

Open Council - 3 July 2024

MEETING
3 July 2024 09:30 BST

PUBLISHED
3 July 2024

Meeting of the Council

To be held from **09:30** on Wednesday 3 July 2024
Council Chamber, 23 Portland Place, London W1B 1PZ

Agenda

Sir David Warren
Chair of the Council

Matthew Hayday
Secretary

- | | | | |
|----------|--|-----------|--|
| 1 | Welcome and Chair's opening remarks | NMC/24/45 | 09:30 |
| 2 | Apologies for absence | NMC/24/46 | |
| 3 | Declarations of interest | NMC/24/47 | |
| 4 | Minutes of the previous meeting | NMC/24/48 | |
| | Chair of the Council | | |
| 5 | Summary of actions | NMC/24/49 | |
| | Secretary | | |
| 6 | Executive report | NMC/24/50 | 09:40-10:10
<i>(30 mins)</i> |
| | Chief Executive and Registrar/Executive | | |

Matters for decision

- | | | | |
|----------|---|-----------|--|
| 7 | Audit Committee Annual Report 2023-2024 | NMC/24/51 | 10:10-10:25
<i>(15 mins)</i> |
| | Chair, Audit Committee | | |
| 8 | Draft Annual Report and Accounts 2023-2024 | NMC/24/52 | 10:25-10:55
<i>(30 mins)</i> |
| | Chief Executive and Registrar | | |

Refreshments (25 mins)

10:55-11:20

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9	Draft Annual Fitness to Practise Report 2023-2024 Executive Director, Professional Regulation	NMC/24/53	11:20-11:50 (30 mins)
10	Annual Health and Safety Report 2023-2024 Executive Director, Resources and Technology Services	NMC/24/54	11:50-12:00 (10 mins)
11	Panel Member appointments, transfers and resignations Secretary	NMC/24/56	12:10-12:20 (10 mins)
12	The General Nursing Council for England and Wales Trust 12.1 The General Nursing Council for England and Wales Trust Report 12.2 Nomination of Council member trustee of the General Nursing Council Trust Vice Chair / Secretary	NMC/24/57	12:20-12:30 (10 mins)

Matters for discussion

13	Questions from observers Chair	NMC/24/58 (Oral)	12:30-12:45 (15 mins)
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Matters for information

14	Appointments Board Annual Report 2023-2024 Chair of Appointments Board	NMC/24/59	
15	Chair's action taken since the last meeting Chair	NMC/24/60	

CLOSE & LUNCH

12:45

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Meeting of the Council
Held on Wednesday 22 May 2024 in the Council Chamber, 23 Portland Place.

Minutes

Council

David Warren	Chair
Lindsay Foyster	Member
Deborah Harris-Ugbomah	Member
Claire Johnston	Member
Margaret McGuire	Member
Eileen McEaney	Member
Flo Panel-Coates	Member
Nadine Pemberton Jn Baptiste	Member
Anna Walker	Member
Lynne Wiggins	Member
Navjot Kaur Virk	Associate

NMC Officers

Andrea Sutcliffe	Chief Executive and Registrar
Helen Herniman	Executive Director, Resources and Technology Services
Ruth Bailey	Executive Director, People and Organisational Effectiveness
Miles Wallace	Deputy Director, Communications and Engagement
Alice Hilken	General Counsel
Tom Moore	Temporary Co-Executive Director, Resources and Technology Services
Paul Johnson	Deputy Director, Professional Regulation
John Lucarotti	Assistant Director, Regulatory Reform
Matthew Hayday	Secretary to the Council
Alice Horsley	Senior Governance Manager
Sharon Dawson	Governance Manager

For 7:

Gabriel Gonzato	Programme Director
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A list of observers is at Annexe A.

Minutes

NMC/24/34 Welcome and Chair's opening remarks, including Chief Executive and Registrar announcement

1. The Chair welcomed all attendees and observers to the meeting.
2. The Chair welcomed in particular:
 - a) Deborah Harris, new lay Council member, attending her first Council in role. Deborah was also Chair of the Audit Committee.
 - b) Tom Moore, Chief Information Officer, temporarily Co-Executive Director for Resources Technology Services, attending Council meetings in the short-term, alongside Helen Herniman.
 - c) John Lucarotti, Assistant Director, Regulatory Reform, attending the meeting on behalf of Matthew McClelland, who had sent his apologies.
 - d) Paul Johnson, Deputy Director, Professional Regulation, attending the meeting on behalf of Lesley Maslen, who had sent her apologies.
 - e) Yasmin Ullah, Appointments Board member, and Susan Young, Appointments Board member designate who were observing the meeting.
3. The Chair noted that the Council would also be welcoming Rhiannon Beaumont-Wood as registrant Council member for Wales from 1 June 2024.
4. The Chair highlighted that 5 May and 12 May respectively marked International Day of the Midwife and International Day of the Nurse – days to celebrate the many achievements of nursing and midwifery professionals on the NMC's register.
5. The Chair invited the Chief Executive and Registrar to provide a personal update.
6. The Chief Executive and Registrar informed the Council that a recent CT scan in connection with the accident in which she had broken her shoulder had identified the presence of a tumour. Whilst the tumour was almost certainly benign, it would require neurosurgery in the coming weeks, followed by a substantial period of recuperation. As a result, the Chief Executive and Registrar announced her difficult decision to resign, so that she could focus on her recovery. The Chief Executive and Registrar noted she would leave the NMC at the point of her surgery, which was likely to be around the end of June. The Chief Executive and Registrar wanted to take the opportunity to thank the nurses, support staff and doctors at University College Hospitals Foundation Trust (UCLH) for the brilliant care she had received in recent weeks.

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7. The Chief Executive and Registrar noted it had been a privilege to lead the NMC for the last five years, during which she had been inspired by the excellent work of colleagues across the organisation and the nurses, midwives and nursing associates on the register. An Interim Chief Executive and Registrar would be appointed while the NMC sought a permanent successor.

8. On behalf of the Council, the Chair thanked the Chief Executive and Registrar for all she had done for the NMC. She had led the organisation with enormous energy for over five years and much had been achieved during her tenure, which had included the difficult period during and after the Covid-19 pandemic. The Chair paid tribute to her unwavering and absolute commitment to supporting professionals on the register to provide safe, kind, and effective care. The Chair wished the Chief Executive and Registrar all the very best for her recovery. He noted how sorry colleagues were to hear her news, acknowledging that her decision to step down was difficult, but that health must come first.

NMC/24/35 Apologies for absence

1. Apologies were received from Sue Whelan Tracy, Council member, Sam Foster, Executive Director, Professional Practice, Lesley Maslen, Executive Director, Professional Regulation, Matthew McClelland, Executive Director, Strategy and Insight, and Edward Welsh, Executive Director, Communications and Engagement.

NMC/24/36 Declarations of interest

1. The following declarations of interest were recorded:
 - a) **NMC/24/40: Update on progressing our Fitness to Practise casework.** All registrant Council members and Associates declared an interest.
2. The interests were not considered material such as to require the individuals concerned to withdraw from the discussion.

NMC/24/37 Minutes of the previous meeting

1. The minutes of the meeting on 27 March 2024 were agreed as an accurate record and signed by the Chair.

NMC/24/38 Summary of actions

1. The Council noted progress on actions arising from previous meetings.

NMC/24/39 Executive report

1. The Chief Executive and Registrar introduced the report. Points highlighted included:
 - a) The Executive Report was now structured around the five Corporate Priorities agreed by the Council on 27 March 2024. Any comments about the new structure were welcomed.
 - b) Work on the culture review and investigations continued.
 - c) The Executive Director, Resources and Technology Services, was dedicating significant time to ensuring the NMC was prepared to receive the culture review and investigations reports and to implement the recommendations therein.
 - d) To allow the Executive Director, Resources and Technology Services to focus in this way, Tom Moore, Chief Information Officer, had been appointed temporarily as Co-Executive Director, Resources and Technology Services. The Co-Executive Director, Resources and Technology Services, had assumed responsibility for core Resource and Technology Services business areas apart from finance and audit, which the Executive Director, Resources and Technology Services would retain.
 - e) The NMC was supporting the implementation of Martha's Rule which, once fully implemented, would give patients, families, carers and staff round-the-clock access to a rapid review from a separate care team if they were worried about a person's condition. Whilst Martha's rule applied to England only, the fundamental principles were relevant to all four UK countries.
 - f) Professional Practice colleagues had been developing workstreams, milestones and timelines for the work to agree a framework to establish standards for the additional regulation of advanced practice, as well as to understand the transition requirements.

2. In discussion, the following points were noted:
 - a) Relating to evidence of widespread fraud at the Yunnik Computer Based Test (CBT) centre in Nigeria, an initial assessment of learning had been undertaken.
 - b) The NMC had also requested that internal audit review arrangements for international registrants. This demonstrated that whilst the NMC had strong processes for identifying individual instances of fraudulent applications to the register, there was more that could be done to strengthen the identification of organised, broader scale fraudulent activity.
 - c) An issue for discussion at the upcoming International Nurse Regulator Collaborative meeting was fraud in respect of

- international registration globally. The NMC would share its initial learning at the meeting.
- d) Pearson Vue had implemented improved security measures at its test centres and in accordance with the NMC's direction had ceased activity at all those test centres where there was insufficient assurance. Additionally, Pearson Vue was providing improved data and analytics, to allow for easier identification of issues such as improbably fast test times.
 - e) A full CBT lessons learned report would be presented to the Council later in 2024-2025, following the completion of the majority of hearings by independent panels related to registrants suspected of obtaining their test result fraudulently.
 - f) Relating to Ambitious for Change, the Employer Link Service was working with regional leads and employers to understand why there appeared to be disparities in referrals of some groups of professionals by employers. Workforce Race Equality (WRES) survey data was valuable to this work.
 - g) Employer Link Service (ELS) colleagues had also launched the 'Welcome to the UK programme' in 2023 for nurses and midwives joining the NMC register from outside the UK, which emphasised the NMC's support role, the importance of speaking up and how to revalidate.
 - h) Relating to Regulatory Reform, the NMC would continue to liaise with parliamentarians to emphasise the clear benefits of reform for protecting the public and reducing bureaucracy. The NMC had completed a significant amount of work in preparedness for Regulatory Reform and looked forward to being able to implement positive change, which it was hoped would not be deferred by any change of government.
 - i) Assurance was provided that the NMC was reviewing processes and managing risks in preparation for changes in procurement legislation.
 - j) Professional Practice colleagues were in the process of analysing responses from Approved Education Institutions (AEIs) regarding the identification of risks to the NMC's standards being met. The NMC was responding to either request further clarification on areas of concern or to seek additional assurance data. There had been some sickness absence in the Education Quality Assurance (QA) team, but there were efforts in place to strengthen leadership in the team to support the Executive Director, Professional Practice. The Council looked forward to receiving a full update at its next Open meeting on 3 July 2024.

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Performance against the NMC’s 2023-2024 corporate plan and budget, Financial Monitoring and Strategic Risk

3. The Co-Executive Director, Resources and Technology Services introduced the performance report for year-end 2023-2024 and the corporate risk exposure report. It was noted that despite some delays and uncertainties, the overall assessment at year-end was that there had been good progress made in delivering the outcomes set in the strategy for 2020-2025.
4. In discussion, the following points were noted:
- a) The plan for 2024-2026 builds on the existing plan for 2023-2025.
 - b) The need for continued attention and support in addressing issues to ensure effective education QA and delivery was a priority for 2024-2026 and would be discussed in further detail at the next Council meeting.
 - c) Relating to commitment 15 – create a modern and accessible website, whilst this was paused and there was no plan to undertake a full website replacement, there was a long-term programme of improvements planned for the website, focused on areas of greatest impact. This programme of improvements was welcomed, and it was hoped this would address issues raised about people not understanding the role of the NMC.
 - d) It would be helpful to understand the trends and Equality, Diversity and Inclusion (EDI) data relating to the Key Performance Indicators (KPIs) for ‘Fit for the Future Organisation’, for example relating to the percentage of new starters leaving within 6 months of joining.
 - e) It was positive that the commitment to implement the new Welsh Language Standards was successfully completed in the year.
 - f) A key theme among the significant issues managed by the NMC during 2023-2024 was risks posed by third party service providers. A review of procurement and performance management processes to mitigate third party risks was underway, with these processes being subject to internal audit later in the year.
 - g) There had been significant recruitment activity to allow for the capacity required to deliver the FTP 18 Month Plan across FTP teams and within the leadership team for the Professional Regulation directorate. To ease pressure, there had been over recruitment to Screening Decision-Making roles and an emphasis on experience and understanding of the role prior to appointment to improve retention rates.

- h) Relating to the Corporate Risk Exposure Report, the FTP caseload continued to be the highest rated red risk during the year. Progressing the Fitness to Practise casework safely, quickly and fairly remained the number one corporate priority for the NMC.
- i) People and culture was the theme of a compound risk review and would be kept under continuous review as part of the strategic risk approach in the year ahead.

5.

The Executive Director, Resources and Technology Services, introduced the financial monitoring report, noting that net position for the year, before unrealised movements on long term investments, was a £1 million deficit, compared to the planned £8 million deficit. This was driven in part by total income being £4.1 higher than expected, due to higher than anticipated international applications and registrant numbers. It was highlighted though that in the first month of 2024-2025 there had been a significant downward trend in the number of international applicants. Financial modelling showed the financial impact for the NMC would be a £1.5 million income reduction if this trend continued throughout the year.

6.

People Plan – Q4 dashboard

The Executive Director, People and Organisational Effectiveness introduced the NMC People Plan for Q4 2023-2024.

7.

In discussion, the following points were noted:

- a) The People and Culture Committee had received quarterly updates on the People Plan since the start of 2023-2024, alongside quarterly updates on the Equality, Diversity, and Inclusion (EDI) Plan since February 2024.
- b) The first year of the People Plan focused on stabilising core people services.
- c) Key areas of progress related to pay and reward, development for managers through the 'Management Essentials' programme, which was now available to all new managers, as well as work to refresh and modernise the suite of HR policies.
- d) Support had been provided in relation to the FTP 18 Month Plan, particularly with respect to recruitment.
- e) A new appraisal system, 'Ambitious Appraisals', had been introduced successfully. Completion rates for the latest round of Ambitious Appraisals had improved, with three directorates achieving a 100 percent completion rate, which was positive.

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- f) Whilst good progress has been made, there was still more work to do, for example relating to the amount of time taken to recruit, which would be addressed in collaboration with line managers.
 - g) To complement Ambitious Appraisals, there was the intention to incorporate 360-degree feedback as part of the appraisal process.
 - h) To support work relating to Safeguarding, there was readiness to start increasing Disclosure and Barring Service (DBS) checks for relevant roles across the organisation.
 - i) The NMC was now in the second year of the People Plan, which was focused on learning and development and leadership development.
 - j) Plans were in place to develop a Competency Framework as a foundation to support internal career progression.
 - k) As part of the Rising Higher programme, practical careers advice was provided relating to drafting CVs and applications as well as interview performance.
 - l) It was important to balance internal career moves and progression with ensuring that this did not negatively impact stability within teams, particularly in FTP. The revised recruitment policy specified a minimum period colleagues had to hold a role prior to being eligible to apply for a new role, which supported this balance.
 - m) Further work to establish career pathways was planned for year three of the People Plan. There was a richness and value in exploring career opportunities and secondments between healthcare regulators.
 - n) A wellbeing strategy would be published in 2024-2025 to address sickness absence and the support available to colleagues.
 - o) The EDI Plan would be refreshed in the coming months, with key areas of focus including the ethnicity pay gap and improving the representation of Black and Minority Ethnic colleagues at grade 6 and above.
 - p) Detailed EDI data for the NMC was published as part of a monthly EDI Dashboard.
 - q) In relation to turnover rates, acknowledgement that some turnover was healthy for the organisation, fostering innovation and productivity.
 - r) Colleagues were poised to consider and account for the learnings and recommendations emerging from both the People and Culture review and Ijeoma Omambala KC's investigations.

8. Summing up, the Chair highlighted that the Council would look forward to a detailed discussion relating to education QA at a future meeting. The Chair thanked the Executive for the comprehensive report.

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Action: Regarding themes in Education Quality Assurance currently affecting some AEIs, present an update to the Council.
For: Executive Director, Professional Practice
By: 3 July 2024

NMC/24/40 Update on progressing our Fitness to Practise casework

1. The Deputy Director, Professional Regulation introduced the update.
2. At 31 March 2024 the caseload was 5,944, an increase year-on-year, which was disappointing. The Deputy Director, Professional Regulation acknowledged the ongoing impact the number of cases held had on the people involved.
3. Two points to provide some context around the closing caseload numbers for 2023-2024 were highlighted:
 - a) The first was that the NMC’s referral rates went up in 2023-2024 by 14 percent, which was a significant rise to manage. This increase in referrals was also experienced by other health and care regulators.
 - b) The second was that notwithstanding the total caseload number, the timeliness at the early stages of the Fitness to Practise process had come down at both Screening and Investigations. This was a positive trajectory and pointed to the focus on progressing cases which had been with the NMC for the longest time.
4. The Deputy Director, Professional Regulation noted that engagement on the FTP 18 Month Plan continued with regular internal briefings with colleagues and external discussions with the Chief Nursing Officers and Chief Midwifery Officers, as well as with representative bodies, including the Royal College of Nursing, Royal College of Midwives, Unite and UNISON. This engagement would ensure there was understanding about the Plan and the increased capacity the NMC would have to deliver as a result of the additional investment.
5. In relation to governance for the Plan, the Programme Director noted that there was now a more effective approach to sharing information about risk and the reporting approach was designed to promote positive behaviours, with a focus on improvement. A prioritisation framework was being used to assess potential scope changes and adjustments to resource profiles.
6. In terms of benefits realisation, the metrics to use to assess whether initiatives were having the anticipated impact had been identified. Work was ongoing to refine baselines and targets, with a scorecard to be completed in July 2024.

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7. In discussion, the following points were noted:
- a) There were improvements in completion rates of hearings at the end of the year, with more than 70 percent of cases concluding first time round.
 - b) There was significant recruitment to FTP teams, particularly at the Screening stage of the process.
 - c) Three Council members attended monthly FTP-focused Executive Board meetings, to maintain regular oversight, and were focused on three key areas: quality, pace, and capacity.
 - d) The update paper set out the improved timeliness measures that were expected at each stage of the FTP process as the Plan delivered on a range of detailed operational metrics.
 - e) An update on the scorecard for the Plan would be presented to the Council on 24 July 2024. It would provide a simple way to monitor progress against the Plan.
 - f) Assurance that plans were in place and priorities set to ensure the publication of the culture review and investigations reports did not hamper progress on the FTP Plan.

