Nursing and Midwifery Council
Fitness to Practise Committee

Substantive Order Review Meeting
Wednesday, 2 September 2026

Nursing and Midwifery Council
2 Stratford Place, Montfichet Road, London, E20 1EJ

Name of Registrant:	**John Craigie**
NMC PIN:	90E0289S
Part(s) of the register:	Registered Nurse – Sub Part 1 Mental Health Nursing – 02 September 1993
Relevant Location:	Argyll and Bute
Type of case:	Misconduct
Panel members:	Angela Kell (Chair, Lay Member) Richard Curtin (Registrant Member) Colleen Sterling (Lay Member)
Legal Assessor:	Paul Housego
Hearings Coordinator:	Angela Nkansa-Dwamena
Order being reviewed:	Suspension order (12 months)
Fitness to practise:	Impaired
Outcome:	**Striking-Off order to come into effect at the end of 8 October 2026 in accordance with Article 30 (1)**

Decision and reasons on service of Notice of Meeting

The panel noted at the start of this meeting that the Notice of Meeting had been sent to Mr Craigie's registered address by recorded delivery and first class post on 23 July 2026.

The panel had regard to the Royal Mail 'Track and trace' printout which showed the Notice of Meeting was delivered to Mr Craigie's registered address on 27 July 2026. It was signed for in the name of Mr Craigie.

The panel took into account that the Notice of Meeting provided details of the review, that the review meeting would be held no sooner than 24 August 2026 and inviting Mr Craigie to provide any written evidence seven days before this date.

The panel accepted the advice of the legal assessor.

In light of all of the information available, the panel was satisfied that Mr Craigie has been served with notice of this meeting in accordance with the requirements of Rules 11A and 34 of the Nursing and Midwifery Council (Fitness to Practise) Rules 2004 (as amended) (the Rules).

Decision and reasons on review of the current order

The panel decided to impose a striking off order. This order will come into effect at the end of 8 October 2026 in accordance with Article 30(1) of the Nursing and Midwifery Order 2001 (as amended) (the Order).

This is the first review of a substantive suspension order originally imposed for a period of 12 months by a Fitness to Practise Committee panel on 9 September 2025.

The current order is due to expire at the end of 8 October 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 17 August 2021, in relation to Resident A:*

    a. *Did not examine Resident A after they had a fall.*

    b. *Did not complete post-fall observations.*

    c. *Moved Resident A into their wheelchair using an inappropriate method in that you wrapped your arms around the resident's waist (bear hug) to lift them from the floor into the wheelchair.*

    d. *Did not complete an incident form in relation to their fall.*

    e. *Did not record their fall in the resident's notes.*

    f. *Did not instruct and/or ensure staff completed an incident form.*

    g. *Did not instruct and/or ensure staff recorded the resident's fall in the resident's notes.'*

The original panel determined the following with regard to impairment:

'The panel found that the first three limbs of the Grant test were engaged in this case. It found that Mr Craigie put Resident A at a risk of harm numerous times throughout the incident, including by failing to examine her for injuries, failing to pick her up using the appropriate technique after she had fallen, failing to record her observations, and failing to properly record her fall in the resident's notes. All of these failures contributed to an unwarranted risk of harm to Resident A both at the time and in the future.

The panel went on to consider the second limb of Grant, and found that by breaching the Code to the extent that he has and to the serious degree that he has, Mr Craigie has indeed brought the medical profession into disrepute.

When considering the third limb of Grant, the panel found that Mr Craigie breached fundamental tenants of the profession by failing to:

- *Prioritise the patients that he was overseeing;*
- *Practise effectively by performing appropriate techniques when caring for fallen residents and recording the Resident's observations appropriately, along with the incident in the required documentation.*
- *Preserve the safety of Resident A; and*
- *Promote professionalism and trust of nurses who are there to protect vulnerable residents.*

The panel concluded Mr Craigie has breached fundamental tenets of the profession.

The panel considered that the final limb of Grant which relates to dishonesty was neither charged nor engaged in this case.

The panel went on to consider the case of Cohen v General Medical Council [2008] EWHC 581 (Admin), and whether Mr Craigie's conduct was remediable. The panel found that this misconduct is potentially remediable and capable of being addressed in the sense that post-fall procedures can be the subject of training.

