Nursing and Midwifery Council consultation on a proposed model of revalidation

Introduction

Who we are
The Nursing and Midwifery Council (NMC) protects patients and the public in the UK by regulating nurses and midwives. For more information about the NMC please visit our website at www.nmc-uk.org

What we do
We set standards of education, training, conduct and performance for nurses and midwives, and maintain the register of those who meet those standards. We provide guidance for nurses and midwives and we have processes to investigate and deal with any who fail to meet their professional standards.

What is revalidation

Revalidation is a way for nurses and midwives to show they are meeting their professional obligations and that they continue to be fit to practise. Revalidation will require nurses and midwives to demonstrate every three years, at the point of renewal of their registration, that they are meeting our professional standards as laid out in the revised Code (due to be published in December 2014).

Revalidation will aim to:

- Increase public confidence in nurses and midwives by requiring them to demonstrate on an ongoing basis that they are fit to practise.
- Enable nurses and midwives to be accountable for demonstrating their continuing fitness to practise.
- Promote a culture of professionalism and accountability.

Why we are introducing revalidation

There is a public expectation that individual nurses and midwives are up to date and fit to practise at all times. As well as this, both the Department of Health (England) and the Professional Standards Authority have recommended that a continuing fitness to practise measurement such as revalidation is necessary for all healthcare professions.

Additionally, there have recently been a number of high profile reports into the delivery of healthcare in the UK which have recommendations for the NMC. Some of these are specifically about developing a model of revalidation to improve public protection.

How we developed revalidation

To develop the principles of revalidation the NMC engaged with a wide range of stakeholders in the four countries of the UK. These included Chief Nursing officers and governments, nurses and midwives, professional bodies, employers (both NHS and non-NHS), education providers, other regulators and patients and the public.

In September 2013, our Council approved a phased approach to revalidation with the first phase being delivered by December 2015. The reason we have taken a phased approach is because we have committed to developing a model of revalidation without any changes to our legislation. This means there are some things we cannot change at the moment, such as a three year registration renewal period and the requirement to undertake 450 practice hours.

We will introduce, test and evaluate the proposed revalidation model and this evaluation will inform the NMC’s thinking for future phases. Any legislative changes would form part of future phases.
The revalidation model

Every nurse and midwife will be required to confirm that they:

- Continue to remain fit to practise by meeting the requirements of the revised Code.
- Have completed the required hours of practice and learning activity through continuing professional development (CPD).
- Have used feedback to review and improve the way they work.
- Have received confirmation from someone well placed to comment on their continuing fitness to practise.

Consultation

This is part one of a two part, six month public consultation, which will run from January until July 2014. The consultation as a whole will address revising the Code (the standards of good nursing and midwifery practice) and implementing revalidation.

In part one we are focusing our consultation on how the proposed model of revalidation can be implemented in a variety of employment settings and scopes of practice. This will help ensure the model we launch in December 2015 is flexible and fit for purpose. We will also use this part of the consultation to gather information to draft a revised Code and develop guidance for revalidation.

We want to hear from the following individuals and organisations across the four countries of the UK:

- Nurses and midwives operating at any level, scope of practice and work setting
- The general public and users of nursing and midwifery services including patients
- Professional bodies and trade unions representing nurses, midwives and other healthcare staff
- Student nurses and midwives
- Employers and employer groups
- Other healthcare regulators
- Education institutions and providers
- Charities and patient groups
- Government and policy makers

When it takes place

This first part of the consultation starts on 6 January 2014 and closes on 31 March 2014.

What we will do next

Analysis of the responses will be carried out by an independent company, Alpha Research. We will use the findings to inform the second part of the consultation, draft a revised Code and develop guidance for revalidation. If the findings highlight any areas or topics that need further exploration, we will use the second part of the consultation to gain more insight. We will publish the findings on our website.

For further information about revalidation, please visit our website http://www.nmc-uk.org/Revalidation
For further information about the current version of the Code, please visit The Code

Your response to this consultation

This consultation will close at 17.00 on Monday 31st March 2014. Unfortunately any responses received after this time will not be included in the analysis of the consultation responses.
It is important that you read the following information before completing the survey.

This document is for reference only. Please complete the survey online via the following link
https://www.snapsurveys.com/wh/s.asp?k=138682839332

If you are not able to submit your response using the online survey you may contact us on
9684nmc@alpharesearch.co.uk for an alternative format.