8. The Chair thanked Professional Regulation colleagues for the comprehensive update. The Council would look forward to the next iteration of the update on 24 July, including the full scorecard for the Plan.

Action: Present an update on the scorecard for the FTP Plan to the Council.
For: Council.
By: Executive Director, Professional Regulation
 24 July 2024

NMC/24/41 Questions from observers

1. The Chair invited questions and comments from observers (see **Annexe B**).

NMC/24/42 Audit Committee report

1. The Council noted the report of the Audit Committee meeting on 24 April 2024.

NMC/24/43 Investment Committee report

1. The Council noted the report of the Investment Committee meeting on 29 April 2024.

NMC/24/44 Chair’s actions taken since the last meeting

1. There had been no Chair’s actions since the last meeting.

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Closing remarks

1. The Chair thanked all attendees for joining the meeting. The Chair explained that the Council hoped to move more meetings online in future to support transparency and openness.

Confirmed by the Council as a correct record:

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Annexe A: Observers

External Observers

Jane Beach	Lead Professional Officer Regulation, Unite
Peter Bates	Treasurer, NMC Watch
Devansh Chiralayath Njalil	Student Nurse, Swansea University
Baburaj	
Hollie Hinde	Community Nurse, Provide
Michael Humphreys	Scrutiny Manager, PSA
Harbi Kaur	Retired Nurse, NHS
Michelle Lyne	Professional Advisor Education, Royal College of Midwives
Daisy Fuen Ngong	Senior staff nurse, Hunters Moor Neurorehabilitation Centre
Paul Salmon	Health care, NHS
Yasmin Ullah	Appointments Board member
Susan Young	Appointments Board designate member

Press

Ella Devereux	Senior Reporter, Nursing Times
Alison Stacey	Senior Reporter, Nursing Standard

NMC staff observing

Roberta Beaton	Assistant Director, Planning Risk and Performance
Orla Mackinnon	Communications Assistant
Rupa Patel	Public support officer
Henzo Pereira	MI Analyst

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Annexe B
Observer questions – Council meeting 22 May 2024

Thanks and best wishes to Andrea Sutcliffe, Chief Executive and Registrar

1. Michelle Lyne, Professional Advisor Education, Royal College of Midwives thanked Andrea for her opening address and for sharing her personal news. On behalf of the Royal College of Midwives, Ms Lyne wished Andrea well.
2. Jane Beach, Lead Professional Officer Regulation, Unite, thanked Andrea for her willingness to engage with Unite during her tenure and noted that she hoped this openness would continue in the future relationship between the organisations. Ms Beach offered her best wishes to Andrea for a speedy recovery.

Thirlwall Inquiry

3. Harbi Kaur, a retired nurse, NHS, asked whether the NMC had any measures in place to collect questions from professionals on the register to be answered as part of the Thirlwall Inquiry.

In response, the Chief Executive and Registrar noted that the Thirlwall Inquiry was responsible for setting the questions and engaging with people to understand the questions that needed to be answered. The NMC was required to provide a witness statement in the Chief Executive and Registrar’s name and supporting evidence.

Support for registrants involved in the Fitness to Practise (FTP) process

4. Alison Stacey, Senior Reporter, Nursing Standard, asked what the NMC was doing to engage with registrants going through the FTP process, to ensure there was clarity about the process as well as support available from a wellbeing perspective. Ms Stacey noted that she had spoken to a number of registrants who had experience of the FTP process and reported that it had a severe, negative impact on them emotionally.

The Deputy Director, Professional Regulation noted in response that the NMC acknowledged the significant impact the FTP process had on individuals involved. A core priority of the FTP 18 Month Plan was to improve the quality of the experience of those involved in the process, including by signposting external organisations which could provide support. Regulatory Reform would also be valuable in reducing the legalistic and adversarial elements of the current FTP process.

A Council member added that the Council was aware of the importance of focusing on the human experience of all those involved in the FTP process. It was assured that work was ongoing to improve communications to ensure that those involved understood each stage of the process and were kept fully informed as to the status of their case.

The Chair of the Audit Committee noted that a comprehensive review of safeguarding in respect of the FTP process was planned, which would also

consider internal controls. Any feedback and themes would be reviewed by the Audit Committee and shared with the Council.

Fitness to Practise - 18 Month Plan

5. Peter Bates, Treasurer, NMC Watch, asked when a reduction in the FTP caseload number could be expected. Mr Bates queried whether the increase in referrals reflected growing dissatisfaction with health and social care services more generally. Mr Bates added that he was sorry to hear that Andrea was to leave the NMC.

The Chief Executive and Registrar responded to say that reducing the caseload and improving the timeliness of the process safely was the highest corporate priority for the NMC. In March 2024, the Council approved significant additional investment of about £30 million over the next two to three years to deliver the FTP 18 Month Plan. The Plan was not only focused on improving timeliness but also on the quality of customer experience – to ensure the process was person-centred and in line with the NMC’s values.

The Chief Executive and Registrar added that whilst the NMC Insight team was reviewing the reasons for the increased number of referrals, there was no definitive answer. It was not a coincidence that the increasing number of referrals was happening at the same time as a growing sense of dissatisfaction with health and social care services across all four UK countries.

The Chief Executive and Registrar thanked NMC Watch colleagues for all their help and support and constructive challenge over the last five years.

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Council

Summary of actions

Action requested:	Summarises progress on completing actions from previous Council meetings. The Council is asked to note the report.
Key background and decision trail:	This paper is a standing update to the Council for information on actions agreed at previous meetings.
Key questions:	Has appropriate progress been made in respect of actions agreed at previous meetings?
Annexes:	None.
Further information:	If you require clarification about any point in the paper or would like further information, please contact the author or the director named below.
	Secretary: Matthew Hayday Phone: 020 7681 5516 matthew.hayday@nmc-uk.org

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Minute	Meeting date	Title / theme	Status	Action	Action owner	Update	Due date
NMC/24/22	27 March 2024	Outcome of phase one of the advanced practice review	In progress	Form an advisory group for advanced practice comprised of Registrant Council members and NMC colleagues.	Executive Director, Professional Practice / Secretary	Not yet due.	24 July 2024
NMC/24/39	22 May 2024	Executive Report	In progress	Regarding themes in Education Quality Assurance currently affecting some approved education institutions (AEIs), present an update to the Council.	Executive Director, Professional Practice	Given the short period of time between the meeting on 22 May and 3 July, a full update regarding the themes in Education Quality Assurance currently affecting some AEIs will be presented to the Council on 24 July as part of the Executive Report.	3 July 2024 24 July 2024
NMC/24/40	22 May 2024	Update on progressing our Fitness to Practise casework	In progress	Present an update on the scorecard for the FTP Plan to the Council.	Executive Director, Professional Regulation	Not yet due.	24 July 2024

Key	
In progress	For items not yet due
Rescheduled	Where work has been deliberately replanned/rephased
Overdue	Unplanned delay to the work
Complete	Completed actions are reported once as Complete
Closed	Only use once an item is moved to the archive

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Executive Report

Action requested:	For discussion The Council is asked to discuss the Executive’s report on key developments during 2024-2025, up to 3 July 2024.	
Key questions:	Questions this paper addresses: <ol style="list-style-type: none"> 1. What key developments have been made in our work to deliver on our priority outcomes? 2. How have we responded to key developments in the external environment that have impacted professionals, the public, colleagues, stakeholders and the NMC? 	
Key background and decision trail:	<p>This paper provides an update on key developments since the last report presented to the Council on 22 May 2024.</p> <p>On 24 April 2024 we published our Corporate Plan which was approved by the Council on 27 March 2024.</p> <p>The Executive Report is now structured around the five agreed priority outcomes in the plan.</p>	
Annexes:	<p>The following annexes are attached to this paper:</p> <ul style="list-style-type: none"> • None 	
Further information:	<p>If you require clarification about any point in the paper or would like further information, please contact the author or the director named below.</p>	
	<p>Author: Clare Quinlivan Phone: 00 4524 1265 clare.quinlivan@nmc-uk.org</p>	<p>Executive Director: Edward Welsh Phone: 020 7766 478473 edward.welsh@nmc-uk.org</p>

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Executive Report

Discussion

Key overall developments at the NMC and in the wider landscape

Changes in the Executive team

- 1 Our Chief Executive and Registrar, Andrea Sutcliffe, has taken the difficult decision to stand down after five years at the helm of the NMC due to ill health. Her last day will be 4 July, ahead of her neurosurgery scheduled on 8 July. The Chair of Council has led a process to identify an interim Chief Executive and Registrar. Item 11 provides the background to that process and recommends the Council confirms the appointment of Dawn Brodrick CB. We will advertise for a permanent successor.
- 2 Our Executive Director of Strategy and Insight, Matthew McClelland, has also announced his plans to step down from the role at the end of September 2024, before taking on new challenges in 2025. We are now recruiting an Interim Executive Director of Strategy and Insight so there is a smooth transition.

General election

- 3 On 22 May, the day of the last Council meeting, the Prime Minister announced that a general election will be held on Thursday 4 July. Parliament was dissolved on 30 May and we are now in a pre-election period.
- 4 As the independent professional regulator for nurses, midwives and nursing associates it is important that we continue our core regulatory work during the pre-election period while remaining politically neutral and not influencing the campaign debate. We have produced guidance for colleagues and for our external communications and engagement work during the pre-election period. In line with this guidance, we are postponing the publication of our registration data report and annual leavers' survey findings until after the pre-election period.

Progressing fitness to practise (FtP) referrals in a safe, considerate and timely way

Panel member recruitment

- 5 Ensuring that nurses, midwives and nursing associates are fit to practise is fundamental for people to receive safe, kind and effective care. Our independent fitness to practise panels are key to this, making fair and timely decisions about an individual's practice. We are looking to recruit 85 panel Members and 55 panel Chairs to our independent fitness to practise (FtP) committees.
- 6 For both roles we are looking for a mix of lay and professional applicants and we are seeking applications from a diverse range of individuals to ensure that panels are reflective of the UK population and the professionals we regulate. We have partnered with Inclusive Boards, a recruitment agency that specialises in

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supporting organisations achieve their equality, diversity, and inclusion recruitment goals.

Build an inclusive, high-performance learning culture

Culture review and investigations

- 7 Following the announcement of the UK General Election, Nazir Afzal and Rise Associates asked us to delay the publication of their findings and recommendations from the review into the NMC's people and culture. They were concerned about influencing debate during the pre-election period. We have agreed to their request and are now planning to publish the report on Tuesday 9 July 2024. The delay in publication of the People and Culture report will affect the publication date of Ijeoma Omambala KC's investigations as Ijeoma will need to take into account the findings and recommendations of the People and Culture report. The revised timing has yet to be confirmed.

Public inquiries

- 8 We are contributing to several public inquiries and ensuring that, through doing so, we identify areas for learning and improvement in how we regulate.
- 9 We are engaging with the Thirlwall Inquiry. The preliminary hearing took place on 16 May 2024 and the Chair announced that the hearings would start on 10 September 2024. The Inquiry will indicate who it intends to call to provide oral evidence by the end of June. We continue to liaise with the Inquiry and disclose information as required. We are also monitoring Lucy Letby's retrial on one count of murder, which began on 10 June 2024.
- 10 The Executive Directors of Professional Regulation and Professional Practice gave oral evidence to the Muckamore Abbey Hospital Inquiry on 29 May 2024. We will be providing further information to the Inquiry as required.

Empowered to Speak Up service

- 11 We have launched an Empowered to Speak Up (ETSU) service for NMC colleagues. It aims to address some of the feedback from the 2023 Your Voice colleague survey and Workforce Race Equality Survey on raising concerns. The service is designed to empower NMC colleagues to feel confident in raising issues, sharing ideas, and expressing their opinions in the knowledge they will be respectfully listened to without fear. The aim is to foster a transparent and inclusive environment.
- 12 As part of this work, we have appointed an independent Freedom to Speak Up Guardian, Anuska Casas Pinto. Twelve NMC colleagues will serve as volunteer Ambassadors for the service. They will receive training and support from Anuska and our Equality, Diversity and Inclusion team. Recruitment for the ETSU volunteers is underway and we expect the Ambassadors to be appointed in July.

Contribute to the workforce strategies and support professionals in the four nations

Advanced practice review

- 13 It is essential that we collaborate with the public, professionals, and stakeholders about the regulation of advanced practice so that any proposed changes we make are in the best interests of people receiving care. Due to a busy summer period at the NMC, and to ensure we can give sufficient opportunity to input into the next phase of work, we have revised the timeline for this work since the May Council meeting.
- 14 Over the coming months, the advanced practice team will focus on the development of a unified UK wide advanced practice framework that involves a task and finish group consisting of key stakeholders from across the four countries. We are currently aiming to present this to the Council at the end of November 2024.
- 15 Once we have co-produced the framework, we will start engagement on our standards of proficiency and associated education programme standards and quality assurance processes. We are aiming to bring draft standards to Council in March 2025 in preparation for a public consultation in April/May 2025.
- 16 The independent stakeholder steering group for the project will hold its next meeting in September 2024.

Practice learning review

- 17 To inform our review of practice learning, we have recruited a public advisory group. The members are mainly representatives of charities and advocacy groups representing people who the professionals on our register care for, including people with disabilities, people with long-term conditions and people who use maternity services. We have also recruited members to our student advisory group, incorporating nursing and midwifery students from all four countries of the UK. Both groups will meet for the first time in July 2024.
- 18 Fieldwork is now underway for The Nuffield Trust's research as part of the project. They are conducting interviews and focus groups with stakeholders including professionals on the register, educators, students, the public and our partner organisations.
- 19 Our independent steering group, chaired by Professor Alex McMahon, will guide the independent research, and review any proposals before we submit them to our Council for consideration. They met on 3 June 2024 for an introduction to the work and to agree terms of reference.

Supporting professionals to embed our standards

20 We have mapped our standards of proficiency for midwives to the recommendations of the Ockenden and Kirkup reports and produced a resource for Directors and Heads of Midwifery. This resource includes a mapping tool which we will be asking the Directors and Heads of Midwifery to use to benchmark their organisation against. This tool will also encourage them to assess the experience of the student midwives who have practice learning placements at the service. We are encouraging Directors and Heads of Midwifery to discuss this with their Trust Board and/or Health Board to develop actions required to ensure the Standards of proficiency for midwives are fully adopted. We are also sending the resource to the Lead Midwives for Education.

21 We made minor updates to the language, structure, and layout of our standards of proficiency on 30 April 2024. We have not included any new content or additional regulatory expectations. The changes ensure that both our programme and proficiency standards are presented consistently in our new visual identity and improve their readability and overall accessibility.

Strengthen the integrity of the register

Education quality assurance

22 Our Education Quality Assurance (EdQA) process involves approving education institutions (AEI) and approving and monitoring nursing and midwifery programmes to ensure that students are being educated in line with our standards. We are progressing the transition between our outgoing EdQA service provider, Mott MacDonald, and our new provider, the Quality Assurance Agency (QAA). All approval and major modification visits for the academic year 2024-2025 will be led by QAA and take place from 7 October 2024. This means no new events will take place in September. We have written to AEIs to explain this, and we are working with them to ensure that there is no impact on intended start dates of programmes in 2025 as a result. Mott MacDonald will continue to undertake visits and activities currently booked for the 2023-2024 academic year and are expected to complete all reporting in line with this activity.

23 We are analysing the responses we received to the mandatory self-reporting letter we sent to AEIs in April 2024 which highlighted themes arising from our quality assurance monitoring work. Some AEIs have reviewed their programmes locally to assure themselves they are in line with our standards and have identified that some students may need to make up a shortfall in practice hours. We are engaging with individual AEIs where we know this is the case and will continue to work with them, so that we can actively support the resolution of local issues in a proportionate and safe way. A full update regarding the themes in Education Quality Assurance currently affecting some AEIs will be presented to the Council on 24 July as part of the Executive Report.

Computer based testing update

24 We are progressing the regulatory action we are taking in response to concerns about the Yunnik test centre in Nigeria.

- 25 Of the 48 registrant cases we referred to the Investigating Committee, we have held nine fraudulent entry hearings so far. Seven of them have concluded, all with the same outcome – the panels directed the NMC to remove the individuals from the register, having determined that their entries were fraudulently procured. In one case, fraudulent entry was not proven and the professional remains on the register. The remaining hearing is adjourned, meaning it will resume at a later date.
- 26 The other 39 hearings are in the process of being scheduled in accordance with all parties availability from the summer.
- 27 The Assistant Registrar (AR) has reviewed 145 applications from people who did their test at the Yunnik test centre, where we considered it was more likely than not that the applicant’s test result was obtained fraudulently.
- 28 They have refused 140 applications on the basis that the character requirements are not met. A significant number of these individuals are choosing to appeal or make a new application. The AR has admitted five applicants to the register having been satisfied with the reflections and responses.

Modernising our internal systems, tools, policies and processes

Safeguarding Board

- 29 We have established a Safeguarding Board, which reports straight into Executive Board, and will ensure a collective approach to safeguarding across the NMC and act as a decision-making group for managing safeguarding risk. Strengthening our approach will better protect the public from potential or actual harm, by making appropriate interventions based on up to date safeguarding best practice with both evidence and sound judgement. Safeguarding issues are most likely to arise in FtP and we have incorporated safeguarding into our FtP improvement approach.

Finance systems

- 30 We need to keep our finance systems up to date and on a modern, secure hardware platform. The migration of Open Accounts and eBis took place over the weekend 14 to 16 June 2024. The migration involved both a version upgrade and moving the system onto Azure.

Next Steps

- 1 The Council is invited to discuss the updates in the Executive report.

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Implications

The following were considered when preparing this paper:

Implication:		Location if in paper:	Content if not in paper:
Public protection/impact for people.	Yes	How our regulatory activities protect the public and the impact it has on them in terms of supporting nursing and midwifery professionals to provide safe, effective and kind care is captured throughout the paper.	
The four country factors and considerations.		All updates are relevant to all four countries.	
Resource implications including information on the actual and expected costs involved.	Not applicable.		None in addition to those within corporate budget.
Risk implications associated with the work and the controls proposed/ in place.	Not applicable.		
Legal considerations.	Not applicable.		No legal implications arising from this paper.
Midwives and/or nursing associates.	Yes	All updates are relevant to all professionals. Para 20 specifically relevant to midwifery.	

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Equality, diversity, and inclusion.	Yes	5, 7, 11, 12, 17, 21.	
Stakeholder implications and any external stakeholders consulted.	Yes	Stakeholder engagement is captured throughout.	
Regulatory Reform.	Not applicable.		No updates at this time.