The panel first considered whether he has shown any insight into his misconduct, in particular whether there was any evidence that Mr Craigie had reviewed and reflected on his own performance, recognised that he should have behaved differently and put measures in place to ensure he had strengthened his professional practice so as to ensure it would not be repeated. The only insight the panel has seen is Mr Craigie's admission during his disciplinary meeting where he said "I'm guilty at not checking paperwork. For that I hold my hands up". The panel does not regard this as meaningful insight. In fact, there is evidence during his investigatory interviews that he has attempted to minimise the incident, deflect the blame on others and make excuses. He did not take responsibility for his role or as

the registered nurse in charge to deal with the fall of Resident A appropriately. The panel considers this to be evidence of an attitudinal issue which is of concern.

There is no evidence that Mr Craigie has taken any steps to address his misconduct. He has informed the NMC that is not practising as a registered nurse and has no intention of resuming practice.

Therefore, the panel is of the view that there is a high risk of repetition because he has not taken any steps to address these concerns, there is no meaningful evidence of his insight into why what he did was serious and wrong, and there is evidence of deep-seated attitudinal issues. The panel therefore decided that a finding of impairment is necessary on the grounds of public protection.

The panel bore in mind that 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 a reasonable well-informed member of the public would be shocked and troubled if a finding of impairment were not made in these circumstances, and therefore, the panel concluded that it is necessary in order to maintain public confidence. Furthermore, the panel concluded that fellow practitioners would find the conduct deplorable and therefore a finding of impairment is also needed to maintain and uphold proper standards of conduct in the profession. For these reasons, the panel considered a finding of impairment on public interest grounds is appropriate.

The panel gave consideration to NMC guidance: Impairment: What factors are relevant when deciding whether a professional's fitness to practise is impaired? (Reference: DMA-1), specifically the following section:

> *'However, there are types of concerns that are so serious that, even if the professional addresses the behaviour, a finding of impairment is required*

either to uphold proper professional standards and conduct or to maintain public confidence in the profession.'

The panel determined that a finding of impairment on the ground of public interest is necessary. It concluded that failure to practise the utmost care and caution when caring for patients – particularly those who are as vulnerable as Resident A and following a fall – needs to be taken seriously, and the lack of meaningful insight on the part of Mr Craigie needs to be addressed.

The panel determined that not to make a finding of impairment would significantly undermine the public's trust and confidence in the nursing profession. It is also necessary to mark the seriousness of the misconduct and to uphold proper standards and conduct for members of the nursing profession.

Having regard to all of the above, the panel was satisfied that Ms Craigie's fitness to practise is currently impaired.'

The original panel determined the following with regard to sanction:

'The panel then went on to consider whether a suspension order would be an appropriate sanction. The SG states that suspension order may be appropriate where some of the following factors are apparent:

- *A single instance of misconduct but where a lesser sanction is not sufficient;*
- *No evidence of harmful deep-seated personality or attitudinal problems;*
- *No evidence of repetition of behaviour since the incident; and*
- *The Committee is satisfied that the nurse or midwife has insight and does not pose a significant risk of repeating behaviour.*

The panel was satisfied that in this case, the misconduct was not fundamentally incompatible with remaining on the register because the nature of the misconduct is, in principle, remediable.

In view of the fact that this was a single incident, the panel was of the view that a strike-off at this stage would be disproportionate.

Whilst the panel acknowledges that a suspension may have a punitive effect, it would be unduly punitive in Mr Craigie's case to impose a striking-off order.

Balancing all of these factors the panel has concluded that a suspension order would be the appropriate and proportionate sanction.

The panel considered that this order is necessary to mark the seriousness of the misconduct and is the least restrictive required to protect the public, maintain public confidence and promote and maintain proper professional standards.

The panel determined that a suspension order for a period of 12 months with a review was appropriate to mark the seriousness of the misconduct. It would also give Mr Craigie further time to develop insight, remediate his misconduct and address the risk to the public.