Questions

All questions are optional except for the first two questions which ask in what capacity you are responding.

Where you are invited to comment, unless otherwise stated, there is a limit of approximately 300 words.

Further reading

At points in this survey you are directed to further reading which provides background information to help you answer the questions. We have also provided a glossary of terms and explanations. This information is also available on the consultations section of our website www.nmc-uk.org.

If you would like further information about this consultation please contact us at revalidation@nmc-uk.org.

Q1 Are you responding as an individual or on behalf of a group or organisation?

☐ As an individual
☐ On behalf of an organisation

Q2 (if ‘As an individual’) Are you a… (Tick all that apply)

☐ UK-registered nurse
☐ UK-registered midwife
☐ Employer or manager
☐ Educator
☐ Nursing or midwifery student
☐ Member of the public, service user or carer
☐ Other

Q2a (if ‘Other’) Please specify
Third party confirmation of continuing fitness to practise

In the proposed revalidation model, the nurse or midwife will be required to state they have received confirmation from someone well placed to comment on a nurse or midwife’s practice. This confirmation will be based on the revised NMC Code (the standards for good nursing and midwifery practice).

This confirmation cannot come from patients. However, patients will be able to contribute by giving a nurse or midwife feedback on their practice.

Q3  **(All respondents)**
Select the person(s) who should provide third party confirmation of the continuing fitness to practise of a nurse or midwife? (tick one or more)

- An NMC registered nurse or midwife who oversees the work of the nurse or midwife
- Supervisor of Midwives
- An employer or manager (who is not registered as a nurse or midwife) who oversees the nurse or midwife’s work
- A peer NMC registered nurse or midwife who has worked alongside the nurse or midwife going through revalidation
- A peer NMC registered nurse or midwife who has discussed a colleague’s continuing fitness to practise with them
- Another UK regulated health professional who has worked alongside the nurse or midwife going through revalidation
- Other
- Don't know / not sure
- Have no opinion

Q3a  **(if 'Other') Please specify**

Q4  **(UK registered nurses and midwives only)**
It is important for us to know that in your current role you would have access to the right people so you can get this confirmation on your continuing fitness to practise.

In your current practice who would you be able to approach for third party confirmation that you continue to be fit to practise in accordance with the Code? (please tick all that apply)

- An NMC registrant who oversees your work
- Supervisor of Midwives
- An employer or manager (who is not registered as a nurse or midwife) who oversees your work
- A peer NMC registered nurse or midwife who has worked alongside you
- A peer NMC registered nurse or midwife who has discussed your continuing fitness to practise with you
- Another UK regulated health professional who has worked alongside you
- Other
- No one in my current situation

Q4a  **(if ‘Other’) Please specify**

In the proposed revalidation model, we are considering if someone well placed to comment on a nurse or midwife’s practice can be part of an existing employer process.
Q5  *(All respondents)*
Would you agree or disagree that the NMC should link revalidation to an existing employer process?
- Agree
- Disagree
- Not sure
- Have no opinion

Q6  Please specify which process you feel revalidation should be linked to.

Q7  *(UK registered nurses and midwives only)*
Do you currently take part in a regular annual appraisal of your work?
- Yes
- No

Q8  *(All respondents)*
Would you agree or disagree that an appraisal is the best means to get third party confirmation of a nurse or midwife’s continuing fitness to practise?
- Agree
- Disagree
- Not sure
- Have no opinion

Q9  *(if ‘Agree’ or ‘Not sure’)  If you would like to comment on your answer you may do so here

Q10 *(if ‘Disagree’)  Please explain why you disagree
Continuing Professional Development

Q11  *(All respondents)*
In the proposed revalidation model, Continuing Professional Development (CPD) will form a vital part of revalidation. CPD is the learning activities to keep a nurse or midwife continually to date in their practice.

Which of the following do you consider to be acceptable measures of Continuing Professional Development (CPD) activity? (tick one or more)

- Certificates
- Credits
- Hours
- Work based scenarios (Reflective accounts)
- Other
- Don't know / not sure

Q11a  *(if ‘Other’) Please specify*

Q12  *(if ‘Hours’) How many hours in a three year period would be an acceptable amount?*
Practice related feedback for nurses and midwives

Q13  *(All respondents)*

It is important that a nurse or midwife reviews the feedback they receive and considers how they can use it to improve or confirm their current practice. With this in mind, feedback that is both positive and negative should be used for revalidation.