Audit Committee’s Annual Report to Council 2023-2024

Action requested:	Provides Audit Committee’s annual report to the Council 2023-2024 For decision Recommendations at paragraph 40.
Key background and decision trail:	<p>This is the Audit Committee’s annual report for the period under review, 2023-2024. The Committee met during the financial year under review, and also met in April 2024. Year-end related meetings were held in June 2024 and are also included in this report.</p> <p>The remit of the Audit Committee is to support the Council and the Executive by reviewing the comprehensiveness and reliability of assurances on governance, risk management, the control environment and the integrity of financial statements and the annual report. This year, the four lines of defence are reflected in this report.</p> <p>The four lines of defence model is a well-established concept for helping to identify and understand the different contributions various sources of assurance can provide. These are:</p> <ul style="list-style-type: none"> • First line - Control frameworks and day-to-day controls: includes the overall risk management systems and control frameworks i.e. the way risks are managed and controlled day-to-day by those staff colleagues responsible for delivering specific objectives or processes • Second line - Management review: the way the organisation oversees the control framework so that it operates effectively • Third line - Internal audit: objective assurances provided independent of staff and management able to report direct to Audit Committee or Council. • Fourth line – External Audit: assurance from external independent bodies such as the external auditors and other external assurance providers.
Key questions:	1. Considering the key areas of focus and outputs from Audit Committee for 2023-2024, how has the committee demonstrated it has effectively discharged its responsibilities? Is this an adequate report for the year in question?

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Annexes:	None.	
Further information:	If you require clarification about any point in the paper or would like further information, please contact the author or the Audit Committee chair named below.	
	Secretary: Peter Clapp Phone: 020 7681 1289 peter.clapp@nmc-uk.org	Audit Committee Chair: Deborah Harris-Ugbomah FCA

Discussion

1. This report covers the period of 1 April 2023 to 31 March 2024 and reports on the activity and issues considered by the Audit and Committee for that financial year. The Council is asked to accept this Annual Report from the Audit Committee for the year 2023-2024.

Purpose of Audit Committee's Annual Report

2. The Council is required to maintain a sound system of internal controls to safeguard the quality and impact of its services, assets, and investments. The existence of the Audit committee, in conjunction with the other Council committees, provides an independent check on the organisation's system of governance for operational, corporate, and financial risk management. It also provides assurances to Council on the internal controls of the organisation as one of the means used to assure itself as to the quality and effectiveness of arrangements in these areas.
3. This report to the Council draws on our activities for the 2023-2024 financial year. This report's purpose is to:
 - set out how the Audit Committee satisfied both its current Terms of Reference plus any additional mandatory statutory or regulatory obligations;
 - supply all declarations and recommendations to Council as required of the Audit Committee

Introduction and overview

4. The Audit Committee is an independent source of review and reports on the NMC's attainment of effective governance, internal control systems and financial management and reporting processes. The Committee focuses on the framework for effective and appropriate quality, mitigating financial management and financial reporting risks, the robustness of corporate and operational internal controls, and other related assurances that underpin the delivery of the corporate strategy.
5. The Audit Committee's role is twofold:

- (i) to offer an independent consideration of the NMC’s systems (through an evaluation of the second line of defence) and an independent consideration of in-year reporting in effect in the organisation, and
- (ii) to oversee the relevant risk and control environment in which the NMC operates including quality, systems, controls and, processes which may have an impact on the regulator’s ability to meet its objectives. This includes ensuring the effectiveness of internal, operational and external audit functions, the adequacy of risk management processes and the internal control environment. The Audit Committee also seeks to satisfy itself that the Council is sufficiently informed to enable it to adequately review strategic issues of importance, and evaluate the effectiveness with which critical business risks and opportunities are addressed.

6. The Committee advises the Council as to the adequacy and effectiveness of the systems of internal controls, and its arrangements for governance processes. The Committee also offers recommendations for consideration prior to formal approval of the NMC’s Annual Accounts and Financial Statements, management’s Letter of Representation, and Annual Report narrative to the Financial Statements for the year.
7. In carrying out its duties the Committee draws on, but is not limited to, the work of internal and external audit, the work of management and third-party suppliers for quality, counter-fraud and cybersecurity, and other performance reports from management.

Committee conclusion on governance, risk management and control

8. Council should recognise that any assurance given is never absolute, and that assurance about the effectiveness of NMC’s internal controls remains a collective responsibility of Council. The highest level of assurance that can be provided is a reasonable assurance that there are no major weaknesses in risk management, control and governance processes (i.e. system of internal control) for all its corporate and services delivery.
9. The Committee has reflected on a range of issues including the Internal Audit annual opinion and report 2023-2024, the findings of the External Auditors and National Audit Office (NAO) and the views of the Chief Executive and Registrar, in their capacity as Accounting Officer.
10. In considering the Internal Audit annual opinion and report for 2023-2024, the Committee noted that whilst further enhancements to the internal control framework need to be done to ensure that it remains adequate and effective, they note that nothing has arisen which would be considered to be a significant control issue.
11. Notwithstanding the current whistleblowing and culture reviews, or changes in leadership within executive, at the date of this report, **the opinion of the Audit Committee is that the system of internal controls and processes for the year ended 31 March 2024 are adequate and effective and may be relied upon by the Council.**
12. The Council is also asked to receive and consider the recommendations at the end of this report.

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Information supporting the Committee’s 2023-2024 Opinion

13. Below is a summary of the information, significant issues considered, and key sources of assurance the committee relied upon when formulating its conclusion for the year 2023-2024:

1. Management Assurances

14. In 2023-2024, the NMC has taken some important regulatory actions as well as managed some significant organisational challenges. To support this work, the Committee received assurances from management for key areas of work during the year.

Quality:

15. Fraudulent activity at a third-party computer-based test centre: The Committee received regular updates on this issue, as well as commissioning and considering an internal audit into our overseas registration processes and considering a lessons learnt report. Both reports provided information that will help the NMC to strengthen controls in both this area and in contract management.

16. Strengthening our approach to learning: Developing our approach to corporate learning will bring significant benefits to the NMC, supporting us to more effectively learn from incidents, manage risk and improve the way we work. The Committee has scrutinised and supported the development of our approach, through regular updates on progress as well as an internal audit on our serious event review process.

17. Education quality assurance: The Committee considered learning from the issues at Canterbury Christ Church University relating to their nursing and midwifery programmes, as well as updates on work to review the education quality assurance function to ensure it is fit for the future.

Culture:

18. Whistleblowing concerns about aspects of our regulatory casework and our workplace culture: The Committee received regular updates on how these concerns are being investigated, with members of the Committee also acting as whistleblowing leads. The Committee is committed to ensuring any learning from the investigations is embedded, particularly for the NMC’s whistleblowing policy and process.

Internal controls and risk management

Operations:

19. Throughout the year the Committee has supported the further development of our risk management processes, including proposals to separate operational risks from strategic risks to form a new strategic register for 2024-2025 and to embed risk management within governance groups more clearly.

20. The Committee considered the annual review of risk management effectiveness in April 2024. The Committee is pleased that the review had rated three out of six of the

directorates as having substantial assurance. However, three directorates – Professional Practice, Professional Regulation and Communications and Engagement – had been rated as partial assurance. This was primarily due to low e-learning and appraisal rates. The Committee recognises that colleagues are focused on delivering key areas of work but it is important that colleagues are supported to complete training and appraisals. The Committee was pleased to note that so far appraisal rates for 2024 are higher than 2023. Overall, the Committee is content with the assurance provided by the annual review of risk management and notes that it aligns with the Internal Audit opinion.

Serious event reviews (SERs) and data breaches:

21. The Committee reviews SERs every six months. This included a full year report in June with analysis of trends and figures for incidents reported for the last 18 months.
22. Supporting the organisation to strengthen its approach to corporate learning has been a key area of focus for the Committee. The Committee is pleased that improvements have been made and looks forward to the launch of the new Log and Learn system later in the year.

Single tender actions (STAs):

23. The Committee reviews the STA log every six months as an indicator of the health of the procurement function. In 2023-2024, there were 10 STAs, against a target of no more than 12 STAs. The Committee is pleased with the strong performance in this area and congratulates the team on the improvements they have made in recent years.

2. Anti-fraud, bribery and corruption

24. The Committee received an update on anti-fraud, bribery, and corruption at each meeting. During 2023-2024, there was one instance of fraud – discussed earlier in this report at paragraph 15 - relating to fraudulent activity at a third-party computer-based test centre, Yunnik Technologies Test Centre, in Ibadan, Nigeria. No other instances of fraud, bribery or corruption were detected and there were no reported incidents or offences in the NMC's supply chain under the Modern Slavery Act 2015. The Committee reviewed and approved an updated Modern Slavery Statement in June 2024.

3. Whistleblowing

25. The Committee reviewed an update on the whistleblowing policy at each meeting and received assurances as to the overall progress from the Whistleblowing lead on Council. There had been four instances of the whistleblowing policy being used during 2023-2024:
 1. The first case was found to be a grievance and so was managed through our grievance process.

2. The second case related to concerns about aspects of our regulatory casework and our workplace culture. Independent investigations and reviews are underway. We are committed to learning from the findings and making sustainable changes.
3. The third case related to concerns about data and GDPR practices at the NMC. The investigation found that the concerns about data practices had already been recognised by the Executive and plans were in place to address these risks through the NMC's data strategy and road map. The issue raised on GDPR was reviewed by the Data Protection Officer and concluded that the areas of identified for improvement were unlikely to increase the risk to the security of personal data. The case was therefore closed.
4. The fourth case relates to an issue that is currently under investigation.

4. Internal audit

26. The programme for 2023–2024 consisted of seven internal audits. During the year it was agreed that the two of the planned audits would be re-scheduled to 2024–2025 to allow for internal audits on the following priority areas: Overseas Registration (Fraud Risk Assessment) and our Serious Event Reviews process. The Committee received the following Internal Audit opinions as set out below:

Internal Audit Assignment	Opinion	Recommendations		
		High	Med	Low
Financial Management	Substantial Assurance	0	0	2
Financial Control – Month end and Year end Finance Processes	Substantial Assurance	0	0	2
Change and Continuous Improvement	Reasonable Assurance	0	2	3
Coding and Reference Data – Approved Education Institutions	Partial Assurance	2	1	1
Serious Event Reviews	Partial Assurance	1	8	3
General Data Protection Regulations – Accountability	N/A as the assignment was advisory	0	2	0
Overseas Registration (Fraud Risk Assessment)	N/A	3	5	0
Total number of recommendations		6	18	11

27. The Committee noted that all recommendations had been accepted by management and that at year end there were only three actions from the SER audit in 2022-2023 that had not implemented. These were re-raised in the audit undertaken in 2023-2024.

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28. The Committee accepted the 2023-2024 Head of Internal Audit’s annual internal audit opinion which stated that: *“The organisation has an adequate and effective framework for risk management, governance and internal control. However, our work has identified further enhancements to the framework of risk management, governance and internal control to ensure that it remains adequate and effective.”*

29. The Committee reviews the effectiveness of internal audit services on an annual basis and the 2023-2024 annual review was considered on 12 June 2024. The Committee and the Executive agree that internal audit is functioning well and being used effectively to respond to issues as they emerge during the year. The Committee is also pleased that the areas that were identified for improvement in the previous review – around planning and process - had received improved feedback this year.

30. The Committee has approved the Internal Audit work programme for 2024–2025. It will continue to review the work programme and will amend the plan should new priorities emerge.

5. External Audit and NAO

31. The Committee approved the arrangements proposed by the External Auditors (HW Fisher) and the National Audit Office (NAO) for the external audit and certification of the NMC’s annual accounts for the year ending March 2024.

32. At its meeting in June 2024, the Committee reviewed the external auditors and NAO findings reports and letter of representation for 2023-2024. The Committee agreed to recommend these to Council for signing by the Chief Executive and Registrar as Accounting Officer.

33. Due to changes in International Standard on Accounting (ISA) 600 that will apply from 2024-2025, NMC will need to adopt a new auditing approach for 2024-2025. The Committee considered potential options at its meeting in June 2024 and its recommendation will be considered by Council on 24 September 2024.

Integrity of financial statements and Annual Report and Accounts 2023-2024

34. The Committee carried out its annual review of accounting policies and agreed no changes were necessary for 2023-2024. The Committee scrutinised the draft Annual Report and Accounts 2023–2024, including the Annual Governance Statement, in April and June 2024. The Committee agreed to recommend that the Council approves the 2023-2024 Annual Report and Accounts.

Fitness to Practise annual report 2023-2024

35. The Committee scrutinised the draft Annual Fitness to Practise Report 2023–2024 in June 2023. The Committee agreed to recommend that the Council approves the 2023-2024 Annual Fitness to Practice Report

Committee membership and attendance and evaluation

Attendance by committee members is summarised below:

Committee Membership	2023 – 2024 Related Meetings					Total Attendance	
	1 Nov 2023	28 Feb 2024	24 April 2024	12 June 2024	24 June 2024	No.	%
Derek Pretty*	P	P	P	N/A	N/A	3/3	100
Deborah Harris-Ugbomah**	N/A	N/A	N/A	P	P	2/2	100
Eileen McEaney	P	P	P	P	P	5/5	100
Sue Whelan Tracey	P	P	A	P	A	3/5	60
TOTALS	100%	100%	67%	100%	67%		

Key: P = Present, A = Apology received, X – Absent

* Derek Pretty’s term of office on Council came to an end on 30 April 2024.

** Following appointment to Council as a lay member, Deborah Harris became Chair of Audit Committee on 1 May 2024.

36. The Committee has welcomed the continued regular attendance of the Chief Executive and Registrar, as Accounting Officer, along with the Executive Director of Resources and Technology and Executive Director of People and Organisational Effectiveness. Other senior executives attend when presenting papers and when internal audit reports for their areas are being considered.

37. The Committee has also welcomed the consistent attendance of the Internal Auditors (RSM), the External Auditors (HW Fisher) and the National Audit Office (NAO) at its meetings. In keeping with good practice, the Committee has held meetings with each at appropriate junctures during the year without management being present.

38. The Committee is due to undertake its annual effectiveness review and key learnings will be reported to Council.

39. Given the information in paragraphs 13-38, the Committee believes it has complied with its terms of reference including the amendments agreed during the year and confirms it has evidenced how it discharged its responsibilities for period under review, the year ended 31 March 2024.

Committee recommendations

40. The Committee submits the following recommendations for Council consideration:

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1. the Council continue to keep the Audit Committee Terms of Reference under review, noting that future regulatory reform will impact the governance structure.
 2. the Council should continue to maintain conversations about risk appetite by including reference to risk profile and evidenced understanding via an 'assurance framework' as the conversation around risk continues to mature.
 3. the Council should consider how to increase evidence of its impact-focused conversations within the current scrutiny and assessment of NMC's performance, ensuring grip and pace of progress continues to be measured by key performance indicators relevant to corporate objectives
 4. In regards to the NMC's statutory reports, the Committee recommends:
 - a) the Council to agree that the Letters of Representation from HW Fisher and the NAO should be signed by the Chair and the Chief Executive and Registrar.
 - b) the Council to note that, subject to any findings between year end and the date of signing, the auditors, HW Fisher, have no expectation of requiring additional non-standard representations - beyond items outlined in Section 8 and 9 of the letter)
 - c) the Council to approve the 2023 – 2024 Annual Report and Accounts.
 - d) the Council to approve the 2023 – 2024 Annual Fitness to Practice Report.
41. The Committee has provided written reports to Council throughout the year and noted where recommendations have been taken forward. Assessment of progress on 2023-2024 recommendation/s to Council will be included in future annual reports.
42. The Committee and Executive Directors formally thank Derek Pretty for the considerable contribution he had made to the NMC, in particular his insight, expertise and collaborative approach to leading this committee as chair over the last year.
43. Appreciation and thanks from the committee to the outgoing CEO and Registrar, Andrea Sutcliffe, for her leadership over the last five years.
44. Finally, the committee notes with appreciation the hard work and continued focus of all senior management and staff who work to maintain our systems of internal controls.

Implications

The following were considered when preparing this paper:

Implication:		Location if in paper:	Content if not in paper:
Public protection/impact for people.	Not Applicable		
Safeguarding considerations	Not Applicable		

The four country factors and considerations.	Not Applicable		
Resource implications including information on the actual and expected costs involved.	Not Applicable		
Risk implications associated with the work and the controls proposed/ in place.	Not Applicable		The role of the Committee is to give assurance to Council that the NMC has effective governance, risk management and internal controls in place.
Legal considerations.	Not Applicable		
Midwives and/or nursing associates.	Not Applicable		
Equality, diversity, and inclusion.	Yes		Ensuring EDI is appropriately taken into account in the Committee's work remains a key focus.
Stakeholder implications and any external stakeholders consulted.	Not Applicable		
Regulatory Reform.	Not Applicable		

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Council

Draft NMC Annual Report and Accounts 2023-2024

Action requested:	<p>Presents the draft NMC Annual Report and Accounts for the year ended 31 March 2023 for approval, along with the letters of representation to the external auditors and National Audit Office (NAO).</p> <p>For decision</p> <p>Council is recommended to:</p> <ul style="list-style-type: none">• confirm that in its view the NMC is a going concern• authorise the Chair and Chief Executive and Registrar to sign the letter of representation to the external auditors on behalf of the Council members as Trustees (Annexe 3)• authorise the Chair and Chief Executive and Registrar to sign the letter of representation to the NAO (Annexe 4).• approve the Annual Report and Accounts for submission to Parliament.
Key background and decision trail:	<p>The Nursing and Midwifery Order 2001 (“the Order”) requires us to produce an annual report and accounts in the form determined by the Privy Council, and a strategic plan, to be laid in Parliament by the Privy Council. The annual report also serves as the trustees’ report to the Charity Commission for England and Wales and the Office of the Scottish Charity Regulator and must comply with Charity Commission requirements. The Order also requires us to produce a Fitness to Practise Annual Report, the draft of this is being considered by the Board at this meeting.</p> <p>Under the Privy Council’s Accounts Determination, the accounts must be prepared in compliance with the Charities Statement of Recommended Practice (SORP), and with the <i>Government Financial Reporting Manual</i> issued by HM Treasury (“FReM”) to the extent that those requirements clarify, or build on, the requirements of the Charities SORP.</p> <p>Responsibilities</p> <p>The Executive is responsible for preparing the Annual Report and Accounts in accordance with our statutory obligations. The People and Culture Committee is responsible for reviewing the Remuneration Report. The Audit Committee is responsible for reviewing the Annual</p>

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	<p>Report and Accounts before they are submitted to the Council for approval. The Council is responsible for approving the Annual Report and Accounts for submission to the Privy Council for laying in Parliament.</p> <p>Decision trail</p> <p>Audit Committee reviewed the draft Annual Governance Statement on 24 April 2024 (AC/24/27)</p> <p>People and Culture Committee reviewed the draft Remuneration Report on 29 April 2024 (PCC/24/16c)</p> <p>Executive Board reviewed the draft of the Annual Report and Accounts on 29 May 2024 (EB/24/88a), and subject to minor amends, agreed it should be recommended to Audit Committee for recommendation to Council.</p> <p>Audit Committee reviewed the draft of the Annual Report and Accounts on 12 June 2024 (AC/24/41), and considered the audit completion reports and letters of representation on 24 June 2024 (AC/24/50-AC/24/51). The Committee agreed that:</p> <ul style="list-style-type: none"> • the Annual Report and Accounts should be recommended to Council • the Council should authorise the Chair and Chief Executive to sign the draft letters of representation
<p>Key questions:</p>	<ol style="list-style-type: none"> 1. Does the report provide readers with the right information to understand the organisation, our purpose, the key risks to the achievement of our objectives and our operating and financial performance during the year? 2. Are the draft accounts consistent with members' knowledge and expectations of our finances from their review of our management accounts and budgets?
<p>Annexes:</p>	<p>The following annexes are attached to this paper:</p> <ul style="list-style-type: none"> • Annexe 1*: Annual Report and Accounts 2023-2024 • Annexe 2: Going Concern • Annexe 3: Letter of representation to the external auditors • Annexe 4: Letter of representation to the NAO <p>*Please note that Annexe 1 is not included in the public Council papers. This is so that we comply with strict rules not to publish the content of the report before it is submitted to Parliament.</p>

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Further information:	If you require clarification about any point in the paper or would like further information, please contact the author or the director named below.	
	Author: Peter Clapp peter.clapp@nmc-uk.org Tony Phillips tony.phillips@nmc-uk.org	Secretary to the Council: Matt Hayday matt.hayday@nmc-uk.org Executive Director: Helen Herniman helen.herniman@nmc-uk.org

Discussion

- 1 The draft Annual Report and Accounts 2023–2024 are at Annexes 1 and 2.

