

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

**Substantive Meeting  
Wednesday, 26 – Thursday, 27 November 2025**

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

<b>Name of Registrant:</b>	<b>John Chukwunonso Iwuh</b>
<b>NMC PIN</b>	14I0228E
<b>Part(s) of the register:</b>	Registered Nurse – Mental Health Nursing RNMH – (13 September 2014)
<b>Relevant Location:</b>	Bromley
<b>Type of case:</b>	Conviction
<b>Panel members:</b>	Alan Greenwood (Chair, Lay member) Katharine Rudd (Registrant member) Kiran Musgrave (Lay member)
<b>Legal Assessor:</b>	William Hoskins
<b>Hearings Coordinator:</b>	Nicola Nicolaou
<b>Facts proved:</b>	Charges 1a, and 1b
<b>Fitness to practise:</b>	Impaired
<b>Sanction:</b>	<b>Striking-off order</b>
<b>Interim order:</b>	<b>Interim suspension order (18 months)</b>

## **Decision and reasons on service of Notice of Meeting**

The panel noted from the proof of posting bundle provided for this meeting that the Notice of Meeting had been sent to the Governor of the prison in which Mr Iwuh was confined. The Notice had been sent by recorded delivery, and was marked for Mr Iwuh's attention. It contained his Prison Identification Number. The Notice was sent on 28 October 2025.

The panel could see from the available papers that Mr Iwuh had previously corresponded with the Nursing and Midwifery Council (NMC) from this prison, following the sentence passed upon him by the Crown Court. In that correspondence, he had ticked a box indicating that he wished this matter to be dealt with at a meeting.

The panel accepted the advice of the legal assessor.

The panel took into account that the Notice of Meeting provided details of the allegation, the time, dates and venue of the meeting.

In the light of all of the information available, the panel was satisfied that Mr Iwuh 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).

## **Details of charge**

That you, a registered nurse,

1. On 14 May 2025 were convicted of the following offences:
  - a. Rape of a woman 16 years or over contrary to section 1 of the Sexual Offences Act 2003.
  - b. Voyeurism – recording a private act - contrary to section 67(3) and (5) of the Sexual Offences Act 2003.

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

## Background

The NMC received a referral on 24 October 2023 by the Metropolitan Police with information that Mr Iwuh had been charged with one count of rape, and that a potential count of voyeurism was being investigated.

The incident is said to have occurred at Mr Iwuh's home address on 8 June 2022. Mr Iwuh was convicted of rape and voyeurism on 14 May 2025. On 29 August 2025, he was sentenced to a period of imprisonment of eight years for the offence of rape, and a sentence of 18 months for the offence of voyeurism, the latter sentence to run concurrently.

In passing sentence, the Judge at the Crown Court made the following observations:

*'Following some brief exchanges on WhatsApp shortly after you had met on a dating site, the two of you agreed to meet on the 8th of June 2022. Having picked up Person A from a station, you took her back to your home. Within a very short time you were making sexual advances to her. She made it clear that she did not want to continue and you desisted and prepared some food. She went to the lavatory, intending to leave. You were waiting for her when she came out and pushed her into the bedroom and onto the bed. She repeatedly, and in the plainest possible terms, made it clear to you that she did not want to have any sexual contact with you, let alone sexual intercourse. You forced yourself on her. Initially, she resisted physically. But she did not know what violence you, a virtual stranger, might inflict on her were she to try to resist more vigorously. In the end, she just submitted.*

[...]

*Unbeknown to Person A you filmed at least part of that rape, the closing stages, when she was just lying there in a state of submission waiting for you to finish and her ordeal to end. I doubt very much that was the only part you filmed, but it was all that you forwarded to your solicitors for passing on to the prosecution. On your*

*behalf, it was played to the jury. It confirmed what Person A had already described in her recorded interview.'*

## **Regulatory Concerns**

The NMC identified the following regulatory concerns:

1. Conviction – you were convicted of:
  - a. Rape contrary to section 1 of the Sexual Offences Act 2003; and
  - b. Voyeurism contrary to section 67(3) and (5) of the Sexual Offences Act 2003.

## **Decision and reasons on facts**

The charges concern Mr Iwuh's convictions and, having been provided with a copy of the certificate of conviction dated 14 May 2025, the panel finds that the facts are found proved in accordance with Rule 31 (2) and (3). These state:

- '31.—** (2) *Where a registrant has been convicted of a criminal offence—*
- (a) *a copy of the certificate of conviction, certified by a competent officer of a Court in the United Kingdom (or, in Scotland, an extract conviction) shall be conclusive proof of the conviction; and*
  - (b) *the findings of fact upon which the conviction is based shall be admissible as proof of those facts.*
- (3) *The only evidence which may be adduced by the registrant in rebuttal of a conviction certified or extracted in accordance with paragraph (2)(a) is evidence for the purpose of proving that she is not the person referred to in the certificate or extract.'*

## **Fitness to practise**

Having announced its findings on the facts, the panel then considered whether, on the basis of the facts found proved, Mr Iwuh's fitness to practise is currently impaired by reason of his convictions. There is no statutory definition of fitness to practise. However,

the NMC has defined fitness to practise as a registrant's suitability to remain on the register unrestricted.