Do you agree or disagree that learning and improving from feedback is more important than whether feedback is positive or negative?

☐ Agree
☐ Disagree
☐ Not sure
☐ Have no opinion

Q14  *(if ‘Agree’ or ‘Not sure’)* If you would like to comment on your answer you may do so here

Q15  *(if ‘Disagree’)* Please explain why you disagree and what else you would propose

Q16  *(All respondents)*

In the proposed revalidation model, nurses and midwives will be required to seek and receive feedback on their practice. Using this feedback, they will be expected to consider how it can improve their practice.

In your opinion, who should contribute to this feedback on practice? (tick one or more)

☐ Patients and service users
☐ Nursing and Midwifery Students (in the case of educators)
☐ Carers
☐ Family members of patients
☐ Peers (registered nurses and midwives)
☐ Other colleagues
☐ Other
☐ Don't know / not sure

Q16a  *(if ‘Other’) Please specify

Q17  *(All respondents)*

A nurse or midwife must complete a minimum of 450 hours practice over a three year period to remain on our register. (This cannot be changed within current legislation).

With this in mind, how much feedback do you think a nurse or midwife needs to receive and assess to have a positive impact on improving their practice?

☐ Between 1 and 5 instances of feedback
☐ 6 to 10 instances of feedback
☐ 11 to 15 instances of feedback
☐ 16 to 20 instances of feedback
☐ More than 20 instances of feedback
☐ Not sure
☐ No opinion

Q17a  *(if ‘More than 20’) Please specify how many
In the proposed revalidation model, nurses and midwives will be required to seek and receive feedback on their practice. It is important for us to understand how you currently receive the feedback that enables you to improve your practice.

In what ways do you currently receive feedback from third parties about your practice? (please tick all that apply)

- Letter
- Telephone call
- Email
- Verbal
- Joint feedback (e.g. all nurses on x Ward)
- Appraisal
- Formal meeting
- Other
- Do not currently receive feedback

Q18a  (if ‘Other’) Please specify
Audit

Q19 In the proposed revalidation model, an audit process will select nurses and midwives to assess that they continue to be fit to practise. Nurses and midwives, if selected for audit, will be required to present documented evidence to the NMC for assessment.

(UK registered nurses and midwives and organisations)

How best could a nurse or midwife provide evidence of meeting the requirements for revalidation to the NMC if required to do so? (tick one or more)

- Via NMC templates
- Online (e-Portfolio)
- Their own documentation
- Other

Q19a (if ‘Other’) Please specify

Q20 (All respondents) A key objective of revalidation is to use a risk based audit depending on the assessment of potential risk to patients and service users.

How do you feel risk could be assessed most effectively?

Q21 (UK registered nurses and midwives only) Currently, to renew registration, nurses and midwives must meet the Post-registration Education and Practice Standards (Prep). In this standard, it is recommended that documented evidence on relevant learning activity is maintained in a portfolio to demonstrate that this standard has been complied with. In the future we may be recommending this for revalidation.

Do you maintain a portfolio of documented evidence to meeting your Prep standard requirements?

- Yes
- No
- Not sure
Scope of Practice for Nurses
(This section for UK registered nurses only)

A definition for midwives has already been stated by the NMC, and we are investigating the opportunity to clarify the definition of nursing.

The International Council of Nursing has released the following statement:

Nurses are both responsible and accountable for their nursing practice. The scope of nursing practice is not limited to specific tasks, functions or responsibilities but is a combination of knowledge, judgement and skill that allows the nurse to perform direct care giving and evaluate its impact, advocate for patients and for health, supervise and delegate to others, lead, manage, teach, undertake research and develop health policy for health care systems. The scope of practice is dynamic and responsive to changing health needs, knowledge development, and technological advances.

Q22 (UK registered nurses only)
It is important that the definition of nursing the NMC adopts covers the wide scope of practice of the nursing profession.

As a UK registered nurse, do you agree or disagree that this statement covers your scope of practice?

☐ Agree
☐ Disagree
☐ Not sure
☐ Have no opinion

Q23 (if ‘Disagree’ or ‘Not sure’) Please explain your answer
The Code

The Code (http://www.nmc-uk.org/Publications/Standards/The-code/Introduction/) will be the standards on which revalidation will be based. The answers to the following questions will help us draft a revised Code. We will be consulting on this draft in part two of this consultation in mid 2014.