Annual Report

Foreword, Our role and Performance review sections

- 2 The performance review needs to focus on impact and describe how we have made a difference for the professionals on our register, the public and other stakeholders. It should provide readers of the report with the right information to understand the organisation, our purpose, the key risks to the achievement of our objectives and our operating and financial performance during the year. Infographics will be used in the final designed version, similar to last year.

Strategic Plan 2024-2026

- 3 The strategic plan section is a summary of our corporate plan for 2024-2026 which was approved by Council in March 2024. The NMC is required by the Order to publish and lay before Parliament a strategic plan.

Financial review

- 4 The financial review section includes a high level summary of the accounts, including key variances compared to 2022-2023 and to budget and a summary of the reserves and investment policies.

Remuneration Report

- 5 The report covers Council member remuneration and expenses; Executive ('Senior Key Personnel') reward and expenses; employee reward; and gender, disability and ethnicity pay gap information. Individual disclosures have been shared with relevant individuals.

Annual Governance Statement

- 6 This section should provide the reader with a clear understanding of the dynamics and control structure of the organisation and an assessment of the principal risks to corporate objectives. It must include key disclosures relating to governance, risk, and control, such as information security lapses. To ensure it meets requirements it has been drafted in line with NAO guidance.

Accounts

- 7 Particular aspects of the accounts to note are:

- 7.1 The better financial position relative to budget shown by the £2.1 million net position taking income and expenditure into account, compared to a planned deficit. This also results in better than planned free reserves. This is addressed in our financial review.
- 7.2 The provision related to the outcome of the Employment Tribunal case. This has increased by £0.6 million to £3.1 million compared to last year, reflecting the additional year of potential costs that have accrued (note 18). This provision, as well as being of significant size, reflects some key assumptions, for instance with regard to the basis of calculation of holiday pay and the numbers of past years we need to provide for. We have taken internal and external legal advice on these issues and believe we have made appropriate judgements based on these.
- 7.3 The unrealised gain of £3.2 million on our long-term investments shown on our statement of financial activities (SoFA), along with the total value of these investments of £38.6 million. These are discussed as part of the financial review.
- 7.4 The defined benefit pension scheme valuation for the purposes of these accounts being in surplus at end of the financial year as was the case last year. The valuation itself contains a significant number of actuarial assumptions (for instance around life expectancy) which we have had reviewed by independent actuaries and which are reviewed by our auditors. In line with our legal advice we are also of the view that return of the calculated surplus to the NMC is a very unlikely. The future management of the current surplus remains with the pension trustees who are independent of the NMC. In line with FRS102 this means, as last year, we have applied an asset ceiling adjustment to bring the net position on the pension scheme to neither a deficit nor a surplus.
- 7.5 Employee information at note 9. This shows a 9 percent increase in staff costs, a 5 percent increase in the average numbers of colleagues and a 28 percent increase in higher paid colleagues earning more than £60,000. These increases reflect further recruitment, for instance to support improvement in our fitness to practise (FtP) operations, including the appointment of more senior staff in some areas, and annual pay rises.

Going concern

- 8 A key dimension of our auditors' opinions on our annual accounts is based on an assessment by us as to whether we are a going concern. Broadly this is an assessment, owned by the Executive, the Audit Committee and Council, that we have the financial resources aligned with plans sufficient to enable us to continue to operate for at least the next 12 months.
- 9 Our review of going concern at annexe 3 concludes that the NMC is a going concern, despite our planned deficit, since we have adequate free reserves and cash. Our assessment also concludes that any likely resource impact resulting from events not anticipated at the time the budget was can be contained within our existing resources including our contingency of £1.5 million. It also draws attention to the sharply reduced level of free reserves anticipated by the end of 2026-2027 as a result of our significant capital investment in technology as well funding to support our FtP operations.
- 10 **Recommendation: The Council is recommended to confirm that in its view the NMC is a going concern.**

Letters of representation

- 11 At its meeting on 24 June 2024, the Audit Committee considered the draft External Audit Findings Report 2023–2024 and draft letter of representation issued by the independent auditors (**Annexe 3**). The Committee also considered the NAO Completion Report 2023–2024, including the draft letter of representation to the NAO (**Annexe 4**). The Committee was content to recommend to the Council that it authorise the Chair and Chief Executive to sign the draft letters of representation. A verbal update will be given at the meeting if there are any changes to the draft letters of representation.
- 12 **Recommendation: Subject to any updates at the meeting, the Council is recommended to:**
- 12.1 **authorise the Chair and Chief Executive to sign the letter of representation to the external auditors on behalf of the Council members as Trustees (Annexe 3)**
 - 12.2 **authorise the Chair and Chief Executive to sign the letter of representation to the NAO (Annexe 4).**
- 13 The Audit Committee reviewed the Annual Report and Accounts on 12 June 2024 and 24 June 2024 and its comments have been reflected in the draft. The Committee recommends the Annual Report and Accounts to the Council for approval.
- 14 **Recommendation: Subject to any comments, the Council is invited to approve the Annual Report and Accounts for submission to Parliament.**

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Next Steps

- 15 Subject to the Council’s approval and the post balance sheet review, the Annual Report and Accounts will be signed, electronically, by the Chair of Council and by the Chief Executive and Registrar, as Accounting Officer.

- 16 Having been signed by the NMC and auditors, the report can then be laid in Parliament, along with the Annual Fitness to Practise Report. However, given the General Election, Parliament has been dissolved and we will not be able to lay the reports until after the State Opening of Parliament. This is due to take place on 17 July and, following discussions with the Office of the Privy Council and the National Audit Office, we intend to lay the Annual Report and Accounts and the Fitness to Practise Annual Report before Parliament on 18 July 2024. We will continue to monitor the situation and if the State Opening of Parliament is delayed, we will update the Council.

- 17 The Annual Report and Accounts will also be submitted to the Charity Commission for England and Wales and the Office of the Scottish Charity Regulator in advance of their respective deadlines of 31 January 2025 and 31 December 2024.

Communications

- 18 Once laid before Parliament, the Annual Report and Accounts will be published on the NMC website, along with the Annual Fitness to Practise Report. The Reports will also be published in Welsh. We are also producing an *Easy Read* version.

- 19 After submission to Parliament, the Reports will be sent out electronically to each of the devolved administrations, our stakeholders and partners across the four countries, to those we work with and internally to colleagues.

Implications

The following were considered when preparing this paper:

Implication:		Location if in paper:	Content if not in paper:
Public protection/impact for people.	Yes	Para. 2	Our Annual Report and Accounts set out how we fulfil our regulatory role to protect the public.
Safeguarding considerations	Yes		The Annual Report includes a section on safeguarding.
The four country factors and considerations.	Yes		The Annual Report must reflect work across the four nations.

Resource implications including information on the actual and expected costs involved.	Yes		Resources to deliver the Annual Report and Accounts are already included in relevant budgets.
Risk implications associated with the work and the controls proposed/ in place.	Yes		Failure to comply with our statutory reporting requirements could compromise trust and confidence in the NMC.
Legal considerations.	Yes		The Annual Report and Accounts have been prepared in accordance with the NMC's legal obligations.
Midwives and/or nursing associates.	Yes		Our Annual Report and Accounts reflect our work on midwifery and nursing associates.
Equality, diversity, and inclusion.	Yes		As required by the Order, our Annual Report must describe the arrangements we have put in place for complying with our obligations and adhering to good practice in relation to equality and diversity. As usual, the report will be published in both English and Welsh.
Stakeholder implications and any external stakeholders consulted.	Yes		Once the Council has approved the Annual Report and Accounts and following submission to and publication by Parliament, it will be distributed (electronically) to key stakeholders as well as being placed on the NMC website.
Regulatory Reform.	Yes		We know that regulatory reform will require us to produce reports for each of the devolved nations. The governance team is taking forward with colleagues how we can develop our approach to meet additional reporting and data requirements.

Review of going concern

Issue

1. As part of its review of the annual report and accounts each year, the Executive Board, Audit Committee and then Council need to consider whether the NMC is a 'going concern'. The standard letters of representation to both our auditors, HW Fisher and the NAO, normally include Council's confirmation that the NMC is a going concern. Going concern is also addressed within the accounts themselves as part of Note 1.

Context

2. This note and the attached schedules represent the information that our Executive Board, Audit Committee and Council need to consider in providing the view as to whether the NMC is a going concern.
3. Going concern is always a consideration for auditors since the financial statements of any organisation are normally prepared on the basis that it will continue to operate for the foreseeable future – so is a 'going concern'. The 'foreseeable future' in this context can be taken to be a period of at least 12 months from the end of the reporting period and typically at least a year after the accounts are signed.
4. The focus on going concern by auditors for all organisations has recently increased. Although inflation has reduced in recent months, there continues to be concern about economic and financial stability being driven by factors such as the war in Ukraine, the potential for the conflict in the Middle East to widen and uncertain UK economic performance. There is also focus since we are working towards a budget that sees us operating to a deficit for the next two years and since the Department of Health and Social Care (DHSC) has been consulting on reform of the health regulators in the UK.

Discussion

5. The Executive's view is that our position as regards going concern is a strong one. The evidence to support this is set out below.

Budget

6. Our income, nearly all derived from registrant fees, is very reliable certainly in the short term with registrant numbers continuing to increase.
7. Although we have set a nearly £18 million deficit budget for 2024-2025 (see **schedule 1** to this note), an indicative deficit budget of almost £10 million for 2025-2026, and an indicative small surplus budget of £0.3 million for 2026-2027, this needs to be taken in the context of the strong financial position shown in the

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draft accounts at 31 March 2024. These show total reserves of £79 million and free reserves of £42 million. Actual free reserves at that point are slightly higher than the £36 million forecast at the time of the budget agreed by Council in March 2024. Our cash in hand and cash equivalents was over £62 million at the same date, with readily cashable stock market investments representing a further £39 million.

8. While not bearing directly on the view as to whether the NMC is a going concern over the next 12 months, we should note that under current plans, by March 2027, our free reserves are expected to be about £10 million (down from £42 million currently) and our cash and cash equivalents around £29 million (down from £62 million now). Forecast free reserves of £10 million at March 2027 are slightly higher than the £4 million anticipated when the budget was agreed in March 2024 due to the actual free reserves being higher than anticipated at that date. These levels for free reserves and cash are both within the limits set by our reserves policy agreed by Council in March 2024. Nevertheless, whilst providing some room to manoeuvre, this does point to the need for us to continue our very careful management of our resources.
9. Our management accounts for the first month, to 30 April 2024, at **schedule 2**, show that since 31 March 2024 total reserves and free reserves have not moved significantly. While we expect reserves to fall during the year in line with the deficit budget set for 2024-2025, there is plenty of capacity to do this without any implications for going concern. Although we are incurring some extra costs for work with respect to the computer-based testing issue in Ibadan Nigeria, we expect these will be contained within existing budgets, including our £1.5 million contingency. We are not currently expecting any major variance to our budget for the rest of the year.
10. We also maintain strong systems of financial management with monthly reports to the Executive Board and quarterly financial reports to Council. One aspect of this will be to assess the impact, and our response to it, of the inflationary pressures. In particular, we have made assumptions around falling inflation in later years, in line with Bank of England forecasts, that we will need to monitor. However, we have sufficient free reserves and cash available to manage current inflationary pressures without any impact on our assessment of going concern.

Regulatory Reform

11. On the issue of regulatory reform on which the DHSC has completed consultation exercises in 2021 and 2023 and passed legislation in the form of the Anaesthesia Associates and Physician Associates Order 2024, there is a clear presumption that the regulatory activities that we undertake will continue. In addition, there is no expectation that there will be changes to our regulatory activity enacted in law before April 2025 at the earliest.

Attached:

Schedule 1: Budget 2024-2025, indicative plans for later years

Schedule 2: Draft management accounts at 30 April 2024

Schedule 1: Budgeted income and expenditure, cashflow, balance sheet

As approved Council March 2024 but with 2023-24 actuals replacing forecast and with budget/forecast reserves adjusted accordingly

Table 1 Income & expenditure £ million	Actual 2023 – 24	Budget 2024 - 25	Indicative Budget 2025 - 26	Indicative Budget 2026 - 27
Income				
Registration fees	96.1	100.5	103.8	111.7
Other	11.1	9.2	7.9	7.2
Total Income	107.2	109.7	111.7	118.9
Expenditure				
<u>Core business</u>				
Professional Regulation	56.2	65.0	57.6	52.1
Resources & Technology Services	18.4	21.5	21.7	21.9
People & Organisational Effectiveness	11.9	12.5	12.5	12.5
Professional Practice	5.7	7.4	6.6	6.0
Strategy & Insight	4.1	4.4	4.5	3.9
Communications & Engagement	3.3	3.5	3.5	3.4
Directorate - Core Business Expenditure	99.6	114.3	106.3	99.8
<u>Corporate</u>				
Depreciation	3.8	4.1	4.2	4.4
PSA Fee	2.1	2.1	2.1	2.1
Reward Reserve	-	1.9	4.2	8.3
Apprenticeship Levy	0.3	0.3	0.3	0.3
General Contingency	0.5	1.5	1.5	1.5
Other *	0.5	1.1	1.1	1.1
Total Corporate Expenditure	7.2	11.0	13.5	17.7
Total Core Business	106.7	125.3	119.8	117.5
Programmes & Projects including capital investment (see table 2)	9.8	9.8	6.0	6.7
Subtotal including capital investment	116.5	135.1	125.8	124.2
Capital Investment	8.3	7.8	4.6	5.6
Subtotal excluding capital investment	108.2	127.3	121.2	118.6
Unrealised Gains/(Losses)**	3.2	-	-	-
Net Surplus/(Deficit) excluding capital investment	2.2	(17.6)	(9.5)	0.3
Total Reserves	78.9	61.4	51.8	52.1
Free Reserves	42.1	20.9	10.9	10.00
Note: Figures are subject to rounding				
*Including pension review 2023-24 only and panel future holiday pay throughout. Some costs relating to vacancy rate assumptions in an earlier draft seen by Council have now been allocated to Professional Regulation Directorate.				
** Unrealised gains/(losses) reflect the change in the value of our investment portfolio since the beginning of the year after taking account of income from it. We do not budget or forecast for either gains or losses.				

Table 2 Forecast/Budget Cashflow £ million	Actual 2023 - 24	Budget 2024 - 25	Indicative Budget 2025 - 26	Indicative Budget 2026 - 27
Cashflow from operating activities				
Surplus/(deficit)	(1.0)	(17.6)	(9.5)	0.3
Adjustment for non-cash transactions	3.8	4.1	4.2	4.4
Interest/Dividend income from Stock Market Investments	(0.8)	(1.1)	(1.0)	(0.9)
(Increase)/decrease in current assets	(0.7)	(0.1)	-	-
Increase/(decrease) in liabilities	2.5	(1.9)	1.2	1.9
Net cash inflow/(outflow) from operating activities	3.8	(16.4)	(5.1)	5.7
Cashflow from investing activities				
Capital investment	(8.3)	(7.8)	(4.6)	(5.6)
Cashflow from financing activities*				
Stock Market Investments	-	-	-	-
Net cash inflow/(outflow) from financing activities	-	-	-	-
Net increase/(decrease) in cash & cash equivalent for the year	(4.5)	(24.2)	(9.7)	0.1
Cash & fixed term deposits at beginning of year	67.2	62.7	38.5	28.8
Cash & cash equivalent at end of year	62.7	38.5	28.8	28.9

Note: Figures are subject to rounding

*Income from stock market investments are assumed to be reinvested so not a source of cash.

Table 3 Forecast/Budget Balance Sheet £ million				
	Actual 2023 - 24	Budget 2024 - 25	Indicative Budget 2025 - 26	Indicative Budget 2026 - 27
Non-current assets				
Tangible and Intangible Fixed Assets	36.8	40.5	40.9	42.1
Stock Market Investments*	38.6	39.6	40.6	41.5
Total non-current assets	75.4	80.1	81.5	83.6
Current Assets				
Cash	62.7	38.5	28.8	28.9
Debtors	4.5	4.6	4.6	4.6
Total current assets	67.2	43.1	33.4	33.5
Total Assets	142.6	123.2	114.9	117.1
Liabilities				
Deferred Income	(59.9)	(60.1)	(61.4)	(63.3)
Other creditors, accruals, provisions	(3.8)	(1.7)	(1.7)	(1.7)
Total Liabilities	(63.7)	(61.8)	(63.1)	(65.0)
Net Assets excluding pension liability	78.9	61.4	51.8	52.1
Pension Liability**	-	-	-	-
Net Assets, Total Reserves	78.9	61.4	51.8	52.1
Free Reserves (Net Assets less Tangible and Intangible Fixed Assets)	42.1	20.9	10.9	10.0

Notes: Figures are subject to rounding

* The increase in stock market investments reflects expected investment income being reinvested rather than any assumptions about capital growth or deficit which is assumed to be nil.

** Our pension liability is subject to an independent actuarial review of our Defined Benefit pension scheme at the year-end for accounting purposes. Following the valuation at the time, the pension scheme was shown in our annual accounts at 31 March 2023 as being as neither an asset nor a liability at that date and that position is reflected in our forecast and budget. It is possible that the position may change in future.

