that this would be inappropriate in view of the seriousness of the case. The panel decided that it would be neither proportionate nor in the public interest to take no further action.

It then considered the imposition of a caution order but again determined that, due to the public protection issues identified, an order that does not restrict your practice would not be appropriate in the circumstances. The SG states that a caution order may be appropriate where *'the case is at the lower end of the spectrum of impaired fitness to practise, but the Committee wants to mark that what happened was unacceptable and must not happen again.'* The panel considered that your misconduct was not at the lower end of the spectrum and that a caution order would be inappropriate in view of the issues identified. The panel decided that it would be neither proportionate nor in the public interest to impose a caution order.

The panel next considered whether imposing a further conditions of practice order on your registration would still be a sufficient and appropriate response.

The panel took into account the submissions made by Ms Shah, including the proposed amendments to the conditions. The panel accepted that the conditions may have made it more difficult for you to obtain nursing employment and noted the evidence that some bank agencies had been unwilling to engage you whilst you remained subject to the order. However, the panel was not satisfied that this justified amending the conditions.

The panel was not persuaded that Condition 1 should be amended to provide that supervision of medication administration should cease after six weeks. It considered that there was no basis for concluding that you would necessarily be competent within that timeframe and determined that it would not be appropriate to impose an arbitrary time limit.

The panel also declined to amend Condition 2 to reduce the frequency of supervision meetings from monthly to every two months. It considered that a two-month interval would be too long to monitor your progress effectively and would not provide sufficient oversight while you addressed the identified concerns. The panel also noted that the nature of agency work is often inconsistent and may not allow for the regular supervision and assessment required to demonstrate safe and sustained practice.

The panel further considered whether a shorter conditions of practice order would be appropriate. It was not persuaded that a six-month order would provide sufficient time for you to secure suitable employment, demonstrate compliance with the conditions and obtain the evidence necessary for the next review. The panel concluded that a conditions

of practice order for a further nine months remained the least restrictive and proportionate sanction. It was satisfied that this would provide you with a realistic opportunity to obtain relevant employment, demonstrate safe practice and provide further evidence of remediation at the next review.

Accordingly, the panel determined, pursuant to Article 30(1)(c) to make a conditions of practice order for a period of nine months, which will come into effect on the expiry of the current order, namely at the end of 18 August 2026. It decided that the continuation of 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 employers you apply to for work (at the time of application).
- c) 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 date 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 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 attendance at the next review hearing.
- Evidence of working in a clinical setting as a nurse.

This will be confirmed to you in writing.

That concludes this determination.