**Q24 (UK registered nurses and midwives only)**
How often do you use the Code for different purposes?

<table>
<thead>
<tr>
<th>Purpose</th>
<th>Frequently</th>
<th>Occasionally</th>
<th>Rarely</th>
<th>Never</th>
</tr>
</thead>
<tbody>
<tr>
<td>Preceptorship (joining the register)</td>
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<td>Training or mentoring</td>
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<tr>
<td>Daily practice</td>
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<td>Renewal of registration</td>
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<tr>
<td>To promote professionalism</td>
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<tr>
<td>Disciplinary procedures / NMC referral for fitness to practise concerns</td>
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<tr>
<td>Other (please specify below and indicate frequency)</td>
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</table>

**Q25 (Organisations, nurses and midwives, educators, employers/managers and students only)**
How would you rate the Code on the following features?

<table>
<thead>
<tr>
<th>Feature</th>
<th>Very good</th>
<th>Satisfactory</th>
<th>Poor / inadequate</th>
<th>Have no opinion</th>
</tr>
</thead>
<tbody>
<tr>
<td>Layout and structure of information</td>
<td></td>
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<tr>
<td>Language and tone</td>
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<tr>
<td>Easy to read and understand</td>
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<tr>
<td>Easy to apply in different roles, settings and scopes of practice</td>
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</table>

**Q26 (if ‘Layout and structure of information’ rated ‘Poor / inadequate’)**
Please explain why you regard the layout and structure of information in the Code as poor / inadequate

**Q27 (if ‘Language and tone’ rated ‘Poor / inadequate’)**
Please explain why you regard the language and tone of the Code as poor / inadequate

**Q28 (if ‘Easy to read and understand’ rated ‘Poor / inadequate’)**
Please explain why you do not consider the Code to be easy to read and understand

**Q29 (if ‘Easy to apply in different roles, setting and scopes of practice’ rated ‘Poor / inadequate’)**
Please explain why you do not consider the Code to be easy to apply in different roles, settings and scopes of practice

**Q30- Q32 (Nurses and midwives, educators, employers/managers and students only)**
Looking ahead, what format of the Code are you likely to use most? Which others would you find useful?
consultation now closed

Will use most in the future  Would find useful  Unlikely to use much

Downloadable, printable copy  [ ]  [ ]  [ ]
Online version  [ ]  [ ]  [ ]
Pocket sized printable version  [ ]  [ ]  [ ]
Apps for Smartphone and tablets  [ ]  [ ]  [ ]
Other - Please specify below  [ ]  [ ]  [ ]

Q33  (Organisations, nurses and midwives, educators, employers/managers and students only) Are there any topics in the Code which you feel need updating, promoting or are missing?

☐ Yes
☐ No
☐ Not sure
☐ Have no opinion

Q34  (if ‘Yes’) Please specify which topics

Q35  (Organisations, nurses and midwives, educators, employers/managers and students only) There are some additional guidance documents that underpin the Code which give more information on best practice for nurses and midwives on certain topics, for example the guidance on raising concerns.

Do you think there are any additional topics that are important and need to be included as underpinning guidance?

☐ Yes
☐ No
☐ Not sure
☐ Have no opinion

Q36  If you would like to comment on your answer you may do so here

Q37  (Organisations, nurses and midwives, educators, employers/managers and students only) There exists in the UK a variety of quality standards in health and social care, such as ones developed by National Institute for Health and Care Excellence (NICE) and the Scottish Intercollegiate Guidelines Network (SIGN). These mainly focus on the delivery of clinical care.

Do you agree or disagree that the Code should require nurses and midwives to be aware of these UK applicable quality standards in health and social care?

☐ Agree
☐ Disagree
☐ Not sure
☐ Have no opinion
Support
(This section for UK registered nurses and midwives, employers/managers and organisations only)

Q38 (UK registered nurses and midwives, employers/managers and organisations only)
When the revised Code is released with revalidation guidance at the beginning of 2015, nurses and midwives will be required to prepare for revalidation which will come into effect from the beginning of 2016.

What would be the best ways of the NMC supporting nurses and midwives in the revalidation process?