Schedule 2
2024-25 summary management accounts two months to end May 2024

Nursing and Midwifery Council Financial Monitoring Report					
£'m	May 2024 Year-to-Date				Full Year
Income	Actual	Budget	Var.	Var. (%)	Budget
Registration fees	16.5	16.5	-	-	100.5
Other	1.5	1.5	-	-	9.2
Total Income	18.0	18.0	-	-	109.6
Total expenditure excluding capex	19.4	20.2	0.8	4%	127.4
Net income	(1.4)	(2.2)	0.8	(37%)	(17.8)
Unrealised Gains/(Losses)	(0.3)	-	(0.3)	-	
Net Surplus/(Deficit) excluding capex	(1.7)	(2.2)	0.5	23%	(17.8)
Free Reserves	39.5	33.45	6.1	18%	14.7

Note: Free reserves are calculated as total reserves less tangible and intangible fixed assets. The variance from budgeted free reserves reflects both in-year performance and actual opening free reserves for 2024-25 being higher than forecast at the time the budget was prepared.

Balance Sheet (£'m)	Mar-24	May-24	Change	Change %
Fixed Assets				
Tangible and Intangible Fixed Assets	36.8	37.6	0.8	2%
Investments	38.6	38.3	(0.3)	(1%)
Total Fixed Assets	75.4	75.9	0.5	1%
Current Assets				
Debtors	4.5	3.4	(1.1)	(33%)
Fixed notice bank deposits	54.8	48.2	(6.6)	(14%)
Cash	7.9	7.9	-	-
Total Current Assets	67.2	59.5	(7.7)	(13%)
Total Assets	142.6	135.5	(7.1)	(5%)
Liabilities				
Creditors	(59.9)	(54.5)	5.4	(10%)
Provisions	(3.9)	(3.9)	-	-
Total Liabilities	(63.7)	(58.3)	5.4	(9%)
Net Assets	78.8	77.1	(1.7)	(2%)
Total Reserves	78.8	77.1	(1.7)	(2%)
Free Reserves	42.0	39.5	(2.5)	(6%)

NB figures are subject to rounding.

LETTER OF REPRESENTATION

**Nursing and Midwifery Council
23 Portland Place
London
W1B 1PZ**

DATE: _____

HW Fisher LLP
Chartered Accountants
Acre House
11-15 William Road
London NW1 3ER

Your ref: CAR/JJT/N79700

Dear Sirs

FINANCIAL STATEMENTS AND AUDIT FOR THE YEAR ENDED 31 MARCH 2024

This representation letter is provided in connection with your audit of the financial statements of the Nursing and Midwifery Council (NMC) for the year ended 31 March 2024 for the purpose of expressing an opinion as to whether the financial statements give a true and fair view of the results and financial position of the NMC in accordance with the requirements of the Charities Act 2011 and the Charities and Trustee Investment (Scotland) Act 2005 and regulation 8 of the Charities Accounts (Scotland) Regulations 2006 as well as in accordance with the United Kingdom Accounting Standards (United Kingdom Generally Accepted Accounting Practice, including Financial Reporting Standard 102).

Financial Statements

1. We acknowledge our responsibility, as set out in the terms of your engagement dated 18 January 2022, for preparing financial statements in accordance with the Charities Act 2011 and United Kingdom Accounting Standards (United Kingdom Generally Accepted Accounting Practice), which give a true and fair view of the financial position of NMC as of 31 March 2024, of its incoming resources and application of resources, including its income and expenditure, for the year then ended and for making accurate representations to you.
2. Significant assumptions used by us in making accounting estimates, including those measured at fair value, are reasonable.

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3. We have no plans or intentions that may materially alter the carrying value and where relevant the fair value measurements or classification of assets and liabilities reflected in the financial statements.
 4. We have disclosed all known actual or possible litigation and claims whose effects should be considered when preparing the financial statements and these have been disclosed in accordance with the requirements of accounting standards.
 5. Related party relationships and transactions have been appropriately accounted for and disclosed and we are not aware of further related party matters that require disclosure.
 6. All events since the balance sheet date which require disclosure or which would materially affect the amounts in the financial statements have been adjusted or included in the financial statements.
 7. We confirm the financial statements are free of material misstatements, including omissions. We believe that those uncorrected misstatements identified during the audit (as set out in Appendix 1 to this letter) are immaterial both individually and in aggregate to the financial statements as a whole
 8. We confirm that the NMC has considered its cashflow forecasts for the foreseeable future, being a minimum of twelve months from the date of approval of the financial statements, and has a reasonable expectation of adequate resources to continue in operation for that period. Thus the going concern basis has been adopted in preparing the financial statements. We confirm that the disclosures in the accounting policies are an accurate reflection of the reasons for our consideration that the financial statements should be drawn up on a going concern basis.
 9. We confirm the following additional matters relevant to the financial statements:

a. **Panellists Provision**

We are satisfied that the provision of £3.1m in relation to unpaid holiday pay and employer minimum pension contributions for all existing panel members correctly reflects the professional and legal advice that we have received and our view in terms of the likely liability.

The Somerville judgement awarded panel members backdated holiday pay to the beginning of their contracts. We have considered whether panel members other than Mr Somerville are only entitled to backdated holiday pay for a period of two years. In our view, in light of the Somerville judgment itself, it is likely that such a position would be challenged by panel members resulting in further litigation. It was therefore considered that it was not possible at this stage to confirm that we would adopt this position, or that if adopted it would be upheld by the Employment Tribunal. Consequently, we consider that the liability should be based on the principles set out in the Somerville judgment itself.

b. Pensions

The surplus relating to NMC's Defined Benefit Pension Scheme as calculated in accordance with FRS102 of £14.5m has not been recognised in the financial statements. In our view, having considered the trust deed and rules relation to the scheme and having taken both legal and actuarial advice, we do not consider that NMC has an unconditional right to the surplus.

Information provided

10. All accounting records and relevant information have been made available to you for the purpose of your audit. We have provided to you all other information requested and given unrestricted access to persons within the entity from whom you have deemed it necessary to request information. All other records and related information, including minutes of all management and shareholder meetings have been made available to you.
11. All transactions undertaken by NMC have been properly reflected in the accounting records and are reflected in the financial statements.
12. We acknowledge our responsibility for the design, implementation and maintenance of controls to prevent and detect fraud. We have disclosed to you the results of our assessment of the risk that the financial statements may be materially misstated as a result of fraud.
13. We have disclosed to you all information in relation to fraud or suspected fraud that we are aware of and that affects the entity and involves, management, employees who have a significant role in internal control, or others, where fraud could have a material effect on the financial statements.
14. We confirm that we are not aware of any possible or actual instance of noncompliance with those laws and regulations which provide a legal framework within which the NMC conducts its business and which could affect the financial statements. NMC has complied with all aspects of contractual agreements that could have a material effect on the financial statements in the event of non-compliance.
15. We confirm that we have disclosed to you the identity of NMC's related parties and all related party relationships and transactions relevant to NMC that we are aware of.
16. NMC has satisfactory title to all assets, and there are no liens or encumbrances on the assets.
17. There are no liabilities, contingent liabilities or guarantees to third parties other than those disclosed in the financial statements.
18. NMC has at no time during the year entered into any arrangement, transaction or agreement to provide credit facilities (including loans, quasi loans or credit

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transactions) for those charged with governance, nor to guarantee or provide security for such matters, except as disclosed in the financial statements.

19. We confirm that the following is a complete list of all serious incidents reported to the Charity Commission from the start of the financial year to the date of this letter:

- Incident dated 14 April 2023 – regarding under-age grooming and sexual assault not being reported to the Police.
- Incident dated 4 May 2023 – regarding potential fraudulent activity at a test centre in Nigeria where international applicants to the NMC undertake a computer-based test.
- Incident dated 20 September 2023 – regarding concerns raised by a whistleblower about NMC’s culture and resulting miscarriages of justice in Fitness to Practise cases.
- Incident dated 23 October 2023 – regarding a Fitness to Practise referrer’s personal information being disclosed to their partner.
- Incident dated 25 March 2024 – regarding concerns raised by a whistleblower about management culture, handling of fitness to practise cases and other areas of high risk.

In addition, we confirm that there are no further matters of which we are aware which we consider should be reported to the Charity Commission.

We confirm to the best of our knowledge and belief that the above representations are made on the basis of enquiries of management and staff with relevant knowledge and experience and, where appropriate, of inspection of supporting documentation sufficient to satisfy ourselves that we can properly make each of the above representations to you.

We acknowledge our legal responsibilities regarding disclosure of information to you as auditors and confirm that so far as we are aware, there is no relevant audit information needed by you in connection with preparing your audit report of which you are unaware. Each person charged with governance has taken all the steps that he ought to have taken as a person charged with governance in order to make himself aware of any relevant audit information and to establish that you are aware of that information.

Yours faithfully

Signed on behalf of NMC by the Chair, to reflect the responsibilities of the Trustees, and the Chief Executive and Registrar, to reflect their responsibilities as Accounting Officer:

David Warren
Chair

XXX
Chief Executive and Registrar

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Appendix I – unadjusted errors

Journal No.	Account	Dr £	Cr £	Profit effect £
1	Dr Investment accrued income	145,769		145,769
	Cr Investment Income (dividends received)		145,769	
	<i>Being the extrapolated adjustment for additional dividend income in the year. The actual difference was £12,618, which has been extrapolated over the whole population to give a potential error of £145,769.</i>			
2	Dr gain/ (loss) on investment - SOFA	143,945		(143,945)
	Cr Investment additions in the year		143,945	
	<i>Being the extrapolated adjustment to recognise overstated investment additions in the year. The actual difference identified was £12,251, which has been extrapolated over the whole population to give a potential error of £143,945.</i>			
				1,824

Signed on behalf of NMC by the Chair, to reflect the responsibilities of the Trustees, and the Chief Executive and Registrar, to reflect their responsibilities as Accounting Officer:

David Warren
Chair

XXX
Chief Executive and Registrar

The Comptroller and Auditor General
National Audit Office
157-197 Buckingham Palace Road
Victoria
LONDON
SW1W 9SP

LETTER OF REPRESENTATION: Nursing and Midwifery Council 2023-24

We acknowledge as Accounting Officer and Chair of the Nursing and Midwifery Council our responsibility for preparing accounts that give a true and fair view of the state of affairs, net income, and cash flows of the Nursing and Midwifery Council for the year ended 31 March 2024.

In preparing the accounts, we were required to:

- observe the financial statements direction issued by the Privy Council, including the relevant accounting and disclosure requirements a) in compliance with the accounting principles and disclosure requirements contained in the Charities SoRP; and (b) having regard to the requirements of the FReM to the extent that those requirements clarify, or build on, the requirements of the Charities SoRP, and apply appropriate accounting policies on a consistent basis;
- make judgements and estimates on a reasonable basis;
- state whether applicable accounting standards have been followed and disclosed and explain any material departures in the accounts; and
- make an assessment that the Nursing and Midwifery Council is a going concern and will continue to be in operation throughout the next year; and ensure that this has been appropriately disclosed in the financial statements.

We confirm that for the financial year ended 31 March 2024:

- neither we nor our staff authorised a course of action, the financial impact of which is that transactions infringe the requirements of regularity as set out in Managing Public Money (insofar as it applies to us);
- having considered and enquired as to the Nursing and Midwifery Council's compliance with law and regulations, we have disclosed to you any actual or potential non-compliance that could have a material effect on the ability of the Nursing and Midwifery Council to conduct its business or whose effects should be considered when preparing financial statements;
- all accounting records have been provided to you for the purpose of your audit. All other records and related information, including minutes of all management meetings which you have requested have been supplied to you;
- all transactions undertaken by the Nursing and Midwifery Council have been recorded in the accounting records and are properly reflected in the financial statements;
- all known instances of non-compliance or suspected non-compliance with laws and regulations whose effects should be considered when preparing financial statements have been disclosed to the auditors; and

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- the information provided regarding the identification of related parties is complete; and the related party disclosures in the financial statements are adequate.

All material accounting policies as adopted are detailed in note 1 to the financial statements.

INTERNAL CONTROL

We acknowledge as Accounting Officer and Chair our responsibility for the design and implementation of internal controls to prevent and detect fraud and error and we have disclosed to you the results of our assessment of the risk that the financial statements could be materially misstated.

We confirm that I have reviewed the effectiveness of the system of internal control and that the disclosures we have made are in accordance with HM Treasury guidance on the Governance Statement.

FRAUD

We acknowledge as Accounting Officer and Chair our responsibility for the design and implementation of internal controls to prevent and detect fraud and we have disclosed to you the results of our assessment of the risk that the financial statements could be materially misstated as a result of fraud.

We have disclosed to you any knowledge of fraud or suspected fraud affecting the Nursing and Midwifery Council involving management, employees who have significant roles in internal control, or others where the fraud could have a material effect on the financial statements.

We have disclosed to you any knowledge of any allegations of fraud or suspected fraud, affecting the Nursing and Midwifery Council's financial statements communicated by employees, former employees, analysts, regulators or others.

ACCOUNTING ESTIMATES

We acknowledge as Accounting Officer and Chair our responsibility to make judgments and estimates on a reasonable basis.

We confirm that the methods, the data, and the significant assumptions used by the Nursing and Midwifery Council in making accounting estimates and related disclosures are appropriate to achieve recognition, measurement or disclosure that is reasonable in the context of Charities SoRP.

GOING CONCERN

We have assessed whether the going concern basis of accounting is appropriate for Nursing and Midwifery Council. The plans for future actions upon which this assessment is based including the assumed future need of our regulatory function are feasible. The assumptions made in our assessment are reasonable and appropriate in the context of the Charities SoRP.

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ASSETS

General

All assets included in the balance sheet were in existence at the reporting date and owned by the Nursing and Midwifery Council, and free from any lien, encumbrance or charge, except as disclosed in the financial statements. The balance sheet includes all tangible assets owned by the Nursing and Midwifery Council.

Non-Current Assets

All assets over £5,000 are capitalised. Depreciation is calculated to reduce the net book amount of each asset to its estimated residual value by the end of its estimated useful life in the Nursing and Midwifery Council's operations.

Other Current Assets

On realisation in the ordinary course of the Nursing and Midwifery Council's operations the other current assets in the balance sheet are expected to produce at least the amounts at which they are stated. Adequate provision has been made against all amounts owing to the Nursing and Midwifery Council which are known, or may be expected, to be irrecoverable.

LIABILITIES

General

All liabilities have been recorded in the balance sheet in accordance with the Charities SoRP.

Provisions and Contingent Liabilities

Provision is made in the financial statements for:

- Dilapidations; and
- Panellist Holiday Pay accrual

The provisions included in the financial statements are the best estimates of the liabilities.

We have disclosed to you all actual or possible litigation and claims whose effects should be considered when preparing the financial statements. All such matters have been accounted for and disclosed in accordance with the Charities SoRP.

We are not aware of any action which is or may be brought against the Nursing and Midwifery Council under the Insolvency Act 1986.

Pension Scheme

We are satisfied, in respect of retirement benefits and schemes, that:

- all retirement benefits and schemes, including UK, foreign, funded and unfunded, approved or unapproved, statutory, contractual or implicit, have been identified and properly accounted for;
- all settlements and curtailments have been identified and properly accounted for;

- all events which relate to the determination of pension liabilities have been brought to the actuary's attention;
- the actual assumptions underlying the valuation of the scheme liabilities accord with the directors' best estimates of future events and are consistent with the directors' knowledge of the business;
- the actuary's calculations have been based on complete and up-to-date member data (as far as is appropriate regarding the adopted methodology);
- the amounts included in the financial statements derived from the work of the actuary are appropriate; and
- the asset ceiling has been appropriately accounted for.

OTHER DISCLOSURES

Results

Except as disclosed in the financial statements, the results for the year were not materially affected by transactions of a sort not usually undertaken by the Nursing and Midwifery Council, or circumstances of an exceptional or non-recurring nature.

Unadjusted Errors

The following unadjusted errors have been brought to our attention:

Unadjusted misstatements								
Title	Error type	Description	Account Line	Unit	SOFA		BS	
					DR	CR	DR	CR
Additional Dividend income	Extrapolated	Being the extrapolated adjustment for additional dividend income in the year. The actual difference was £12,618, which has been extrapolated over the whole population to give a potential error of £145,769.	Dr Investment accrued income	£'k			146	
			Cr Investment Income (dividends received)	£'k		146		
Investment additions	Extrapolated	Being the extrapolated adjustment to recognise overstated investment additions in the year relating to differences in foreign exchange spot rates for dividends received. The actual difference identified was £12,251, which has been extrapolated over the whole population to give a potential error of £143,945.	Dr Gain/(loss) on investments	£'k	144			
			Cr Investment additions in the year	£'k				144
Cumulative misstatements:			Sum of debits and credits		144	146	146	144
			Net impact on financial statements			2	2	

We consider the effect of these unadjusted errors to be immaterial, both individually and in aggregate, to the financial statements taken as a whole.

Events after the Reporting Period

All matters regarding events occurring subsequent to the date of the financial statements, and for which the Charities SORP requires adjustment or disclosure, have been adjusted or disclosed.

Privy Council Determinations

Expenditure incurred and income received are consistent with determinations given by the Privy Council.