At 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 any of the following, and particularly where they address the misconduct and concerns in this case:

- *Documentary evidence of professional development;*
- *Testimonials which can relate to paid or unpaid work;*
- *Evidence of reflection related to the incident and demonstrating his insight into the misconduct found proved; and*
- *Anything else that Mr Craigie feels appropriate that might assist the panel.'*

Decision and reasons on current impairment

The panel considered carefully whether Mr Craigie's 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 the 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 had regard to all of the documentation before it, including the NMC bundle.

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

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

The panel considered whether Mr Craigie's fitness to practise remains impaired.

The panel took into account the findings of the previous panel and considered whether there had been any material change in the circumstances since the substantive hearing. The panel noted that the previous panel found Mr Craigie's fitness to practise impaired on both public protection and public interest grounds. The previous panel also determined that Mr Craigie had demonstrated no insight into his misconduct, had provided no evidence of relevant training or reflection and that there remained a risk of repetition.

The panel noted that the previous panel considered Mr Craigie's misconduct, although serious, was capable of remediation and it imposed a suspension order for a period of 12 months. The panel further noted that the previous panel indicated that a future reviewing panel would be assisted by a reflective piece demonstrating insight from Mr Craigie, testimonials relating to paid or unpaid work, documentary evidence of professional development and any other material that Mr Craigie may feel would assist a future panel.

The panel took into account that it had not received a reflective piece from Mr Craigie demonstrating that he had developed insight into the seriousness of his misconduct or its impact on patients, colleagues, the nursing profession and the wider public. The panel also noted that Mr Craigie had not provided any testimonials or additional documentation as suggested by the previous panel or any relevant training to address the concerns identified.

The panel had regard to an email from Mr Craigie to the NMC dated 19 September 2025, which stated:

> *'as ive stated before*
>
> *…*
>
> *B. ive not worked as a nurse in 4 years+ i am unable due to health difficulties to work at all these days*
>
> *C. im not really interested or concerned..so to save yourselfs any trouble i suggest you forget about it as i have..'* [sic]

The panel acknowledged Mr Craigie's indication that he has not worked as a registered nurse in over four years and had no intention of returning to nursing practice. The panel determined that it had not received further evidence of meaningful engagement from Mr Craigie with the NMC since 19 September 2025 or any evidence demonstrating that Mr Craigie had taken steps to reflect upon and remediate the misconduct found proved.

The panel acknowledged that there is a persuasive burden upon a registrant to demonstrate that their fitness to practise is no longer impaired. The panel determined that Mr Craigie had been afforded a period of 12 months since the substantive order to demonstrate insight, reflection and remediation. In the absence of any evidence that he had taken such steps, the panel was unable to conclude that the concerns identified by the previous panel had been addressed or that Mr Craigie had strengthened his practice and

developed sufficient insight. The panel therefore determined that there remains a risk of repetition.

The panel considered that Mr Craigie had not demonstrated an understanding of the seriousness of failing to preserve the safety of Resident A following a fall or taken steps to address the failures which resulted in the original finding of misconduct. The panel consequently determined that there remains a risk to the public if Mr Craigie were permitted to return to unrestricted practice.

The panel therefore determined that Mr Craigie's fitness to practise remains impaired on public protection grounds.

The panel also considered the wider public interest. The panel noted the serious nature of Mr Craigie's misconduct, which involved failing to examine Resident A, a vulnerable resident, immediately after a fall and failures in undertaking safe manual handling manoeuvres as well as failures in undertaking observations and record keeping, which put Resident A at a risk of harm. The panel considered that Mr Craigie's actions demonstrated a failure in fundamental nursing skills and that members of the public are entitled to expect registered professionals to safeguard patients.

The panel determined that there was no evidence of developing insight, reflection or remediation since the previous panel's decision. In these circumstances, the panel determined that a finding that Mr Craigie's fitness to practise was no longer impaired would undermine public confidence in the nursing profession and in the NMC as its regulator and would fail to uphold proper professional standards.

The panel bore in mind that its primary function is to protect patients and the wider public interest which includes maintaining confidence in the nursing profession and upholding proper standards of conduct and performance. The panel determined that, in this case, a finding of continuing impairment on public interest grounds is also required.