- Supporting information for everyone
- Supporting information for employers
- Other
- Not sure

Q38a (if 'Other') Please specify
Outcomes

Q39 Our proposed revalidation model states that nurses and midwives must demonstrate that they continue to remain fit to practise based on the revised Code. They will demonstrate this by completing the required hours of practice and learning activity. They will also obtain confirmation from someone well placed to comment on their continuing fitness to practise as well as seeking feedback to improve their practice.

The key of revalidation is to improve standards of practice on a continuing basis. Do you agree or disagree that revalidation will improve patient safety?

- Agree
- Disagree
- Not sure
- Have no opinion

Q40 (if ‘Agree’ or ‘Not sure’) If you would like to comment on your answer you may do so here

Q41 (if ‘Disagree’) Please explain why you disagree

Other comments

Q42 If you would like to make any final comments about revalidation or the Code you may do so here.
About you
(section for those responding as an individual)

Q43  (UK registered nurses and midwives, employers/managers and educators only)
Please tick ONE box which best describes the type of organisation you work for:

- Government department or public body
- Regulatory body
- Professional organisation or trades union
- NHS employer of nurses or midwives
- Independent sector employer of, or agency for, nurses or midwives
- Education provider
- Consumer or patient organisation
- Other

Q43a (if ‘Other’) Please specify

Q44  (UK registered nurses and midwives, employers/managers and educators only)
Which of the following best describe your current practice: (Tick one or more areas that best describe the area you practise in)

- Direct patient care
- Management
- Education
- Policy
- Research
- Other

Q44a (if ‘Other’) Please specify

Q45  (UK registered nurses and midwives only)
Current employment status: (Tick one or more)

- Registered but not practising
- Permanent employment / Fixed term
- Self-employed
- Voluntary
- Agency
- Other

Q45a (if ‘Other’) Please specify

Q46  (UK registered nurses and midwives only)
Current practice setting: (tick one or more)

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<thead>
<tr>
<th></th>
<th>NHS</th>
<th>Independent /voluntary</th>
<th>Other</th>
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<tbody>
<tr>
<td>Primary care</td>
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<td>Secondary care</td>
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<tr>
<td>Tertiary Hospital</td>
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<tr>
<td>Public Health</td>
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<tr>
<td>Care Home Sector</td>
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<tr>
<td>Cosmetic/Aesthetic Sector</td>
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<tr>
<td>Ambulance service</td>
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</table>
Q47  (UK registered nurses and midwives only)
Are you a: (Tick one or more)

- RN1: Adult nurse, level 1
- RNA: Adult nurse, level 1
- RN3: Mental health nurse, level 1
- RNMH: Mental health nurse, level 1
- RN5: Learning disabilities nurse, level 1
- RNLD: Learning disabilities nurse, level 1
- RN8: Children's nurse, level 1
- RNC: Children's nurse, level 1
- RN2: Adult nurse, level 2
- RN4: Mental health nurse, level 2
- RN6: Learning disabilities nurse, level 2
- RN7: General nurse, level 2
- RN9: Fever nurse, level 2
- RM: Midwife
- RHV: Health visitor
- HV: Health visitor
- RSN: School nurse
- SN: School nurse
- ROH: Occupational health nurse
- OH: Occupational health nurse
- RFHN: Family health nurse
- FHN: Family health nurse
- RPHN: Specialist community public health nurse

Q48  (UK registered nurses and midwives only)
What recordable qualifications do you have: (Tick one or more)

- V100: Community practitioner nurse prescriber
- V150: Community practitioner nurse prescriber (without SPQ or SCPHN)
- V200: Nurse independent prescriber (extended formulary)
- V300: Nurse independent / supplementary prescriber
- LPE: Lecturer / Practice educator
- TCH: Teacher
- SPA: Specialist practitioner: Adult nursing
- SPMH: Specialist practitioner: Mental health
- SPC: Specialist practitioner: Children's nursing
- SPLD: Specialist practitioner: Learning disability nurse
- SPGP: Specialist practitioner: General practice nursing
- SCMH: Specialist practitioner: Community mental health nursing
consultation now closed

- SCLD: Specialist practitioner: Community learning disabilities nursing
- SPCC: Specialist practitioner: Community children's nursing
- SPDN: Specialist practitioner: District nursing

Q49  
(All individuals)
Please tell us where you live.