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Signed on behalf of the Nursing and Midwifery Council by the Chair, to reflect the responsibilities of the Trustees, and the Chief Executive and Registrar, to reflect their responsibilities as Accounting Officer:

Sir David Warren KCMG
Chair
[Date]

xxx
Chief Executive and Registrar
[Date]

Council

Draft Annual Fitness to Practise Report 2023-2024

<p>Action requested:</p>	<p>For decision</p> <p>The Council is asked to approve the content of the draft Fitness to Practise Annual Report 2023-2024 prior to being laid before Parliament.</p>
<p>Key background and decision trail:</p>	<p>The Nursing and Midwifery Order 2001 mandates we must prepare for Parliament a statistical report which sets out the efficiency and effectiveness of our operations. It must also provide details of the arrangements the Council has put in place under Article 21(1)(b) to protect members of the public from professionals on the register whose fitness to practise is impaired.</p> <p>This report is prepared annually.</p> <p>Executive Board reviewed the draft of the Annual Fitness to Practise report on 29 May 2024 (EB/24/88b), and subject to minor amends, agreed it should be recommended to Audit Committee for recommendation to Council.</p> <p>Audit Committee reviewed the draft of the Annual Fitness to Practise Report on 12 June 2024 (AC/24/42), and subject to minor amends, agreed it should be recommended to Council.</p>
<p>Key questions:</p>	<ol style="list-style-type: none"> 1. Does the draft report provide an accurate reflection of our fitness to practise activity this year? 2. Are there sufficient assurances about the actions we are taking to address the fitness to practise caseload through the improvement plan?
<p>Annexes:</p>	<p>The following annexe is attached to this paper:</p> <ul style="list-style-type: none"> • Annexe 1: Draft Annual Fitness to Practise Report 2023-2024 <p>*Please note that Annexe 1 is not included in the public Council papers. This is so that we comply with strict rules not to publish the content of the report before it is submitted to Parliament</p>

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Further information:	If you require clarification about any point in the paper or would like further information, please contact the author or the director named below.	
	Author: Claire Davidson Phone: 020 7681 5733 claire.davidson@nmc-uk.org	Executive Director: Lesley Maslen Phone: 020 7681 5641 lesley.maslen@nmc-uk.org

Draft Annual Fitness to Practise Report 2023-2024

Discussion	
1	The draft Annual Fitness to Practise (FtP) Report follows a similar format to previous years.
2	The draft report is clear that our FtP caseload remains high despite our efforts to reduce it. Throughout 2023-2024 we regularly reported to the Executive Board and Council that we saw a sustained increase in the number of referrals being received each month that were above our forecasted levels.
3	We have included information about how our FtP plan will deliver improvements to the current processes, policies, tools as well as supporting our people.
4	Finally, the draft report sets out the work we have done to support people involved in our FtP process, including supporting and safeguarding professionals.
5	The draft report was considered by the Audit Committee at their meeting on 12 June 2024 and comments from the Committee have been incorporated into this draft.
Next Steps	
6	Once approved by Council, the report can then be laid in Parliament, along with the Annual Report and Accounts. However, given the General Election, Parliament has been dissolved and we will not be able to lay the reports until after the State Opening of Parliament. This is due to take place on 17 July and, following discussions with the Office of the Privy Council and the National Audit Office, we intend to lay the Annual Report and Accounts and the Fitness to Practise Annual Report before Parliament on 18 July 2024. We will continue to monitor the situation and if the State Opening of Parliament is delayed, we will update the Council.

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Implications

The following were considered when preparing this paper:

Implication:		Location if in paper:	Content if not in paper:
Public protection/impact for people.	Yes	Throughout report	
Safeguarding considerations	Yes	Page 20	
The four country factors and considerations.	Yes	Pages 7, 10 & 27	
Resource implications including information on the actual and expected costs involved.	Not Applicable		Resource for production of the report is part of BAU. Budget implications of the FtP plan have been approved separately by Council in March 2024.
Risk implications associated with the work and the controls proposed/ in place.	Yes		Failing to comply with our statutory reporting requirements would compromise trust and confidence in our ability to regulate. We have robust processes in place to ensure compliance and this work is built into core business activity for Professional Regulation.
Legal considerations.	Yes		We ensure that our statutory annual reports meet the legislative requirements set out in the Nursing and Midwifery Order 2001 (as amended).

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Midwives and/or nursing associates.	Yes	Throughout report	We provide a breakdown of our data to show the proportion of nurses, midwives and nursing associates throughout the statistical summary.
Equality, diversity, and inclusion.	Yes	Page 22	
Stakeholder implications and any external stakeholders consulted.	Yes		<p>The report will be shared with stakeholders at the point of publication.</p> <p>When stakeholders request FtP information from us, for example within freedom of information request, we might direct them to the annual fitness to practise reports because these contain the requested information.</p>
Regulatory Reform.	Yes		Having a reduced caseload will provide us with capacity to adapt effectively to regulatory reform changes.

Council

Annual Health and Safety Report 2023 - 2024

<p>Action requested:</p>	<p>To provide assurance on the NMC’s health, safety and security arrangements and information on activity over the 12-month period from 1 April 2023 to 31 March 2024.</p> <p>For decision</p> <p>Council is recommended to accept the report, noting the updates against work undertaken in 2023-2024 and approve the health, safety and security priorities identified for 2024-2025 (paragraph 17)</p>			
<p>Key questions:</p>	<p>1 Are we compliant with health and safety legislation, and fulfilling our duty as an employer to keep our workplace safe and healthy for colleagues?</p>			
<p>Key background and decision trail:</p>	<p>1 In terms of health, safety and security, the NMC is a low-risk environment. However, it is still important and part of its statutory duties that the Council monitors the extent to which we have formal policies, guidance and procedures in place, assuring the health, safety, welfare and security of our employees, contractors and visitors.</p> <p>2 This annual paper reports on how we ensure compliance with health and safety requirements, our security arrangements and the assurance available to the Council.</p> <p>3 Health and safety legislation is relevant to the four UK countries that we operate in.</p> <p>4 This report formally covers the period 1 April 2023 to 31 March 2024.</p> <p>5 Professional Regulation (PR) publish their own annual report which includes the measures they undertake to support the health, wellbeing and safeguarding of nurses, midwives and nursing associates and other people who come into contact with the NMC in connection with Fitness to Practise, as well as PR colleagues.</p>			
<p>Annexes:</p>	<p>None</p>			
<p>Further information:</p>	<p>If you require clarification about any point in the paper or would like further information, please contact the author or the director named below.</p> <table border="1" data-bbox="379 1895 1402 2033"> <tr> <td data-bbox="379 1895 858 2033"> <p>Author: David Power Phone: 020 7681 5488 david.power@nmc-uk.org</p> </td> <td data-bbox="858 1895 1402 2033"> <p>Co-Executive Director: Tom Moore Phone: 020 4518 9260 tom.moore@nmc-uk.org</p> </td> </tr> </table>		<p>Author: David Power Phone: 020 7681 5488 david.power@nmc-uk.org</p>	<p>Co-Executive Director: Tom Moore Phone: 020 4518 9260 tom.moore@nmc-uk.org</p>
<p>Author: David Power Phone: 020 7681 5488 david.power@nmc-uk.org</p>	<p>Co-Executive Director: Tom Moore Phone: 020 4518 9260 tom.moore@nmc-uk.org</p>			

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Annual Health and Safety Report 2023 - 2024

Discussion

Sources of assurance

- 1 The following arrangements are in place and provide assurance that we have measures in place to address health, safety and security risks:
 - 1.1 A Health and Safety Steering Group (HSSG), chaired by the Head of Estates under the Executive Director, Resources and Technology Services, with membership drawn from across the organisation. During the reporting period the HSSG has met on four occasions
 - 1.2 A Reasonable Adjustments Working Group (RAWG), co-chaired by the Head of People Services and a Senior Executive Business Manager to review the timeliness of our response to more complex reasonable adjustment requests.
 - 1.3 Health and safety is a standing agenda item at Executive Board meetings.
 - 1.4 Mandatory e-learning on health and safety for all colleagues
 - 1.5 Training for compliance with statutory responsibilities and further training for specific roles, as necessary
 - 1.6 The health and safety policy statement signed by the Chief Executive and Registrar is displayed on our health & safety notice boards at each of our office premises.
 - 1.7 An NMC Health and Safety guide for colleagues
 - 1.8 Sufficient trained first aiders and fire wardens at all sites, including refresher courses as necessary.
 - 1.9 The provision of Mental Health First Aiders (MHFAs)
 - 1.10 Personal Emergency Evacuation Plans (PEEPs) for colleagues with reasonable adjustments or disabilities, as necessary
 - 1.11 Fire Risks Assessments (FRAs) in place for all NMC buildings.
 - 1.12 Regular fire alarm testing and evacuation drills at our buildings
 - 1.13 Regular incident reporting
 - 1.14 Security measures including CCTV and access control systems in place at all our properties; security guards on duty at our hearings venues.

- 1.15 A programme of planned preventative maintenance and compliance work to the mechanical and electrical plant and associated infrastructure, fire alarm, CCTV, and access control systems.
- 1.16 Policies and guidance notes are reviewed and updated for compliance with any new legislation or best practice.
- 1.17 Health and safety includes consideration of colleagues' health and wellbeing which is also part of the NMC's People Plan owned by colleagues in People and Organisational Effectiveness directorate (P&OE).
- 1.18 Under the People Plan, we offer different channels of support to all colleagues including: the employee assistance programme, promotion of Thrive app, occupational health, Perkbox wellness hub, guidelines, risk assessments, group discussions and 1-2-1 meetings, as necessary. Further detail can be found in the 'progress against priorities' section, paragraph 11.5 and paragraphs 12 to 16.

Reviews during the year

- 2 The Display Screen Equipment (DSE) risk assessment undertaken by colleagues was updated in January 2024. This was updated to make clearer the process for obtaining equipment in line with any reasonable adjustments that are needed.
- 3 The Young Workers Risk Assessment, generally used for those young persons on work experience was reviewed and updated in February 2024.
- 4 The Reasonable Adjustments Policy for colleagues was reviewed and updated in November 2023.
- 5 The Reasonable Adjustment Policy for people using our services and accompanying guidance were reviewed and updated in November 2023 and March 2024 respectively.
- 6 In conjunction with our colleagues in Learning & Development, we reviewed and updated the e-learning courses with regards to health and safety. These included updated references to working from home and in response to feedback from users.

Training

- 7 We have undertaken new and refresher training for first aiders and fire wardens. We have recruited additional colleagues to each role to cover colleagues now working a hybrid work pattern. First aid training includes defibrillator training.
- 8 Colleagues' e-learning training for health and safety is between 69-88 percent completion across all directorates, with an organisational completion of 77 percent. This is very similar to last year and includes new colleagues as well as those colleagues who are asked to repeat the training course every two years. With support from the Executive Board, there is a targeted focus to improve completion scores for those directorates with the lowest completion rates.

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Incident reporting

- 9 During the year 1 April 2023 to 31 March 2024, there were two reported health and safety incidents which were actioned and recorded in our log. The incidents included a burn to a finger from hot water and a minor fall up some stairs leading to an injured elbow. Both were treated immediately and no further medical treatment was required in either case.
- 10 We did not have any RIDDOR incidents (Reporting of Injuries, Diseases, and Dangerous Occurrences Regulations 2013) that would require reporting to the Health and Safety Executive (HSE).

Progress against priorities for 2023–2024

- 11 In addition to regular monitoring of incidents and accidents, and maintaining oversight of any changes to legislative requirements, priorities for health and safety over the past year were:
- 11.1 To monitor health and wellbeing issues that may arise from colleagues working from home and to publicise as part of our colleague engagement, that work-related accidents and near misses should continue to be reported to line managers and Facilities, even for those colleagues who are working from home.
- 11.1.1 *Outcome:* monitoring of accidents and near misses and relevant changes to legislation and guidelines are discussed in the Steering Group meetings. Each member was tasked to cascade the message to report any incidents or near misses, including at home. The low number of incidents recorded in the accident log/register indicates that more needs to be done.
- 11.2 For colleagues with more complex reasonable adjustments, a working group was set up to review our existing procedures and documentation to help improve collaboration and timeliness in responding to these requests.
- 11.2.1 *Outcome:* the Reasonable Adjustments Working Group was formally set up in August 2023. Members include colleagues from People Services, EDI team, Estates, IT, and the co-chairs of the Workaround Staff Network. It has helped to resolve approximately one third of the cases that it has reviewed.
- 11.3 To keep security under review for all our buildings/venues.
- 11.3.1 *Outcome:* The NMC chairs and contributes to the local West End Police Ward Panel meetings, which includes the police, local residents and organisations, for example: the BBC, the Langham Hotel, Meta and Netflix. We also liaise with the police at our other buildings through the respective building management companies. We have encouraged all colleagues to be aware of local fire and other evacuation procedures, as with hybrid working, they may be working at an NMC building they are less familiar with.

11.4 Consider health and safety requirements for contractors and colleagues as we move forward with the 23 Portland Place refurbishment project and the end of the lease at 2 Stratford Place in July 2024.

11.4.1 *Outcome:* the main refurbishment project has been paused. Feasibility and planning works to that time were undertaken under the required legislation including the Construction (Design and Management) Regulations 2015. To provide continued operational support for in-person hearings, we are negotiating a new/extension of the lease at 2 Stratford Place - our primary hearing venue. We have supported the structured return of colleagues in Professional Regulation to the office two days per week, making sure our buildings and facilities are suitably equipped for the increase in numbers.

11.5 To continue working with the People & Organisation Effectiveness (P&OE) team to promote health and wellbeing.

11.5.1 *Outcome:* P&OE have updated their training to provide a more accessible range of learning; promote health and wellbeing through Workplace, our internal messaging board, and posters in the office. The 'Thrive' app offers a modern, easy to access 24/7 support to colleagues with mental health and wellbeing. The app delivers a wide range of psycho-education webinars and workshops, an unlimited in-app therapy service, providing in-person workshops, and supporting our MHFA's with vital knowledge and signposting.

11.5.2 Over the period January to March 2024, we had on average 491 individual users on the Thrive app with 24 of those actively checking regularly; 27 callers to the Employee Assistance Programme (EAP) with five of those referred for counselling and 84 people referred to occupational health services. There have also been 1530 views of the Perkbox wellness hub in the last year with 296 unique users.

Further activity led by P&OE colleagues

12 We are currently delivering refresher training for Mental Health First Aiders. We will also look to train new Mental Health First Aiders to ensure we have coverage across our office location and directorates.

13 A wellbeing check-in is included in our quarterly appraisals, which includes questions about general health and wellbeing, workload, and reasonable adjustments. The check-in also includes signposting to health and wellbeing resources.

14 To further support colleagues in Professional Regulation, who may be exposed to distressing situations as a part of their role, we have used Thrive to deliver individualised decompression support sessions. These decompression support sessions are held with an assigned professional over the course of a 12-month period. We will look to review the service and expand as needed.

- 15 We continue to promote the use of Wellness Action Plans as a useful tool to help managers have an open conversation with their team - better understand their needs, experiences and how to support their mental health and wellbeing.
- 16 We have also introduced year 2 of the People Plan and continue to review associated policies and guidelines, for example, see above and paras 4, 5 and 6; and introduce a health and wellbeing strategy which aims to increase accessibility and awareness of all NMC health and wellbeing resources and identify any gaps in support.
- 17 **Recommendation:** Council is recommended to accept the report, noting the updates against work undertaken in 2023-2024 and **approve** the health, safety and security priorities identified for 2024-2025.

Next Steps

- 18 In addition to regular monitoring of incidents and accidents, and maintaining oversight of any changes to legislative requirements, priorities for health and safety for the coming year are:
- 18.1 To further publicise as part of our colleague engagement, that work-related accidents and near misses should continue to be reported to line managers and Facilities, even for those colleagues who are working from home.
- 18.2 To keep security under review for all our buildings/venues.
- 18.3 Consider health and safety arrangements for contractors and colleagues as we undertake the mini refurbishment of the 2nd floor and ground floor public waiting area at 23 Portland Place.
- 18.4 To continue working with the P&OE team to promote health and wellbeing.

Implications

The following were considered when preparing this paper:

Implication:		Location if in paper:	Content if not in paper:
Public protection/impact for people.	Yes	Para 1	
The four country factors and considerations.	Yes	Para 3	
Resource implications including information on the actual and expected costs involved.	Yes		Health, safety and security requirements are built into the normal Resources and Technology Services

			revenue budgets. P&OE have their own budgets for health and wellbeing initiatives.
Risk implications associated with the work and the controls proposed/ in place.	Yes	Para 1	This report provides assurance that we have measures in place to address health, safety and security risks
Legal considerations.	Yes	Paras 1 & 3	
Midwives and/or nursing associates.	Not Applicable		
Equality, diversity, and inclusion.	Yes	Throughout the paper	
Stakeholder implications and any external stakeholders consulted.	Not Applicable		
Regulatory Reform.	Not Applicable		

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Council

Panel Member appointments, transfers and resignations

Action requested:	<p>Appointment of Panel Members to hear registration appeals, Panel Members to be transferred between and removed from the Practice Committees and Legal Assessors to be removed from the approved list of Legal Assessors.</p> <p>For decision</p> <p>The Council is invited to accept the recommendations of the Appointments Board to:</p> <ul style="list-style-type: none">• Appoint the 95 Panel Members listed in Annexe 1 to hear registration appeals with such appointments to run concurrently with their appointment to the Practice Committees. Each recommendation for appointment will be conditional on completion of the annual Panel Member training for Investigating Committee members (paragraph 7).• Transfer the Panel Member in Table 1 at Annexe 2 from the Fitness to Practise Committee to the Investigating Committee.• Remove the Panel Members in Table 2 at Annexe 2 who have resigned from the Practice Committee (paragraph 9).• Note that the Legal Assessor listed in Table 3 at Annexe 2 has resigned from their appointment as a Legal Assessor (paragraph 12).
Key background and decision trail:	<p>At its meeting on 11 June 2024, and by Chair's action dated 18 June 2024, the Appointments Board considered the Panel Member and Legal Assessor appointments, transfers and resignations set out in this paper. The remit of the Appointments Board includes assisting the Council in connection with the exercise of any function or process relating to the appointment of Panel Members and Legal Assessors and the appointment of Registration Appeal Panel Members to the Registration Appeals Panel.</p> <p>For the last three financial years, there have been an average of 50 registration appeal and 58 Incorrect or Fraudulent Entry (IEFE) hearings.</p> <p>The Nursing and Midwifery Council (Midwifery and Practice Committees) (Constitution) Rules 2008 state that no Panel Member may serve concurrently as a member of the Fitness to Practise Committee and the Investigating Committee.</p>

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Key questions:	1. What are the Appointment Board’s recommended Panel Member appointments, transfers and removals?	
Annexes:	<p>The following annexes attached to this paper:</p> <ul style="list-style-type: none"> • Annexe 1: Panel Member appointments (registration appeals) • Annexe 2: Panel Members to be transferred between and removed from the Practice Committees and Legal Assessors to be removed from the approved list of Legal Assessors. 	
Further information:	If you require clarification about any point in the paper or would like further information, please contact the author or the director named below.	
	<p>Author: Kelly O’Brien Kelly.OBrien@nmc-uk.org</p>	<p>Assistant Director: Matthew Hayday Phone: 020 7681 5516 matthew.hayday@nmc-uk.org</p>

Panel Member Appointments, transfers and resignations

Discussion

Appointment of Panel Members to hear registration appeals

- 1 At its meeting in September 2020, the Appointments Board agreed to extend the remit of the Investigating Committee members to hear registration appeals. Subsequently, at its meeting in January 2021 (NMC/21/10) the Council appointed 55 named individuals who would be able to hear registration appeals.
- 2 There are currently 30 Panel Members who have been appointed to hear registration appeals as terms have ended for some of those appointed in 2021. We are expecting an increase in these types of hearings as we respond to widespread fraudulent activity at the Yunnik centre, where we suspect some people fraudulently obtained their Computer Based Testing. We are anticipating 89 Incorrect Entry/Fraudulent Entry and 171 registration appeal hearings in addition to our usual activity numbers. Further information about the NMC's response to the fraudulent activity can be found on the NMC's website and is covered in the Executive report and Annual Reports earlier on the agenda.
- 3 To ensure we have sufficient members to undertake forecasted hearings activity and for business ease, as part of the Panel Member annual training sessions for Investigating Committee members 2024, we are providing training on efficient and effective events and fairness and equity in decision making, and registration appeals.
- 4 We have reviewed the performance framework data and with the exception of outstanding peer reviews, all members are meeting or exceeding expectations. The outstanding peer reviews are a matter of timing and we are following up with individuals to ensure that these take place. That they are incomplete is not a indication of poor performance.
- 5 **Recommendation: The Council is invited to accept the recommendations of the Board to appoint the 95 Panel Members listed in Annexe 1 to hear registration appeals, with such appointments to run concurrently with their appointment to the practice committees. Each recommendation for appointment is conditional on completion of the annual Panel Member training for Investigating Committee members.**

Panel Member Transfer

- 6 The Panel Member listed at Table 1 of Annexe 2 has advised that that their professional obligations were such that it would impact on their availability to serve on the longer events that are typical of the Fitness to Practise Committee and requested that they be transferred to the Investigating Committee. The Panel Member was appointed in November 2023 and due to availability has not yet sat on any hearings, so we do not have the full performance information available. They have completed the required IC induction training and Panel Member Annual training.