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

Decision and reasons on sanction

Having found Mr Craigie 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 seriousness of the case, and the public protection issues identified, an order that does not restrict Mr Craigie'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, but the Committee wants to mark that what happened was unacceptable and must not happen again'.* The panel considered that Mr Craigie'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 it would be neither proportionate nor in the public interest to impose a caution order.

The panel next considered whether a conditions of practice on Mr Craigie's registration would be a sufficient and appropriate response. The panel was mindful that any conditions imposed must be proportionate, measurable and workable. The panel bore in mind the seriousness of the facts found proved at the original hearing and concluded that a conditions of practice order would not adequately protect the public or satisfy the public interest.

The panel had regard to information from Mr Craigie, stating that he does not intend to return to practise as a nurse. In view of Mr Craigie's clear settled intention not to return to nursing, the panel considered that any conditions of practice order would not be workable and would serve no useful purpose.

The panel next considered imposing a further suspension order. The panel noted that Mr Craigie has not engaged with the NMC since September 2025, he has not shown remorse for his misconduct, nor has he demonstrated any insight into his previous failings. The panel was of the view that considerable evidence would be required to show that Mr Craigie no longer posed a risk to the public.

The panel determined that Mr Craigie has not addressed the concerns identified by the previous panel since the original hearing. Mr Craigie has not provided a reflective piece for the panel's consideration, no evidence of relevant training and no evidence demonstrating that he has developed insight or taken steps to remediate his misconduct. The panel considered that there was no evidence before it to indicate that a further period of suspension would result in Mr Craigie addressing the outstanding concerns or facilitate a safe return to unrestricted practice.

The panel determined that a further period of suspension would not serve any useful purpose in all of the circumstances. The panel determined that it was necessary to take action to prevent Mr Craigie from practising in the future and concluded that the only sanction that would adequately protect the public and serve the public interest was a striking-off order.

The panel considered whether to allow the current suspension order to lapse with impairment. It had regard to NMC guidance *REV-2h* 'Allowing nurses, midwives or nursing associates to be removed from the register when there is a substantive order in place', which states:

> *'There is a persuasive burden on the professional at a substantive order review to demonstrate that they have fully acknowledged why past professional performance was deficient and through insight, application, education, supervision or other achievement sufficiently addressed the past impairments[1].*
>
> *While Suspension Orders and Conditions of Practice Orders can be varied or extended, they are not intended to exist indefinitely.'*

The panel considered that Mr Craigie has not demonstrated insight into his misconduct and has not provided any evidence that his fitness to practise is no longer impaired. Further, the panel noted that Mr Craigie has expressed that he has no intention of returning to nursing practice due to his health and has not meaningfully engaged with the NMC since September 2025. The panel noted that Mr Craigie had provided no medical evidence for any health condition.

The panel was mindful that the previous panel had considered striking off but determined that it would have been disproportionate at that stage. The previous panel instead afforded Mr Craigie an opportunity, through a 12-month suspension order, to demonstrate insight and remediation. However, the panel considered that the position is different now. Mr Craigie has been afforded that opportunity, but there was no evidence before the panel that he has engaged with the steps identified by the previous panel. There is no evidence of insight, reflection, remediation or relevant training, and the panel had determined that there continued to be a risk of repetition.

The panel also noted the NMC guidance *SAN-3*, last updated 28 January 2026:

> *'Professionals are under an obligation to cooperate with their regulator. Where professionals have failed to engage with the fitness to practise process, it won't usually be appropriate to use a suspension order as a means of giving them a 'last chance' to engage, reflect or show insight.'*

The panel considered that, in these circumstances, there was no evidence to demonstrate that Mr Craigie was likely to return to safe and unrestricted practice within a reasonable period of time. The panel therefore consequently determined that Mr Craigie should be removed from the register.

The panel found that in light of the seriousness of Mr Craigie's misconduct, his lack of engagement with the NMC and the lack of evidence provided by him, the only appropriate sanction was that of a striking-off order. The panel considered that this was necessary to

protect the public, maintain public confidence in the profession and the NMC as its regulator, and declare and uphold proper professional standards.

This striking-off order will take effect upon the expiry of the current suspension order, namely the end of 8 October 2026 in accordance with Article 30(1).

This decision will be confirmed to Mr Craigie in writing.

That concludes this determination.