## **Representations on impairment**

The NMC requires the panel to bear in mind its overarching objective to protect the public and the wider public interest. This included the need to declare and maintain proper standards and maintain public confidence in the profession and in the NMC as a regulatory body. The panel has referred to the case of *Council for Healthcare Regulatory Excellence v (1) Nursing and Midwifery Council (2) Grant* [2011] EWHC 927 (Admin).

Neither the NMC nor Mr Iwuh provided submissions in relation to impairment.

The panel accepted the advice of the legal assessor.

## **Decision and reasons on impairment**

The panel next went on to decide if as a result of the convictions, Mr Iwuh's fitness to practise is currently impaired.

In coming to its decision, the panel had regard to the Fitness to Practise Library, updated on 27 February 2024, 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 and to maintain professional boundaries. Patients and their families must be able to trust nurses with their lives and the lives of their loved ones. To justify that trust,

nurses 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/their fitness to practise is impaired in the sense that S/He/They:*

- a) has in the past acted and/or is liable in the future to act so as to put a patient or patients at unwarranted risk of harm; and/or*
- 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) ...'*

As the sentencing Judge made clear, Person A was caused physical, emotional, and psychological harm as a result of Mr Iwuh's actions. The panel decided that the nature of his offending carried with it a risk to patients in the future. The panel considered that Mr Iwuh's convictions of rape and voyeurism have breached the fundamental tenets of the nursing profession, in that the safety of Person A was compromised, and Mr Iwuh, by his conduct, failed to promote the professionalism and trust that is expected of a registered nurse at all times. The panel considered that Mr Iwuh's actions had brought the reputation of the nursing profession into disrepute.

The panel noted that Mr Iwuh denies the charges in this case, and is in the process of appealing his convictions. However, the panel has to deal with this matter upon the basis of the offences of which Mr Iwuh has been convicted.

The panel considered that Mr Iwuh has not demonstrated any remorse, nor has he provided evidence to demonstrate reflection, insight, remediation, or strengthening of his practice. The panel also took into account that Mr Iwuh has failed to acknowledge any risk of harm to Person A, or damage to public confidence in the nursing profession.

The panel considered the factors set out in the case of *Ronald Jack Cohen v General Medical Council* [2008] EWHC 581 (Admin) and determined that the conduct which led to the convictions is so serious that it would be extremely difficult to address. It considered that anyone capable of such a serious sexual offence cannot be trusted not to repeat conduct of the same nature. The panel was therefore of the view that there is a risk of repetition and real risk of significant harm. The panel therefore decided that a finding of impairment is necessary on the ground of public protection.

The panel bore in mind that the overarching objectives of the NMC are to protect, promote and maintain the health safety and well-being of the public and patients, and to uphold/protect the wider public interest, which 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 determined that a member of the public, with full knowledge of the case, would be shocked if a finding of impairment was not made due to the seriousness of Mr Iwuh's

convictions. The panel therefore determined that a finding of impairment on the ground of public interest was also required.

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

## **Sanction**

The panel has considered this case very carefully and has decided to make a striking-off order. It directs the registrar to strike Mr Iwuh off the register. The effect of this order is that the NMC register will show that Mr Iwuh has been struck off the register.

In reaching this decision, the panel had regard to the nature of these convictions and the sentencing remarks of the Judge in the Crown Court. It had careful regard to the Sanctions Guidance (SG) published by the NMC.

## **Representations on sanction**

Neither the NMC nor Mr Iwuh made any submissions in relation to sanction.

The panel accepted the advice of the legal assessor.

## **Decision and reasons on sanction**

Having found Mr Iwuh's fitness to practise currently impaired, the panel went on to consider what sanction, if any, it should impose in this case. The panel has borne in mind that any sanction imposed must be appropriate and proportionate and, although not intended to be punitive in its effect, may have such consequences. The panel had careful regard to the SG. The decision on sanction is a matter for the panel independently exercising its own judgement.

The panel took into account that these were two very serious offences. The panel did not identify any mitigating features in this case.



