



Changes to how we carry out our fitness to practise process

Have your say

Tell us what
you think by
26 January 2026



Who we are



We are the Nursing and Midwifery Council (NMC).

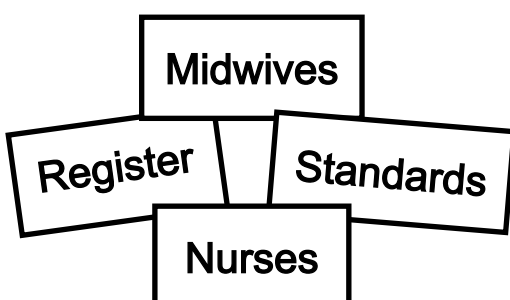


We make sure **nurses, midwives** and **nursing associates** have the skills and knowledge they need to do their job in a safe and kind way.

Register
<i>Helena Mahon</i>
<i>Michelle Neeman</i>
<i>Krishna Azim</i>
<i>Kai Chung</i>
<i>Zofia Kowalczyk</i>
<i>Glynwen Brent</i>
<i>Santiago Silva</i>

We keep a list of all the people who can work as nurses and midwives in the UK. We also keep the list of nursing associates in England.

This list is called the **register**.



Some words are in **bold**. There is a list of what they mean at the end of this report.

What this is about



A nurse, midwife or nursing associate needs the skills and knowledge to do their job in a safe and kind way.



Anyone can tell us when they feel a nurse, midwife or nursing associate has given them poor care.

We call this a **concern**.



We listen to your concerns and decide if we need to look into it.

We call this process **fitness to practise**.



We want to make some changes to how we do this.



We want to make our work:

- faster



- fairer and



- clearer for everyone.

Why we want to change how we check a person's fitness to practise



We know that the way we check fitness to practise can take too long and be upsetting for everyone involved.



The UK government is going to make bigger changes in the future.



But we want to make changes now to improve things.

We want you to have your say



We want to hear what you think about these changes.

Your answers will help us decide if we need to do our job differently.



You can tell us what you think by:

Filling in our online survey:
nmcuk.qualtrics.com/jfe/form/SV_6M6iTzqzjH1GEpU



Emailing us at:
consultations@nmc-uk.org



You must tell us what you think by
26 January 2026.

We are suggesting 5 changes

Change 1. Changing how the panel can get advice



When someone tells us they feel a nurse, midwife or nursing associate has given them poor care, we may need to have a hearing to talk about it.

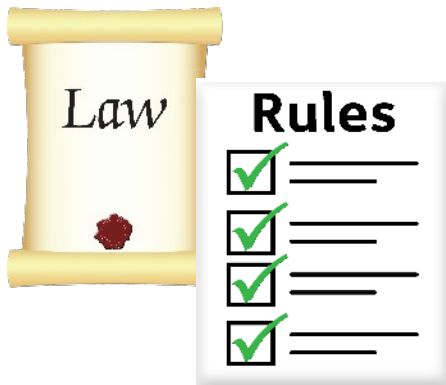


At a hearing a team of people called a panel come together to make a fair decision.

They are independent, which means they are not on anyone's side



Sometimes people on the panel need help to understand the law.



The law is a set of rules we all have to follow so that everything can be safe and fair.

What happens now



Someone called a **legal assessor** helps the panel understand the law to make sure the process runs well.

The legal assessor is not a panel member.



They must be a lawyer and must have been a lawyer for 10 years or more.

They are independent, which means they are not on anyone's side.

What we want to change



We want to sometimes use a **legally qualified panel chair** instead of a legal assessor.

A **legally qualified panel chair** means someone who leads the panel and can give advice about the law.



Just like a legal assessor they would need to be a lawyer who has been a lawyer for 10 years or more.



When the panel includes a legally qualified chair, we will not need a separate legal assessor.



This will mean:

- the panel will make decisions faster.



- it is cheaper.



If there is no legally qualified chair we will still use legal assessors.



Do you agree or disagree with this change that we want to make?

Strongly agree

Agree

Do not agree or disagree

Disagree

Strongly disagree

Don't know



Change 2. Stronger rules about getting ready for a hearing

We want to give strict instructions that people must follow when getting ready for a hearing.



Everyone will have to follow these instructions, including us (unless there is a very good reason not to).



The panel running the hearing will have to make sure the instructions are followed.



This will mean:

- everyone knows what they must do to prepare for a hearing



- everyone knows what they need to do during the process



- **evidence** can be shared earlier.

Evidence is information about the complaint.



- hearings can be shorter and finish more quickly.



Do you agree or disagree with this change that we want to make?

Strongly agree

Agree

Do not agree or disagree

Disagree

Strongly disagree

Don't know

Change 3. New ways to send and share information



We may want to share information with the nurse, midwife or nursing associate involved.



We can use a secure online account or portal to share documents such as letters and evidence packs.



We would only do this if the nurse, midwife or nursing associate agrees.



Sending information through an online account or portal will mean:

- it is quicker and safer



- all documents are in one place



- it will help people who need reasonable adjustments.



Do you agree or disagree with this change that we want to make?

Strongly agree

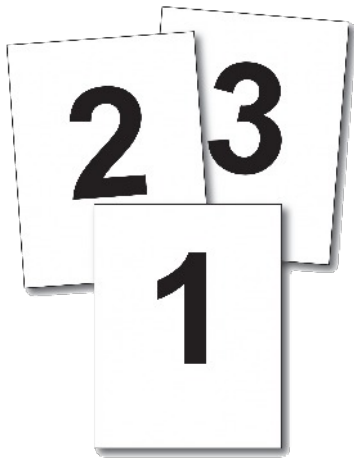
Agree

Do not agree or disagree

Disagree

Strongly disagree

Don't know



Change 4. Look at timeframes

There are 3 parts to this change.

4a. The start of the process

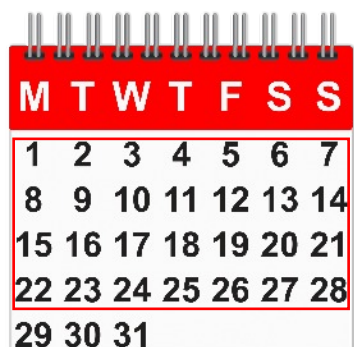
What happens now

If we decide we need to look into a concern, we must tell the nurse, midwife or nursing associate



We must also tell them that they can send us a reply (if they want to).

This step is called **providing representations**.



We give them 28 days to send a reply.



What may change

We think 28 days is usually the right amount of time.



But we would like to be able to give more time when it is fair and right to do so.



Do you agree or disagree with this change that we want to make?

Strongly agree

Agree

Do not agree or disagree

Disagree

Strongly disagree

Don't know

4b. At the end of the process



What happens now

After we look at a concern we send the information we gathered to the nurse, midwife or nursing associate.



We must give them 28 days to reply to this information.



What may change

A **case examiner** is a person whose job is to look at all the information about a concern.



If the case examiner thinks we will need to take further action we think it is right to ask the nurse, midwife or nursing associate to reply.



If the case examiner thinks we do not need to take further action, we do not think we should have to ask the nurse, midwife or nursing associate to send any more information.



Do you agree or disagree with this change that we want to make?

Strongly agree

Agree

Do not agree or disagree

Disagree

Strongly disagree

Don't know

4c. Hearings and meetings

What happens now

If there is going to be a hearing or a meeting, we must tell the nurse, midwife or nursing associate the date of the hearing or meeting at least 28 days before.



What may change

We want to shorten the 28 days if:

- the person agrees
- it is in the public interest for it to happen more quickly.





Do you agree or disagree with this change that we want to make?

Strongly agree

Agree

Do not agree or disagree

Disagree

Strongly disagree

Don't know

Change 5. Better support for vulnerable witnesses



Some people find it hard to talk about what happened because:

- of their personal situation



- of their health and wellbeing



- it is hard to talk about a difficult experience.

We call this being a **vulnerable witness**.



We want to:

- use kinder language in our rules



- give more help to people who need help to talk to the panel about what happened.



Do you agree or disagree with this change that we want to make?

Strongly agree

Agree

Do not agree or disagree

Disagree

Strongly disagree

Don't know



Do you think these changes will affect people with **protected characteristics** or people who speak Welsh?

Protected characteristics are:

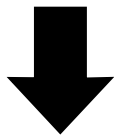
- age
- gender reassignment
- being married or in a civil partnership
- being pregnant or on maternity leave
- disability
- race
- religion or belief
- sex
- sexual orientation

How this will help



All these changes will:

- make decisions faster



- reduce stress for everyone



- make the process fairer



- keep the public safe.



Thank you for telling us what you think.

What the words mean

Case examiner

A person whose job is to look at all the information about a concern.

Concern

When we have concerns that a nurse, midwife or nursing associate has given poor care, because of information we receive.

Evidence

Information about a concern we are looking into.

Fitness to practise

A nurse, midwife or nursing associate needs the skills and knowledge to do their job in a safe and kind way. This is called fitness to practise.

Law

Rules we all have to follow so that everything can be safe and fair.

Legal assessor

A lawyer who must have been a lawyer for 10 years or more. They are independent, which means they are not on anyone's side.

Legally qualified panel chair

Someone who leads the panel and can give advice about the law. They must have been a lawyer for 10 years or more.

Midwives

People who are trained to give women support, care and advice during pregnancy, labour and after the baby is born.

Nurses

People who are trained to give safe and kind care to help people who have health problems and to help people to stay well.

Nursing associates

This is a role in England. Nursing associates are trained to work with nurses to support and care for patients.

Register

A list of all the people who have the right training and meet our rules to work as a nurse or midwife in the UK, or nursing associate in England.

Representations

The chance for a nurse, midwife or nursing associate to send us their information about a concern.

Vulnerable witness

Someone who finds it hard to talk about what happened because:

- of their personal situation
- of their health and wellbeing, or
- it is hard to talk about a difficult experience.



Credits

This paper has been designed and produced for the Nursing and Midwifery Council. It includes material from the Inspired Easy Read Collection and cannot be used anywhere else without written permission from Inspired Services Publishing Ltd.

Ref ISL154 25. September 2025.

www.inspiredservices.org.uk



Speaking Up Together -
making Easy Read information.

nmc
**Nursing &
Midwifery
Council**

The nursing and midwifery regulator for
England, Wales, Scotland and Northern
Ireland. Registered charity in England and
Wales (1091434) and in Scotland (SC038362).

23 Portland Place, London W1B 1PZ

T 020 7637 7181

www.nmc.org.uk