As the independent regulator for nurses and midwives in the UK, and nursing associates in England, we are here to enable better, safer care.

We set the education standards for all nursing and midwifery professionals. When they are ready to practise, we welcome them onto our register of nearly 700,000 nursing and midwifery professionals.

Once registered, every professional has to uphold the standards in our Code so that people can have confidence they will receive high-quality, safe care from nurses, midwives and, in England, nursing associates. We also promote lifelong learning through revalidation, encouraging professionals to keep developing their skills throughout their careers.

“We promote lifelong learning through revalidation”

Nursing & Midwifery Council
We are committed to becoming a regulator that is kind, compassionate, open and fair.

We want to encourage openness and learning among health and care professionals to improve care and keep the public safe. On the occasions when something goes wrong and people are at risk, we can step in to investigate and take action, giving the people affected, including those using services, patients, their carers and families, a voice as we do so.

This review summarises our work last year, particularly our response to the Professional Standards Authority’s recommendations in the *Lessons Learned Review*.

We have focused on ensuring people are at the heart of what we do, treating them with dignity and respect, and supporting them better. We are also embedding a culture of transparency and openness, being honest when things go wrong and continuing to learn and put things right. We are committed to becoming a regulator that is kind, compassionate, open and fair.
Our impact in numbers

On 31 March 2019 there were:

- **653,544** nurses
- **36,916** midwives
- **7,288** nurses and midwives
- **489** nursing associates

A total of **698,237** on our register

Fitness to practise performance

- **We put 84%** of interim orders in place within 28 days of concerns being raised with us (2017–2018: 88 percent)
- **We concluded 86%** of cases within 15 months (2017–2018: 81 percent)
Registrations performance

- **98.5%** of UK registration applications completed within 10 days
  
  (2017–2018: 97.9%)

- **100%** of EU/overseas registration applications completed within 60 days
  
  (2017–2018: 98.5%)

- **We answered about 857 calls a day**
  
  (2017–2018: 1,000)

  rising to 986 at our busiest times

Number of referrals to fitness to practise

- **5,373** (2018–2019)
- **5,509** (2017–2018)
- **5,476** (2016–2017)
Fitness to practise in numbers 2018–2019

1. Preliminary assessment
When we receive concerns about someone’s fitness to practise we check whether they are on our register and assess whether the concerns require a full investigation.

2. Interim orders
Where needed, at any point our independent panels can take urgent, temporary action to protect the public while we look into the concerns that have been raised.

3. Investigations
Where needed, we fully investigate the concerns raised about someone’s fitness to practise. At the end of the investigation, our Case Examiners decide whether any next steps are required to protect the public. Case Examiners may decide to take no further action if they conclude the concerns do not require regulatory action or if the nurse, midwife or nursing associate has taken sufficient steps to improve their practice.

4. Adjudication
Where needed, cases are adjudicated by our independent panels. Panels decide whether regulatory action is required to protect the public. Panels may decide to take no further action if they conclude the allegations are not proved or if the nurse, midwife or nursing associate has taken sufficient steps to improve their practice.
We decided 1,990 cases required a full investigation
We decided 3,389 cases did not require a full investigation

We reached decisions on 5,379 cases

Interim suspension orders in 238 cases
Interim conditions of practice orders in 268 cases

Take no further action in 963 cases
Give advice, issue a warning, or agree undertakings in 155 cases
Refer 520 cases for adjudication

Remove the person from the register in 162 cases
Suspend the person from the register temporarily in 231 cases
Issue cautions in 57 cases
Take no further action in 112 cases
On 31 March 2019 there were:

<table>
<thead>
<tr>
<th>Education Institutions</th>
<th>Nursing and Midwifery Programs</th>
</tr>
</thead>
<tbody>
<tr>
<td>83</td>
<td>938</td>
</tr>
<tr>
<td>approved to deliver</td>
<td>approved to deliver</td>
</tr>
<tr>
<td>nursing or midwifery</td>
<td>nursing degree</td>
</tr>
<tr>
<td>programmes</td>
<td>apprenticeship programmes</td>
</tr>
</tbody>
</table>

(2017–2018: 21.9 percent)

At 31 March 2019, our employee turnover was 21.6%

At 31 March 2019, the percentage of new employees leaving within six months was 19.6%

(2017–2018: 27.8 percent)
Oversight of our work

The Professional Standards Authority (PSA) oversees and reports to Parliament on our work, as well as other health and care regulators.

In April 2019, the PSA published its review of our performance for 2017–2018. It found that we met 22 of the 24 Standards of Good Regulation. The standards that we failed to meet are two of the ten fitness to practise standards. We take the PSA’s findings seriously and the progress we have made in improving our practice is highlighted on the following pages.
Highlights of the year

Nursing associates: a new professional role

We welcomed the first nursing associates on our register in January 2019 following two years of preparing, with partners and stakeholders, to regulate this new profession in England. Nursing associates support better, safer care for people of all ages across health and social care settings in England. Our standards ensure they have the skills they need.

Nursing associates support better, safer care for people of all ages

Maintaining our register

This year we made it easier for people with the right skills to join our register.

These changes included improving our website and increasing our online services. We ask people to complete a number of declarations in relation to their health and character in any registration application. This year we improved our Guidance on health and character to provide better advice for people on the appropriate disclosure of disability-related conditions.
We began to review our registration process for those trained overseas – outside the European Union/European Economic Area. We introduced some immediate changes, for example enabling overseas applicants to apply to work in the UK without having to work for at least 12 months after qualifying. We also improved our guidance and supporting materials for applicants.

Revalidation enables the professionals on our register to demonstrate that they can continue to deliver safe and effective care. 2018–2019 was the third year that revalidation has been in place. Findings from independent evaluation suggest that revalidation continues to be valued by both employers and professionals.

**Fitness to practise: a person-centred approach**

In July 2018, after public consultation and qualitative research, we agreed a new strategic direction for fitness to practise.

Our new approach is person-centred. It will encourage a culture of openness and learning in health and social care settings which supports nurses, midwives and nursing associates to learn from mistakes and address concerns about their practice.

We collaborated with stakeholders to make our new approach work. We ran five pilots between September 2018 and March 2019 to test new ways of working. In 2019–2020 we will put our new approach in place.
Introducing a Public Support Service

Since the PSA’s *Lessons Learned Review* was published we have taken important steps to become kinder and more person-centred in our work. This includes the introduction of our new Public Support Service (PSS), which supports patients and families who raise concerns about nurses, midwives or nursing associates.

The PSS has achieved a great deal this year, including:

- training our teams to identify when someone needs additional support
- launching a new website section providing better information
- offering meetings with people who have made a referral
- establishing an independent emotional support line with the General Medical Council (GMC)

A steering group of patient groups, families, employers and other organisations across the UK has supported the PSS.

The first person to contact the service directly said:

“My opinions of the NMC have been completely reversed. I finally saw compassion and quick responses and I was spoken to as an equal. I believe that the NMC should be very proud of the way that their Public Support Service is developing.”
Our people and our IT

People are essential to our success. We continued to implement our People Strategy, exploring how we can live our values (fairness, people, transparency) and establish positive behaviours. We invested in a leadership development programme for managers and began work on our employment policies and grading and pay arrangements.

We began to modernise our outdated IT systems so we can provide a better experience for our colleagues, the professionals on our register, the public and our partners. This work will continue in 2019–2020.

Equipping future professionals

Our education standards give nurses, midwives and nursing associates the skills and knowledge they need to deliver high-quality, safe care now and in the future.

In 2018, we introduced our ambitious future nurse standards, setting out the skills and knowledge the next generation of nurses will need. We consulted on our equally ambitious standards to reshape midwifery education and training in the UK.

We changed the way we quality assure education programmes, introducing new outcome-focused standards for education institutions and their practice placement partners.

The standards enable a wider, more innovative range of programmes, including apprenticeships.

We also introduced lay visitors (that is, people who are not on our register) as part of our approval visits for pre-registration programmes. Universities and other education institutions now have to show how well they interact with those who use services, patients and their carers.
Income and expenditure

In 2018–2019 our income was £92 million. We spent £81.6 million. The diagram below shows a breakdown of how this money was spent.

- **£2.7m** Educations and standards
- **£6.6m** Registrations and revalidation
- **£5.8m** Information technology
- **£12.7m** Estates, Finance, Procurement and People and Organisational Development
- **£2.7m** Governance, legal services and strategy development
- **£5.6m** Change and improvement projects
- **£5.4m** Depreciation, Professional Standards Authority fee and other costs

We publish what we spent in previous years here: www.nmc.org.uk/reports-and-accounts
Co-producing our strategy
2020–2025

We know that we need to keep changing and improving in order to drive care forward and ensure that people are at the heart of everything we do.

That’s why we are working with people who use health and care services, the professionals on our register, and our partners to co-produce a new long-term strategy. That strategy will chart our course towards better regulation of nursing and midwifery.

We will launch our new strategy in April 2020.