

## NMC response to the proposed National Care Standards for Scotland principles

- The Nursing and Midwifery Council (NMC) is the professional regulator for nurses and midwives in the UK. We exist to protect the public. We do this by holding and controlling access to the register of qualified nurses and midwives and setting standards of education, training, conduct and performance for nurses and midwives. If an allegation is made that a registered nurse or midwife is not fit to practise, we also have a duty to investigate that allegation and, where necessary, take action to protect the public.
- We welcome the opportunity to respond to this joint consultation<sup>1</sup> by the Care Inspectorate and Healthcare Improvement Scotland (HIS) on proposals for overarching principles to be applied in the delivery of health, care and support services in Scotland. Given our remit, we have only provided views on the proposals from the perspective of a professional regulator.

## The proposed principles

- We welcome the proposed principles as being broadly consistent with provisions within our Code<sup>2</sup> and our profession duty of candour guidance<sup>3</sup> issued jointly with the General Medical Council.
- Our Code sets out the professional standards that nurses and midwives must uphold in order to gain and maintain registration to practice as a nurse or midwife in the UK. This is based around four key principles with supporting obligations: prioritise people; practise effectively; preserve safety; and, promote professionalism and trust. Where this is not the case, it may act as grounds for referral to us to consider whether the nurse or midwife's fitness to practise is impaired. This could result in a nurse or midwife being struck off our register in the most severe cases, preventing them from practising in the UK.
- Our joint guidance makes clear that when things go wrong, a nurse or midwife should inform the patient (or an appropriate other person such as a carer or family member as the case may be), apologise, offer an appropriate remedy to put matters right and fully explain the short and long term impacts of what has happened. In addition, professionals must be open and honest with colleagues, employers and relevant organisations on such matters and raise concerns where appropriate.
- The proposed principles for the new National Care Standards as drafted are consistent with our regulatory approach to nurses and midwives. We believe that it is key that there is consistency between the standards by which healthcare professionals' are held to account, the services they are expected to deliver, and

<sup>&</sup>lt;sup>1</sup> http://www.newcarestandards.scot/

http://www.nmc.org.uk/standards/code/

<sup>&</sup>lt;sup>3</sup> http://www.nmc.org.uk/standards/guidance/the-professional-duty-of-candour/

the entitlements and expectations of those in their care. If these areas are not consistent, then there will be a fundamentally disjointed and conflicting approach that will not deliver for patients and the public, and may impact upon public protection.

## Future standards under the proposed principles

We would only seek to highlight our point above on the need for consistency in any standards developed in the future under the proposed principles. We are mindful that this is more a matter for systems regulations.

## How the principles and standards will be used in the future

- Again, we are mindful that the application of any principles and guidance to health, care and support services is more a matter for systems regulators and providers. However, regulated healthcare professionals will play their part in ensuring they are adhered to. We would welcome clarity on the proposed method of application and enforcement for the overarching principles and supporting standards in the future, and the role that nurses and midwives would be expected to play in this.
- We would observe that the overview section of the consultation indicates that the Care Inspectorate may seek to use these overarching principles and supporting guidance to move to a more outcomes focused method of service provision inspection. This would be comparable to the approach in England operated by the Care Quality Commission<sup>4</sup> (CQC) who assess a service by key criteria (similar to principles) supported by outcomes focused standards. The CQC's key criteria are: Safe; Effective; Caring; Responsive; and, Well Led.

<sup>4</sup> http://www.cqc.org.uk/