- England
- Northern Ireland
- Scotland
- Wales
- Other

Q49a  (if 'Other') Please specify
About you
*(section for those responding on behalf of an organisation)*

Q50  *(Organisations only)*
Please tick ONE box which best describes the type of organisation you represent:

- Government department or public body
- Regulatory body
- Professional organisation or trades union
- NHS employer of nurses or midwives
- Independent sector employer of, or agency for, nurses or midwives
- Education provider
- Consumer or patient organisation
- Other

Q50a *(if ‘Other’)* Please specify

Q51  *(Organisations only)*
Please give the name of your organisation.

Q52  *(Organisations only)*
Would you be happy for your comments in this consultation to be identified and attributed to your organisation in the reporting, or would you prefer that your response remains anonymous?

- Happy for comments to be attributed to my organisation
- Please keep my responses anonymous

Q52  *(Organisations only)*
Please state where your organisation mainly operates:

- UK-wide
- England
- Northern Ireland
- Scotland
- Wales
- Other

Q53a *(if ‘Other’)* Please specify
Equality and diversity monitoring questions 
*(section for those responding as an individual)*

It would be very helpful for monitoring the effectiveness of our consultation process if you would complete the following 6 questions. Your answers will give us information about the people that have taken part in this consultation. There is a ‘prefer not to answer’ option for some questions.

This information will only be used for statistical purposes and you will not be identified.

Q54 *(Individuals only)*
Please indicate your gender.

- Male
- Female
- Transgender
- Prefer not to answer

Q55 *(Individuals only)*
Please indicate your sexual orientation.

- Bisexual
- Gay or lesbian
- Heterosexual
- Prefer not to answer

Q56 *(Individuals only)*
Do you have a disability?
Disability in this context means a ‘physical or mental impairment which has a substantial and long term adverse effect on a person’s ability to carry out normal day-to-day activities’.

- Yes
- No
- Prefer not to answer

Q57 *(Individuals only)*
Please indicate your ethnic group. Please tick the appropriate box to indicate your background

- White - British
- White - Irish
- Any other White background
- Black or Black British - Caribbean
- Black or Black British - African
- Any other Black background
- Mixed group - White and Black Caribbean
- Mixed group - White and Black African
- Mixed group - White and Asian
- Any other Mixed background
- Asian or Asian British - Indian
- Asian or Asian British - Pakistani
- Asian or Asian British - Bangladeshi
- Asian or Asian British - Chinese
- Other Asian or Asian British background
- Any other background
- Prefer not to answer
consultation now closed

Q57a  *(if ‘Other’)  Please specify*

Q58  *(Individuals only)*
Please indicate your age

- Under 25
- 25 - 34
- 35 - 44
- 45 - 54
- 55 or over
- Prefer not to answer

Q59  *(Individuals only)*
I would describe my religious background/beliefs as…

- Buddhist
- Christian
- Hindu
- Jewish
- Muslim
- Sikh
- I have no religious beliefs
- Prefer not to answer
- Other

Q59a  *(if ‘Other’)  Please specify*
Consultation monitoring questions

We would appreciate it if you would answer a few questions about your experience of this consultation.

Q60 *(UK registered nurses and midwives only)*
Have you responded to this consultation as a result of direct communication from the NMC?

- Yes
- No

Q61 *(All respondents — unless ‘Yes’ above)*
How did you find out about this consultation?

- NMC website
- NMC newsletter
- Email from NMC
- University
- Friend/colleague
- NMC event
- My organisation
- Other

Q61a *(if ‘My organisation’ or ‘Other’)*
Please specify

Q62 *(All respondents)*
How far do you agree or disagree that...

<table>
<thead>
<tr>
<th></th>
<th>Strongly agree</th>
<th>Tend to agree</th>
<th>Neither agree nor disagree</th>
<th>Tend to disagree</th>
<th>Strongly disagree</th>
</tr>
</thead>
<tbody>
<tr>
<td>a) You know what this consultation can and cannot influence?</td>
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<tr>
<td>b) You have been provided with enough information on the subject?</td>
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<tr>
<td>c) The consultation documents were easy to understand?</td>
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<tr>
<td>d) It was easy to give your views?</td>
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Q62e *(All respondents)*
How do you think this consultation could be improved?
As this is an anonymous survey, it will not be possible to view or amend your response after you have ‘submitted’ it unless you supply your email address below. This is because your email address will be needed to identify your response. If you supply your email address and later wish to revisit your response, then you will need to contact Alpha Research at 9684nmc@alpharesearch.co.uk to ask for your response to be returned.

Q63 Email address: