

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

**Substantive Order Review Hearing
Thursday, 15 October 2026**

Virtual Hearing

Name of Registrant:	Grace Cunningham	
NMC PIN:	18A2888E	
Part(s) of the register:	RNA: Registered Nurse – (sub part 1) Adult – Level 1 30 August 2018	
Relevant Location:	South Tyneside	
Type of case:	Conviction	
Panel members:	Peter Fish	(Chair, lay member)
	Amanda Revill	(Registrant member)
	Kevin Connolly	(Lay member)
Legal Assessor:	Paul Hester	
Hearings Coordinator:	Samara Baboolal	
Nursing and Midwifery Council:	Represented by Giedrius Kabasinskas, Case Presenter	
Miss Cunningham:	Present and unrepresented at this hearing	
Order being reviewed:	Suspension order (4 months)	
Fitness to practise:	Impaired	
Outcome:	Conditions of practice order (12 months) to come into effect on 23 November 2026 in accordance with Article 30 (1)	

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

At the outset of the hearing, Mr Kabasinskas, on behalf of the Nursing and Midwifery Council (NMC), made a request that this case be held partly in private, on the basis that proper exploration of your case involves some reference to [PRIVATE]. He submitted that previous hearings dealing with your matter have not anonymised references to alcohol consumption, and therefore holding this hearing entirely in private is not necessary. However, he submitted that there may be some reference to [PRIVATE], particularly in your own evidence. The application was made pursuant to Rule 19 of the Nursing and Midwifery Council (Fitness to Practise) Rules 2004, as amended (the Rules).

You indicated that you supported the application.

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.

The panel determined to go into private session in connection with your [PRIVATE] and personal circumstances, as and when such issues are raised, in order to protect your privacy. In particular, in making this decision, the panel determined that the entirety of your sworn evidence should be in private so as to ensure that you, not being represented, give the best evidence.

Decision and reasons on review of the substantive order

The panel decided to replace the current suspension order with a conditions of practice order.

This order will come into effect at the end of 23 November 2026, in accordance with Article 30(1) of the Nursing and Midwifery Order 2001 (the Order).

This is the second review of a substantive suspension order originally imposed for a period of 9 months by a Fitness to Practise Committee panel on 24 September 2025. This was reviewed on 15 June 2026, where the reviewing panel imposed a further suspension order for a period of 4 months.

The current order is due to expire at the end of 23 November 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 30 August 2023 at South Shields Magistrates' Court, you were convicted of

a. Driving a motor vehicle on a road after consuming so much alcohol that the proportion of it in your breath exceeded the prescribed limit on 13 August 2023, contrary to section 5(1)(a) of the Road Traffic Act 1988 and Schedule 2 to the Road Traffic Offenders Act 1988.

b. Assault by beating of an emergency worker, namely Police Constable 1 on 13 August 2023 contrary to section 1 of the Assaults on Emergency Workers (Offences) Act 2018. 20

c. Assault by beating of an emergency worker, namely Police Constable 2 on 13 August 2023 contrary to section 1 of the Assaults on Emergency Workers (Offences) Act 2018. AND in light of the above, your fitness to practise is impaired by reason of your convictions.

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

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

‘The panel has had regard to all of the documentation before it, including the NMC bundle and responses from Miss Cunningham. It has taken account of the

submissions made by Ms Rashid. She submitted that there were a number of mitigating factors including that there are no other regulatory findings, no previous convictions, continued engagement with the NMC, compliance with alcohol testing and Miss Cunningham has shown some insight in her reflective piece.

Ms Rashid also invited the panel to consider that despite Miss Cunningham's compliance with the NMC, her lack of attendance today limits a full investigation and understanding of her current insight and further professional or personal development she has achieved during her suspension.

Ms Rashid also noted that Miss Cunningham has given evidence of compliance with alcohol testing which shows [PRIVATE] does not show any excessive alcohol consumption.

Ms Rashid stated that in light of Miss Cunningham's absence and the fact that there was missing information giving any further insight and evidence of personal and professional development, her fitness to practice is still impaired.

The panel also had regard to Miss Cunningham's written submissions, which shows some insight on the impact she has had on emergency services and the safety of the public. Miss Cunningham does reference further development and learning of clinical knowledge and skills but does not go into any detail about how that is being achieved.