7 **Recommendation: The Council is invited to accept the recommendation of the Board to transfer the Panel Member to the Investigating Committee effective from 4 July 2024.**

Panel Member and Legal Assessor resignations

8 Annexe 2 sets out the Panel Members and Legal Assessors who have resigned since the last report to the Board in October 2023. Sadly, it also notes that one of the Panel Members has passed away and we have sent our condolences to the Panel Member's family.

9 The report sets out the respective practice committee they served on (where applicable), the date the resignation is effective from and the reason given for stepping down from the role.

10 **Recommendation: The Board is invited to recommend to Council the removal of the Panel Members in Table 2 at Annexe 2 who have resigned from the Practice Committee.**

11 Under our legislation whilst Council must appoint Legal Assessors, there is no requirement for Council to take any action if a Legal Assessor resigns that appointment.

12 In effect, the decision to remove a Legal Assessor from the list of appointed Legal Assessors is made by the Legal Assessor themselves. Once they have resigned, their name can be taken off the list by the Executive and there is no need for a Council decision. As such we ask the Council to note the resignation of the Legal Assessor included at Table 3 of Annexe 2.

13 **Recommendation: The Council is invited to note that the Legal Assessor listed in Table 3 at Annexe 2 has resigned their appointment.**

Next Steps

14 We will inform the Panel Members of the Council's decision and update their records accordingly.

Implications

The following were considered when preparing this paper:

Implication:	Applicable	Location if in paper:	Content if not in paper:
Public protection/impact for people.	Yes		Panel Members are required to make decisions at practice committee events that protect the public. If the recommendations in this paper are approved by the Board, we will

			retain sufficient membership of the Practice Committees to undertake the current levels of planned hearing activity, especially in relation to registration appeal hearings.
Safeguarding considerations	Not Applicable		
The four country factors and considerations.	Yes		<p>The Nursing and Midwifery Council (Midwifery and Practice Committees)(Constitution) Rules 2008 apply to all four countries of the United Kingdom.</p> <p>Panel Members and Legal Assessors are allocated to adjudication events in each of the countries as they may sit on events across the United Kingdom.</p>
Resource implications including information on the actual and expected costs involved.	Not Applicable		
Risk implications associated with the work and the controls proposed/ in place.	Yes		If we do not appoint sufficient Panel Members to undertake registration appeal hearings, there will be a risk that we will have insufficient numbers to undertake current levels of planned hearing activity in this area.
Legal considerations.	Yes		<p>Article 34 of the Nursing and Midwifery Order 2001 sets out the provisions for the appointment of Legal Assessors. There are no legal requirements for Council to take action if a Legal Assessor resigns their appointment.</p> <p>The Nursing and Midwifery Council (Midwifery and Practice Committees)(Constitution) Rules 2008 sets out the reasons where a Panel Member shall be removed from office by the Council, including when a Panel Member resigns.</p>

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Midwives and/or nursing associates.	Not Applicable		
Equality, diversity, and inclusion.	Yes		Resignations of the Panel Members and Legal Assessors will not affect the diversity of the Panel Member and Legal Assessor pools.
Stakeholder implications and any external stakeholders consulted.	Yes	Para 11	
Regulatory Reform.	Not Applicable		

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Panel Member Appointments (registration appeals)

This table sets out the Investigating Committee Members we would like to recommend to Council to hear registration appeals with such appointments running concurrently with their appointment to the practice committee. Each recommendation for appointment will be conditional on completion of the annual Panel Member training for Investigating Committee members.

	Full name	Panel	Start of term of appointment	End of term of appointment	Peer review overall result	Quality decision making (including DRG and High Court outcomes)	Concerns
1	Aileen Cherry	Investigating Committee	28/11/2022	27/11/2026	Complete - no concerns	0	0
2	Alison Fisher	Investigating Committee	28/11/2022	27/11/2026	Complete - no concerns	0	0
3	Amy Rebecca Noakes	Investigating Committee	20/02/2017	19/02/2025	Complete - no concerns	0	0
4	Angela Williams QPM	Investigating Committee	07/07/2021	06/07/2025	Complete - no concerns	0	0
5	Anne Brown	Investigating Committee	20/02/2017	19/02/2025	Complete - no concerns	0	0
6	Anne-Marie Borneuf	Investigating Committee	07/07/2021	06/07/2025	Complete - no concerns	0	0
7	Carol Jackson	Investigating Committee	28/11/2022	27/11/2026	Complete - no concerns	0	0
8	Carole Panteli	Investigating Committee	15/06/2017	14/06/2025	Complete - no concerns	0	0
9	Carolyn Jenkinson	Investigating Committee	15/06/2017	14/06/2025	Complete - no concerns	0	0
10	Cheryl Hobson	Investigating Committee	07/07/2021	06/07/2025	Complete - no concerns	0	0
11	Christopher John Taylor	Investigating Committee	28/11/2022	27/11/2026	Complete - no concerns	0	0

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12	David Brown	Investigating Committee	07/07/2021	06/07/2025	Complete - no concerns	0	0
13	Debbie Holroyd	Investigating Committee	07/07/2021	06/07/2025	Complete - no concerns	0	0
14	Dee Rogers	Investigating Committee	07/07/2021	06/07/2025	Complete - no concerns	0	0
15	Eleanor Harding	Investigating Committee	28/11/2022	27/11/2026	Complete - no concerns	0	0
16	Elizabeth Anne Williamson	Investigating Committee	28/11/2022	27/11/2026	Complete - no concerns	0	0
17	Elizabeth Maxey	Investigating Committee	28/11/2022	27/11/2026	Complete - no concerns	0	0
18	Gary Tanner	Investigating Committee	07/07/2021	06/07/2025	Complete - no concerns	0	0
19	Geoffrey Baines	Investigating Committee	20/02/2017	19/02/2025	Complete - no concerns	0	0
20	Godfried Attafua	Investigating Committee	28/11/2022	27/11/2026	Complete - no concerns	0	0
21	Hayley Ball	Investigating Committee	28/11/2022	27/11/2026	Complete - no concerns	0	0
22	Helen Hughes	Investigating Committee	07/07/2021	06/07/2025	Complete - no concerns	0	0
23	Ingrid Lee	Investigating Committee	28/11/2022	27/11/2026	Complete - no concerns	0	0
24	Jane Mary Hughes	Investigating Committee	28/11/2022	27/11/2026	Complete - no concerns	0	0
25	Jenny Gough	Investigating Committee	07/07/2021	06/07/2025	Complete - no concerns	0	0
26	Jill Elizabeth Robinson	Investigating Committee	28/11/2022	27/11/2026	Complete - no concerns	0	0
27	Jill Wells	Investigating Committee	15/06/2017	14/06/2025	Complete - no concerns	0	0
28	Judith Ailsa Ebbrell	Investigating Committee	28/11/2022	27/11/2026	Complete - no concerns	0	0

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29	Judith Denise Francois	Investigating Committee	28/11/2022	27/11/2026	Complete - no concerns	0	0
30	Katriona Crawley	Investigating Committee	07/07/2021	06/07/2025	Complete - no concerns	0	0
31	Kiran Gill	Investigating Committee	28/11/2022	27/11/2026	Complete - no concerns	0	0
32	Linda Redford	Investigating Committee	20/02/2017	19/02/2025	Complete - no concerns	0	0
33	Louise Elaine Jones	Investigating Committee	28/11/2022	27/11/2026	Complete - no concerns	0	0
34	Louise Geldart	Investigating Committee	07/07/2021	06/07/2025	Complete - no concerns	0	0
35	Lynn Alexandra Bayes	Investigating Committee	28/11/2022	27/11/2026	Complete - no concerns	0	0
36	Mahjabeen Agha	Investigating Committee	28/11/2022	27/11/2026	Complete - no concerns	0	0
37	Martha Crossley	Investigating Committee	07/07/2021	06/07/2025	Complete - no concerns	0	0
38	Matthew Burton	Investigating Committee	07/07/2021	06/07/2025	Complete - no concerns	0	0
39	Melanie Tanner	Investigating Committee	07/07/2021	06/07/2025	Peer Review currently allocated, awaiting hearing conclusion	0	0
40	Michael Lupson	Investigating Committee	07/07/2021	06/07/2025	Complete - no concerns	0	0
41	Michael Robert McCulley	Investigating Committee	28/11/2022	27/11/2026	Complete - no concerns	0	0
42	Nariane Emma Chantler	Investigating Committee	28/11/2022	27/11/2026	Complete - no concerns	0	0
43	Neil Calvert	Investigating Committee	07/07/2021	06/07/2025	Peer Review currently allocated, awaiting hearing conclusion	0	0
44	Nicola Bowes	Investigating Committee	28/11/2022	27/11/2026	Complete - no concerns	0	0
45	Noreen Quraishi	Investigating Committee	07/07/2021	06/07/2025	Complete - no concerns	0	0

46	Petra Leseberg	Investigating Committee	28/11/2022	27/11/2026	Complete - no concerns	0	0
47	Rajesh Karimbath	Investigating Committee	28/11/2022	27/11/2026	Complete - no concerns	0	0
48	Richard James Carnell	Investigating Committee	28/11/2022	27/11/2026	Complete - no concerns	0	0
49	Sally Allbeury	Investigating Committee	28/11/2022	27/11/2026	Complete - no concerns	0	0
50	Sally-Ann Glen	Investigating Committee	28/11/2022	27/11/2026	Complete - no concerns	0	0
51	Sandra Norburn	Investigating Committee	07/07/2021	06/07/2025	Complete - no concerns	0	0
52	Sarah Elizabeth Hewetson-Grubb	Investigating Committee	28/11/2022	27/11/2026	Complete - no concerns	0	0
53	Sarah Hamilton	Investigating Committee	07/07/2021	06/07/2025	Complete - no concerns	0	0
54	Sarah Louise Boynton	Investigating Committee	28/11/2022	27/11/2026	Complete - no concerns	0	0
55	Sarah McAnulty	Investigating Committee	07/07/2021	06/07/2025	Complete - no concerns	0	0
56	Simon Shevlin	Investigating Committee	07/07/2021	06/07/2025	Complete - no concerns	0	0
57	Sue Stone	Investigating Committee	28/11/2022	27/11/2026	Complete - no concerns	0	0
58	Tasneem Dhanji	Investigating Committee	07/07/2021	06/07/2025	Complete - no concerns	0	0
59	Wendy Teresa West	Investigating Committee	28/11/2022	27/11/2026	Complete - no concerns	0	0
60	Winifda Ngoshi	Investigating Committee	28/11/2022	27/11/2026	Complete - no concerns	0	0
61	Yvonne Margaret Wilkinson	Investigating Committee	28/11/2022	27/11/2026	Complete - no concerns	0	0
62	Cathrine Lund	Investigating Committee	23/11/2023	22/11/2027	New Panel Member, not yet allocated	0	0

63	Cherry Brennan	Investigating Committee	23/11/2023	22/11/2027	New Panel Member, not yet allocated	0	0
64	Georgia Kontosorou	Investigating Committee	23/11/2023	22/11/2027	Peer Review currently allocated, awaiting hearing conclusion	0	0
65	Jessica Read	Investigating Committee	23/11/2023	22/11/2027	New Panel Member, not yet allocated	0	0
66	Judith Shevlin	Investigating Committee	23/11/2023	22/11/2027	Peer Review currently allocated, awaiting hearing conclusion	0	0
67	Karen McCutcheon	Investigating Committee	23/11/2023	22/11/2027	New Panel Member, not yet allocated	0	0
68	Kathryn Evans	Investigating Committee	23/11/2023	22/11/2027	New Panel Member, not yet allocated	0	0
69	Liane Powell	Investigating Committee	23/11/2023	22/11/2027	Peer Review currently allocated, awaiting hearing conclusion	0	0
70	Michelle Mello	Investigating Committee	23/11/2023	22/11/2027	Peer Review currently allocated, awaiting hearing conclusion	0	0
71	Naomi Smith	Investigating Committee	23/11/2023	22/11/2027	Peer Review currently allocated, awaiting hearing conclusion	0	0
72	Nicola Harvey	Investigating Committee	23/11/2023	22/11/2027	New Panel Member, not yet allocated	0	0
73	Siobhan Ebdon	Investigating Committee	23/11/2023	22/11/2027	New Panel Member, not yet allocated	0	0
74	Suzie Adam	Investigating Committee	23/11/2023	22/11/2027	New Panel Member, not yet allocated	0	0
75	Vikki Crickmore	Investigating Committee	23/11/2023	22/11/2027	Peer Review currently allocated, awaiting hearing conclusion	0	0
76	Amy Barron	Investigating Committee	23/11/2023	22/11/2027	New Panel Member, not yet allocated	0	0
77	Caroline Browne	Investigating Committee	23/11/2023	22/11/2027	New Panel Member, not yet allocated	0	0
78	David Lennox	Investigating Committee	23/11/2023	22/11/2027	New Panel Member, not yet allocated	0	0
79	Elaine Weinbren	Investigating Committee	23/11/2023	22/11/2027	New Panel Member, not yet allocated	0	0

80	Hazel Wilford	Investigating Committee	23/11/2023	22/11/2027	New Panel Member, not yet allocated	0	0
81	Howard Millington	Investigating Committee	23/11/2023	22/11/2027	New Panel Member, not yet allocated	0	0
82	John Anderson	Investigating Committee	23/11/2023	22/11/2027	New Panel Member, not yet allocated	0	0
83	Julian Graville	Investigating Committee	23/11/2023	22/11/2027	Peer Review currently allocated, awaiting hearing conclusion	0	0
84	Linda Hawkins	Investigating Committee	23/11/2023	22/11/2027	New Panel Member, not yet allocated	0	0
85	Mandy Kilpatrick	Investigating Committee	23/11/2023	22/11/2027	New Panel Member, not yet allocated	0	0
86	Neil Slater	Investigating Committee	23/11/2023	22/11/2027	New Panel Member, not yet allocated	0	0
87	Niall McDermott	Investigating Committee	23/11/2023	22/11/2027	Peer Review currently allocated, awaiting hearing conclusion	0	0
88	Oluseye (Reni) Aina	Investigating Committee	23/11/2023	22/11/2027	New Panel Member, not yet allocated	0	0
89	Rohan Sivanandan	Investigating Committee	23/11/2023	22/11/2027	New Panel Member, not yet allocated	0	0
90	Tom Manson	Investigating Committee	23/11/2023	22/11/2027	New Panel Member, not yet allocated	0	0
91	Stephanie Hayle	Investigating Committee	23/11/2023	22/11/2027	Peer Review currently allocated, awaiting hearing conclusion	0	0
92	Ian Hanson	Investigating Committee	23/11/2023	22/11/2027	New Panel Member, not yet allocated	0	0
93	Gillian Murgatroyd	Investigating Committee	31/01/2024	30/01/2028	New Panel Member, not yet allocated	0	0
94	Sally Napper	Investigating Committee	31/01/2024	30/01/2028	New Panel Member, not yet allocated	0	0
95	Lizzie Walmsley	Investigating Committee	31/01/2024	30/01/2028	New Panel Member, not yet allocated	0	0

Panel Member Transfer, and Panel Member and Legal Assessor Removals

Table 1 below lists the Panel Member to be transferred from the Fitness to Practise Committee to the Investigating Committee.

Table 1

	Name	Date transfer effective from	Current Practice Committee	Transferring to	Reason given
1	Michaela Higgins	04/07/2024	Fitness to Practise Committee (FtPC)	Investigating Committee	Unable to meet availability commitments of FtPC

Table 2 below lists the Panel Members who have resigned and need to be removed from the Fitness to Practise Committee.

Table 2

	Name	Date resignation effective from	Practice Committee	Reason given
1	Pauline Pratt	30/11/2023	Fitness to Practise Committee	Retired
3	Catrin Macey	29/01/2024	Fitness to Practise Committee	Passed away
4	Mark Dinwiddy	03/05/2024	Fitness to Practise Committee	Unable to meet availability commitments

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Table 3

Table 3 below lists the Legal Assessor who has resigned since October 2023 and has been removed from the approved list of Legal Assessors.

	Name	Date resignation effective from	Reason given
1	Andrew Anthony	08/01/2024	Having received further information in relation to the insurance position in Northern Ireland (more complicated and expensive than was anticipated), they decided not to proceed with the appointment with the NMC.

Council

The General Nursing Council for England and Wales Trust Report

Action requested:	<p>This paper provides a summary of the work of the General Nursing Council Trust for England and Wales (GNCT) for 2023-2024.</p> <p>For noting.</p> <p>The Council is asked to note the report.</p>	
Key background and decision trail:	<p>A summary of the work of the GNCT was last presented to the Council for information in November 2022.</p>	
Key questions:	<ul style="list-style-type: none"> • What is the purpose of the GNCT? • What contribution does the GNCT make to supporting early career nurse researchers? • What are the benefits the GNCT has achieved for patients and the NHS? • What is the NMC's involvement with the GNCT and how is it governed? • In summary, what work has been undertaken by the GNCT in 2023-2024? 	
Annexes:	<p>None.</p>	
Further information:	<p>If you require clarification about any point in the paper or would like further information, please contact the author or the director named below.</p>	
		<p>Dr Lynne Wigans OBE NMC Trustee GNCT</p>

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The General Nursing Council for England and Wales Trust Report

The purpose of the GNCT

- 1 The General Nursing Council for England & Wales Trust (GNCT) seeks to promote the development of nursing for the benefit of society. The General Nursing Council for England and Wales Trust is an independent charitable trust (Registered Charity 288068). The Trust was set up in 1983 when the General Nursing Council for England and Wales, the regulatory body for the nursing profession in England and Wales during the preceding 60 years, was abolished under the Nurses and Midwives and Health Visitors Act 1979. The NMC is a successor organisation.
- 2 The GNCT funds research into nursing policy and practice to enhance the practice and profession of nursing. The Trustees are committed to advancing the education of student nurses and further education of Registered Nurses. The GNCT funds up to three research grants of circa £40K a year, and in addition funds a leadership scholarship offered in partnership with the Florence Nightingale Foundation with an emphasis on registered nurses from a Black and minority ethnic background. The GNCT is a National Institute for Health Research (NIHR) non-commercial Partner. This means the studies that the GNCT funds may be eligible to access NIHR Clinical Research Network (CRN) support.
- 3 The overall total expendable fund for the GNCT was valued at £3.57 million at 31 March 2024. The GNCT retains a healthy reserve that is reviewed regularly by the Trustees and their advisors.