The panel had regard to the NMC guidance 'Sanctions for particularly serious cases' (ref: SAN-2, last updated 6 May 2025) in making its decision. The panel had particular regard to the guidance on 'Cases involving sexual misconduct'. The guidance states that the Fitness to Practise Committee should be mindful of the following aggravating factors:

- *'situations where the nurse, midwife or nursing associate has to register as a sex offender.*
- *Convictions for sexual offences including rape, sexual assault, sexual harassment and accessing, viewing, or any other offence relating to images or videos involving child sexual abuse or exploitation. These types of offences gravely undermine the public's trust in nurses, midwives and nursing associates. [...]*

*Panels deciding on sanction in cases about sexual misconduct will, as in all cases, need to start their decision-making with the least severe sanction, and work upwards until they find the appropriate outcome. However, as these behaviours can have a particularly severe impact on public confidence, a professional's ability to uphold the standards and values set out in the Code, and the safety of people receiving care, any nurse, midwife or nursing associate who is found to have behaved in this way will be at risk of being removed from the register. [...]*

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 Iwuh'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 Mr Iwuh's misconduct was not at the lower end of the spectrum and that a caution order 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 impose a caution order.

The panel next considered whether placing conditions of practice on Mr Iwuh's registration would be a sufficient and appropriate response. The panel was of the view that there are no practical or workable conditions that could be formulated, given the nature of the charges in this case, that the concerns do not relate to Mr Iwuh's clinical practice, and the fact that Mr Iwuh would not be able to comply with any conditions imposed due to being in prison. The panel considered that misconduct identified in this case was not something that can be addressed through retraining. Furthermore, the panel concluded that the placing of conditions on Mr Iwuh's registration would not adequately address the seriousness of this case and would not protect the public.

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 repetition of behaviour since the incident;*
- *The Committee is satisfied that the nurse or midwife has insight and does not pose a significant risk of repeating behaviour;*
- ...
- ...

The conduct, as highlighted by the facts found proved, was a significant departure from the standards expected of a registered nurse. The panel noted that the serious breach of the fundamental tenets of the profession evidenced by Mr Iwuh's actions is fundamentally incompatible with Mr Iwuh remaining on the register. Further, the panel considered that a suspension order can only be imposed for a maximum period of 12 months, and that Mr Iwuh would still be in prison at the end of the 12-month suspension period.

The panel determined that the sexual offence is so serious that a suspension order would not mark the seriousness of Mr Iwuh's convictions, nor would it protect the public or meet the public interest. As such, the panel determined that a suspension order would not be a sufficient, appropriate or proportionate sanction.

Finally, in looking at a striking-off order, the panel took note of the following paragraphs of the SG:

- *Do the regulatory concerns about the nurse or midwife raise fundamental questions about their professionalism?*
- *Can public confidence in nurses and midwives be maintained if the nurse or midwife is not removed from the register?*
- *Is striking-off the only sanction which will be sufficient to protect patients, members of the public, or maintain professional standards?*

The panel also took into account the guidance within SAN-2 and considered that Mr Iwuh's actions were significant departures from the standards expected of a registered nurse, and are fundamentally incompatible with him remaining on the register. The panel was of the view that the findings in this particular case demonstrate that Mr Iwuh's actions were extremely serious and to allow him to continue practising would undermine public confidence in the profession and in the NMC as a regulatory body.

Balancing all of these factors and after taking into account all the evidence before it during this case, the panel determined that the appropriate and proportionate sanction is that of a striking-off order. Having regard to the matters it identified, in particular the effect of Mr Iwuh's actions in bringing the profession into disrepute by adversely affecting the public's view of how a registered nurse should conduct themselves, the panel has concluded that nothing short of this would be sufficient in this case.

The panel considered that this order was necessary to mark the importance of maintaining public confidence in the profession, and to send to the public and the profession a clear message about the standard of behaviour required of a registered nurse.

This will be confirmed to Mr Iwuh in writing.

### **Interim order**

As the striking-off order cannot take effect until the end of the 28-day appeal period, the panel has considered whether an interim order is required in the specific circumstances of this case. It may only make an interim order if it is satisfied that it is necessary for the protection of the public, is otherwise in the public interest or in Mr Iwuh's own interests until the striking-off sanction takes effect.

### **Representations on interim order**

Neither the NMC nor Mr Iwuh made any submissions in relation to an interim order.

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

### **Decision and reasons on interim order**

The panel was satisfied that an interim order is necessary for the protection of the public and is otherwise in the public interest. The panel had regard to the seriousness of the facts found proved and the reasons set out in its decision for the substantive order in reaching the decision to impose an interim order.

The panel concluded that an interim conditions of practice order would not be appropriate or proportionate in this case, due to the reasons already identified in the panel's determination for imposing the substantive order. The panel therefore imposed an interim suspension order for a period of 18 months to allow time for any possible appeal.

If no appeal is made, then the interim suspension order will be replaced by the substantive striking off order 28 days after Mr Iwuh is sent the decision of this hearing in writing.

That concludes this determination.