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

In reaching its decision, 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 required.

The panel accepted that Miss Cunningham had shown developing insight, provided through her reflective statement, and accepted that she had attempted to address

the recommendations made by the previous panel. However, the panel considered that there were still areas that required further investigation which may have been possible if Miss Cunningham had attended in person. In particular, the panel was not satisfied that there was sufficient evidence of what steps Miss Cunningham was taking to improve her [PRIVATE] and mitigating any future stressors. The panel could not be satisfied in the evidence before it that the behaviours that led to the imposition of the suspension order would not be repeated.

In addition, there was evidence within the bundle that [PRIVATE].

(The Expert Witness Statement, dated 10 June 2026)

The panel was not confident therefore that the risk of repetition had been reduced sufficiently for Miss Cunningham to practice unrestricted.

The panel therefore considered that Miss Cunningham's fitness to practise remains impaired.'

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

'Having found Miss Cunningham'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 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 a lack of significant insight which would make repetition highly unlikely this would be inappropriate.

The panel next considered whether a conditions of practice on Miss Cunningham's registration would be a sufficient and appropriate response. The panel is mindful that any conditions imposed must be proportionate, measurable and workable. The panel was not able to formulate conditions of practice that would adequately address the concerns relating to Miss Cunningham's conviction, due to the fact her conviction does not challenge her clinical practice but rather her ability to promote professionalism and trust.

The panel considered the imposition of a further period of suspension. It was of the view that a suspension order would allow Miss Cunningham further time to fully reflect on her previous conviction. The panel concluded that a further four month suspension order would be the appropriate and proportionate response and would afford Miss Cunningham adequate time to further develop her insight and an opportunity to provide evidence of any professional development she may have undertaken to continue to keep her clinical skills and knowledge up to date. It would also allow Miss Cunningham the opportunity to provide evidence of the lifestyle and holistic changes she has made to improve her wellbeing.

This suspension order will take effect upon the expiry of the current suspension order, namely the end of 23 July 2026 in accordance with Article 30(1).

Before the end of the period of suspension, another panel will review the order. At the review hearing the panel may revoke the order, or it may confirm the order, or it may replace the order with another order.

Any future panel reviewing this case would be assisted by:

- Attendance at any future hearings and reviews*
- Evidence of professional development, including documentary evidence of completion of any professional courses and evidence of continued development of clinical skills and knowledge*
- An updated written reflective piece providing evidence of steps taken to improve her wellbeing*

- *To comply with any further NMC test in regards to Alcohol testing'*

Submissions on current impairment

Mr Kabasinskas submitted that since the last review, you have provided evidence of further training and a reflection.

Mr Kabasinskas referred the panel to the previous reviewing panel's recommendations. He referred the panel to the [PRIVATE].

Mr Kabasinskas submitted that the decision on impairment is ultimately one for the panel. He submitted that, however, given the history of this case and its particular facts, the panel may conclude that a risk of repetition remains and therefore a finding of impairment is necessary on the ground of public interest. In relation to the sanction, Mr Kabasinskas submitted that this is a matter for the panel, and reminded it to consider what steps you have taken to address any deficiencies and risks posed by your conduct.

You gave oral evidence under oath.

You told the panel [PRIVATE]. You explained that you were panicked after being pulled aside by the police and *"accidentally struck one of the officers in the leg."*

[PRIVATE]

[PRIVATE]

You told the panel [PRIVATE].

You told the panel that you are sorry and remorseful. You said that you understand that your professional accountability needs to be maintained outside of the workplace, and you acknowledge the distress that you caused emergency workers. You said you *"could never be more sorry"*. You said you understand the impact of your conduct on the profession, and public confidence.

You said that you hope to return to nursing. You said that you are happy to go to a lower band to help you renew your understanding of fundamentals of nursing.

The panel asked questions of you.

You informed the panel that you have a conviction in 2019 for drink driving. You said that there was also an incident when you were in your twenties; you were involved in an altercation while under the influence of alcohol.

[PRIVATE].

Decision and reasons on current impairment

The panel accepted the advice of the legal assessor.

The panel 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 a registrant's suitability to remain on the register without restriction. The panel carried out a comprehensive review of the order in the context of current circumstances. While it noted the decision of the previous panel, the panel exercised its own judgement in determining whether there is current impairment.

The panel had regard to all of the documentation before it, including the NMC bundle, and your registrant respond bundle included reflections and training certificates. It took into account Mr Kabasinska's submissions on behalf of the NMC, and your oral evidence under oath. 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 took into account that you have engaged with the recommendations provided by the previous reviewing panel. You provided an updated reflective piece, as well as evidence of completed training.

The panel carefully considered your reflective piece. It noted that your reflective piece touched on relevant aspects of your conduct in the charges found proved; however, it was of the view that there is further room to develop your insight and address your past conduct in more depth. The panel, based on your reflection and your oral evidence, had no concerns around your understanding of the seriousness of your conduct on the profession and public confidence. However, the panel considered that you had not sufficiently addressed the extent to which alcohol has had an impact on [PRIVATE], your past decision-making, and how you had addressed it.

The panel took into account your history of previous similar offences. It noted that this was not a one-off incident, as you have a previous conviction for drink driving, and were involved in an altercation while under the influence of alcohol, albeit this was while you were in your twenties and took place some time ago.

The panel acknowledged that, while you are remorseful and explained that you are [PRIVATE]. It noted that over two days, [PRIVATE]. The panel also took into account that you said that you do not drink often anymore, and that you have limited your drinking over the three years since your conviction. However, the panel noted the DNA testing report before the previous panel:

'[PRIVATE].'

The panel noted that this period, outlined in the testing report, was little over a year ago.

The panel therefore found that there is a risk of repetition. The underlying factors driving your relationship with alcohol do not appear to have been explored, and as such the panel could not be satisfied that conduct of this kind would not be repeated in the future. The panel was of the view that you need to demonstrate a deeper understanding of your relationship with alcohol consumption. It also noted that there is limited evidence before it

around your use of good coping strategies for stress, and the steps you are taking for your wellbeing.

In light of the above, the panel could not be satisfied that it is highly unlikely that matters of the kind found proved would be repeated. 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 required. The panel was of the view that public confidence in the nursing profession would be seriously undermined if a nurse with a conviction relating to a drink driving and assault of two police officers were allowed to practise without restriction and a finding of impairment and without fully developed insight.

The panel was of the view that there are no public protection issues which arise from this matter, as there is no evidence that your clinical practice is impaired. The incident took place outside of the workplace, and therefore, a finding of impairment is necessary on public interest grounds only.

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

Decision and reasons on sanction

Having found that your fitness to practise currently impaired, the panel 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 bore 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 and the wider public interest concern. 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 seriousness of the case and the wider public interest concern, 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 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 considered whether a conditions of practice order would be proportionate and satisfy the wider public interest ground. The panel took into account the steps you have made to remediate the concerns, and that you have engaged with the recommendations of the previous panel. The panel was of the view that the concerns in this case, and the risk of repetition, can be managed through the formulation of conditions.

The panel acknowledged that this is not a [PRIVATE].

The panel determined to formulate conditions around your relationship and use of alcohol in order to address the risk of repetition. It determined that, as there are no concerns around public protection and your clinical practice, conditions around your clinical practice are not necessary.

The panel was satisfied that it would be possible to formulate practicable and workable conditions that, if complied with, may lead to your unrestricted return to practice in the future, and would serve to protect the reputation of the profession in the meantime.

The panel determined that the reputation of the nursing profession could be addressed by the implementation of the following conditions of practice and afford you an opportunity to reflect and develop your insight:

'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. [PRIVATE].
2. [PRIVATE].
3. 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.
4. You must keep us informed about anywhere you are studying by:
 - a) Telling your case officer within seven days of accepting any course of study.
 - b) Giving your case officer the name and contact details of the organisation offering that course of study.
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.
 - e) 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:
 - 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 conditions of practice order will take effect upon the expiry of the current suspension order, namely the end of 23 November 2026 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 future hearings and continued engagement with the NMC.
- An up-to-date reflection addressing:
 - [PRIVATE]
 - Your conduct in relation to the NMC code.
 - [PRIVATE]

This will be confirmed to you in writing.

That concludes this determination.