NMC involvement with the GNCT

- 4 Dr Lynne Wiggins has been the Council nominated Trustee since 4 November 2020 and has attended all Trustee meetings either in person or virtually. There are normally a minimum of two board meetings a year at which strategy, governance, investments, grants, and finance are reviewed.
- 5 During 2023-2024 the focus of research grant funding that is being progressed is the nursing contribution to reducing health inequalities.
- 6 Each grant process leads to approximately 20 proposals being submitted, and Dr Lynne Wiggins, along with two other Trustees, reviews all proposals and shortlists these for detailed independent review by two experts. The scoring and comments from these external reviews inform the selection of three proposals for the GNCT to consider at a board meeting. The lead nurse researchers who gain GNCT funding submit progress reports and a final report, which is received by a designated Trustee.

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Governance

- 7 Under the GNCT Trust Deeds (as amended in 2003) the GNCT is able to appoint to its full complement of six Trustees (registered nurses in England and Wales) of which one can be nominated by the Council.
- 8 The current Trustees are:
 - 8.1 Professor Susan Procter (Chair)
 - 8.2 Professor Annie Topping (Deputy Chair)
 - 8.3 Professor Daniel Kelly OBE
 - 8.4 Professor Arlene Wellman MBE
 - 8.5 Dr Lynne Wiggins OBE

Summary of work undertaken by the GNCT over the last 12 months

- 9 The grants awarded for 2023 were;
 - 9.1 Kingston University, "Addressing the retention of home visiting community nurses in England: a mixed methods study of strategies, impact, and outcomes" £39,964
 - 9.2 University of York, " Exploring the relationship between cultural and structural workforce issues and the retention of nurses working in general practice: A qualitative study" £39,922
 - 9.3 University College London, "Job satisfaction and intent to stay in neonatal nursing: an exploration of staff in England and Wales" £38,631
- 10 Dr Lynne Wiggins has also been involved in interviewing potential leadership scholars, in conjunction with the Florence Nightingale Foundation and successful candidates have had the opportunity to update the Board of Trustees on their leadership journey and project at a meeting during their time on the scholarship.

Next steps

- 1 The Council is to nominate an NMC Trustee from its registrant membership on 3 July 2024 (see NMC/24/56 item 12.2), as successor to Lynne Wiggins on who will stand down from the role.
- 2 The NMC appointed Trustee will submit an update report on the work of the GNCT biennially to cover the 24 month period, next due in July 2026.

General Nursing Council Trust for England and Wales

Council

Nomination of Council member trustee of the General Nursing Council Trust

Action requested:	<p>To approve the nomination of a Council member trustee of the General Nursing Council Trust (GNCT).</p> <p>For decision.</p> <p>The Council is recommended to approve the nomination of Flo Panel-Coates as Council nominated trustee of the General Nursing Council Trust (paragraph 11).</p>			
Key background and decision trail:	<ul style="list-style-type: none"> • Dr Lynne Wiggins was appointed as NMC nominated trustee of the GNCT in November 2020. • Lynne will step down from the role in 2024 and a successor is required. • In accordance with the GNCT’s governing document, the role is reserved for a registrant member of the Council. 			
Key questions:	<ul style="list-style-type: none"> • What is the GNCT and its purpose? • What is the structure, governance and management of the GNCT? • Does the Council approve the nomination of Flo Panel-Coates to be the Council nominated trustee of the GNCT, as successor to Lynne Wiggins? 			
Annexes:	<p>None.</p>			
Further information:	<p>If you require clarification about any point in the paper or would like further information, please contact the author or the director named below.</p> <table border="1" data-bbox="384 1713 1401 1852"> <tr> <td data-bbox="384 1713 858 1852"> Author: Alice Horsley Phone: 020 7681 5083 alice.horsley@nmc-uk.org </td> <td data-bbox="863 1713 1401 1852"> Assistant Director: Matt Hayday Phone: 020 7681 5516 matthew.hayday@nmc-uk.org </td> </tr> </table>		Author: Alice Horsley Phone: 020 7681 5083 alice.horsley@nmc-uk.org	Assistant Director: Matt Hayday Phone: 020 7681 5516 matthew.hayday@nmc-uk.org
Author: Alice Horsley Phone: 020 7681 5083 alice.horsley@nmc-uk.org	Assistant Director: Matt Hayday Phone: 020 7681 5516 matthew.hayday@nmc-uk.org			

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Nomination of Council member trustee of the General Nursing Council Trust

Discussion

Overview of the General Nursing Council for England and Wales Trust

- 1 The General Nursing Council for England and Wales Trust (GNCT) is an independent charitable trust (Registered Charity 288068). The Trust was set up in 1983 when the General Nursing Council for England and Wales, the regulatory body for the nursing profession in England and Wales during the preceding 60 years, was abolished under the Nurses and Midwives and Health Visitors Act 1979. The NMC is a successor organisation.
- 2 The GNCT seeks to promote the development of nursing for the benefit of society.
- 3 The GNCT funds research to enhance the practice and profession of nursing. The Trustees are also committed to advancing the education of student nurses and further education of Registered Nurses. The GNCT does this by funding research and through travel scholarships offered in partnership with the Florence Nightingale Foundation.

Structure, governance and management of the GNCT

- 4 The GNCT is governed by a Trust Deed, signed on 20 June 1983, and by an Order, effective from 5 March 2004, which altered the Charity's Trust.
- 5 An amendment to the Deed of Amendment (2003) was agreed during 2022-2023 to enable the GNCT to appoint to its full complement of six trustees.
- 6 The Trustees may consist of up to six Trustees under the following terms:
 - 6.1 Up to four Trustees may be appointed as "A" Trustees provided they are registered Nurses and a member of the nursing profession of England and Wales, at the time of appointment.
 - 6.2 One "B" Trustee may be appointed as a qualified member of the NMC and a registered nurse in England.
 - 6.3 One "C" Trustee may be appointed as a qualified member of the NMC and a registered nurse in Wales.
- 7 Trustees are appointed by reference to the existing GNCT Trustees and the representative bodies of the Nursing Profession.
- 8 There are normally a minimum of two board meetings a year at which strategy, governance, investments, grants, and finance are reviewed.

- 9 The day-to-day management of the Trust is delegated to the Secretary.
- 10 Dr Lynne Wiggins has been the NMC nominated GNCT Trustee since November 2020 and will step down in 2024. Lynne has been progressing discussions with Flo Panel-Coates, registrant Council member, who is content to be nominated to the role as Lynne's successor.
- 11 Recommendation: The Council is recommended to approve the nomination of Flo Panel Coates as Council nominated trustee of the General Nursing Council Trust.**
- 12 At its recent Board meeting on 21 June 2024, the GNCT discussed and supported the nomination proposed at paragraph 11, acknowledging this was subject to approval.

Next Steps

- 13 Subject to the recommendation being accepted, the Council Secretary will contact the GNCT Secretary regarding the nomination of Flo Panel Coates as the NMC nominated trustee to the GNCT, as successor to Lynne Wiggins.
- 14 The NMC nominated trustee of the GNCT will report to the Council biennially on the work of the GNCT, covering the preceding 24 month period, with the next report due in 2026.

Implications

The following were considered when preparing this paper:

Implication:		Location if in paper:	Content if not in paper:
Public protection/impact for people.	Yes	Paras 1-3	
Safeguarding considerations	Not Applicable		
The four country factors and considerations.	Yes		The GNCT's remit applies to England and Wales only.

Resource implications including information on the actual and expected costs involved.	Not Applicable		
Risk implications associated with the work and the controls proposed/ in place.	Not Applicable		
Legal considerations.	Yes		The NMC's nominated appointment complies with the Trust Deed.
Midwives and/or nursing associates.	Not Applicable		
Equality, diversity, and inclusion.	Not Applicable		
Stakeholder implications and any external stakeholders consulted.	Not Applicable	Paras 12 and 13	
Regulatory Reform.	Not Applicable		

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Council

Appointments Board Annual Report to Council 2023-2024

Action requested:	Report to the Council on the work of the Appointments Board during 2023-2024. For noting The Council is asked to note the report.	
Key background and decision trail:	The Appointments Board is a Committee of the Council. Its remit is to assist the Council in connection with the exercise of any function or process relating to the appointment of Panel Members and Legal Assessors to the Practice Committees and the appointment of Panel Members to the Registration Appeals Panel. The Board's Terms of Reference require it to report annually to the Council on its activities.	
Key questions:	1 What were the key areas of focus and outputs from the Appointments Board in 2023-2024? 2 What are the Appointments Board's key areas of focus and outputs in 2024-2025?	
Annexes:	None.	
Further information:	If you require clarification about any point in the paper or would like further information, please contact the author or the director named below.	
	Author: Mary Anne Poxton Phone: 020 7681 5440 maryanne.poxton@nmc-uk.org	Chair of Appointments Board: Jane Slatter

Appointments Board Annual Report to Council 2023-2024

Discussion

- 1 The primary focus of the Board's work is to ensure that effective arrangements are in place for the selection and appointment, training and performance management of Practice Committee members (Panel Members), Legal Assessors and Registration Appeal Panel Members.
- 2 The Board met seven times in 2023-2024. This included four full scheduled meetings (three of which were held in person) and three single item ad hoc meetings (all of which were held by video conference). The Board also met on 6 June 2024.

Board membership and effectiveness

- 3 The Board's membership is made up entirely of non-Council (partner) members to ensure an appropriate separation of the Board's work from that of the Council.
- 4 2023-2024 saw the departure of two Appointments Board members, Angie Loveless and Clare Salters, whose final terms ended on 29 February 2024.
- 5 An open, competitive selection exercise, resulting in the appointment of two new members, Surinder Birdi from 1 July 2023 and Yasmin Ullah from 1 March 2024.
- 6 Two further members of the Board will depart in 2024 when their final terms end – Jane Slatter, Chair, will leave on 5 August 2024 and Rob Allan on 30 September 2024.
- 7 A second open, competitive selection exercise resulted in the appointment of Surinder Birdi as Chair designate, to take office when Jane Slatter's final term ends on 5 August 2024 and three new members:
 - 7.1 Amanda Rawlings (from 1 June 2024)
 - 7.2 Susan Young (from 6 August 2024)
 - 7.3 Ken Batty (from 1 October 2024)
- 8 The Board will be at full complement (five members) from 1 June 2024 and will remain so as the new members come on board.
- 9 Findings from the 2023-2024 Board effectiveness review were considered in June 2024 and were in the main positive. Actions agreed to improve effectiveness included the need for clearer expectations to be set in advance as to the nature of the input needed from the Board, and for this to be timetabled appropriately (so

that the Board can influence decision-making) and made clear in any papers submitted to the Board.

Integration with the wider work of the Council

- 10 The Board remains committed to ensuring that its work is aligned with the Council's strategic aims, including the corporate plan 2024-2026 and the corporate priority to progress fitness to practise decisions in a timely and sustainable way that keeps people safe.
- 11 The Chair of the Board has continued to attend Open Council meetings when possible and has met regularly with the Chair of Council.
- 12 The Chair of the Council chaired both selection panels for new members of the Appointments Board. At the Chair's invitation, the Chair of the Board sat on the first selection panel, but not on the second as that exercise included the selection of a new Chair of the Appointments Board.
- 13 The Board has continued to receive updates on organisational developments, including:
 - 13.1 The NMC's response to whistleblowing concerns which were the subject of articles in *The Independent* online newspaper and the terms of reference for the independent investigations commissioned and the independent Culture Review.
 - 13.2 The rebalancing of the NMC's work and its investment in a Fitness to Practise Improvement Plan to deliver a sustainable caseload over the next eighteen months.
 - 13.3 The PSA's periodic review of the NMC and its audit of fitness to practise cases.
 - 13.4 The Panel Member worker status issue which will change the NMC's relationship with Panel Members in 2024-2025.
- 14 The Board is mindful that the above provide important context for its work and is committed to being agile in response to any upcoming recommendations which are relevant to its remit.

Plan for delivering high quality panels

- 15 The Board has overseen the development of a new three year plan for delivering Panel Members who make high quality decisions that protect the public and maintain public confidence in the nursing and midwifery professions. The plan is a live document which will reviewed in the light of the matters set out at paragraph 13 above.
- 16 The plan aims to ensure that Panel Members and Legal Assessors have the right skills; are empathetic to everyone involved in hearings; embody the NMC's values;

are efficient, engaged and technically proficient; reflect the diversity of the communities we serve; and are fit for the future.

Panel Member and Legal Assessor appointments

- 17 Ensuring that the NMC has sufficient Panel Members who make high quality decisions that protect the public continues to be a primary focus for the Board. It oversaw an open and competitive selection exercise in 2023, culminating in the appointment by the Council of a new cohort of Panel Members and Legal Assessors in November 2023 and January 2024.
- 18 In line with its usual practice, the Board carried out a review to identify any learning for future campaigns. This was incorporated in a new policy and process considered by the Board in February 2024 and approved in June 2024, which will govern future campaigns for the appointment of Panel Chairs and Members.
- 19 A further selection process will take place in 2024 to select a minimum of 140 additional Panel Members including Panel Chairs, to replace 90 Panel Members whose terms are due to end and to address requirements for increased hearing capacity. The aim is to recommend appointments to the Council in early 2025.
- 20 In line with the new policy and process approved by the Board, the campaign will continue to seek to increase the diversity of the Practice Committee pool so that it reflects the professions we regulate and the wider UK population. The application period is now open and will close on 17 July 2024.

Panel Member appointments, re-appointments, transfers and removals

- 21 In 2023-2024 the Board made recommendations to Council on the reappointment of a Panel Member for a second term and the transfer of three Panel Members between the Practice Committees. The Board has also put forward removals from the Practice Committee lists and informed Council of removals from Legal Assessor lists.
- 22 In June 2024, the Board agreed to recommend to Council the appointment of 95 Panel Members to hear registration appeals; the removal of Panel Members who have resigned from the Practice Committees; and to note that a Legal Assessor has resigned. These recommendations are the subject of a separate paper on the Council's agenda.
- 23 Before making any recommendations for appointment to hear registration appeals, reappointment or transfer between the Practice Committees, the Board ensures that Panel Members are meeting performance requirements, undertaking the necessary training, and have no outstanding complaints against them.

Complaints against Panel Members and Legal Assessors

- 24 The Board continues to have a standing item on its agenda at each meeting to ensure that it maintains high level oversight of all open complaints against Panel Members and Legal Assessors. This allows the Board to monitor the number of

Panel Members not being allocated to hearings and the effect on Committee capacity. Learning from complaints is used to inform other areas of the Board's work programme including the oversight of induction and training.

Induction and training

- 25 The Board is mindful of the importance of effective training for all Panel Chairs and Members to ensure they have the knowledge and skills to make robust, consistent and proportionate decisions which protect the public and maintain confidence in the nursing and midwifery professions. The Board is committed to ensuring that this encompasses the NMC's values and behaviours and reflects the organisation's commitment to tackling discrimination and inequality and to promoting diversity and inclusion.
- 26 In November 2023, the Board considered an evaluation of the 2023 annual refresher training programme for Panel Members. The Board was pleased to note that 98 percent of Panel Members had completed the training and feedback was generally positive. Panel Members who had not completed the training were not assigned to hearings until they had done so. Training included anti-racism training delivered by an external supplier and a case study delivered by the Panel Support team where racism was a contextual feature.
- 27 The Board approved the Panel Member training programme for 2024 with an overarching theme of 'efficient and effective fitness to practise events and fairness and equity in decision making'. Four sub themes included 'High quality decision making and reasoning' with a specific focus on cases involving discrimination and sexual misconduct.
- 28 In June 2024, the Board considered an evaluation of the most recent induction training programme for Panel Members and Legal Assessors. The Board was pleased to note that completion rates were high (98 percent for Fitness to Practise Committee members and 95% for Investigating Committee) and feedback from those who had undertaken the training was positive. The Board will consider the induction programme for 2025 in September 2024, taking into consideration the learning identified from this evaluation exercise.

Policy and fee review

- 29 The Board oversaw a light touch review to update policies sitting under the Panel Member and Legal Assessor Services Agreements, pending wider changes to the NMC's ongoing relationships with Panel Members and Legal Assessors.
- 30 The Board approved minor amendments to the Travel and Accommodation policy and the performance monitoring frameworks for Panel Members and Legal Assessors, as well as approving a new Social Media policy for use by prospective and current Panel Members.

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31 The Board also monitored the implementation of a revised approach to the Panel Member register of interests. Panel Member declarations are available on the NMC's website.

32 The Board agreed fee increases for Panel Members and Panel Chairs from 1 April as reported to the Council in March 2024.

Future Focus

33 The Board's focus for 2024-2025 is:

- 33.1 Continuing to ensure sufficient Panel Chairs, Panel Members and Legal Assessors are in place to enable fitness to practise decisions to be progressed in a timely and sustainable way that keeps people safe.
- 33.2 Oversight of the 2024 campaign to appoint new Panel Members and Chairs, including increasing the diversity of the Panel Member pool in line with the objective to have a Practice Committee membership which reflects the professions we regulate (for registrant Panel Members) and the wider UK population (for lay Panel Members).
- 33.3 Oversight of the implementation of the three year plan for delivering high quality Panel Members, ensuring the plan is adapted to align with any relevant recommendations arising from the NMC's response to the Culture review and investigations work, which will be published over the coming months.
- 33.4 Approval of the annual Panel Member training programme for 2024, ensuring an open, inclusive high performing learning culture with fairness and equity at its heart including ensuring that any new Panel Members and Chairs are properly inducted and trained to perform their role to a satisfactory standard under the performance monitoring framework.
- 33.5 The review of Panel Member and Legal Assessor Services Agreements and our ongoing relationship with Panel Members and Legal Assessors.

Implications

The following were considered when preparing this paper:

Implication:		Location if in paper:	Content if not in paper:
Public protection/impact for people.	Yes	Paras 11, 15 and 16	

Safeguarding considerations.	Yes		In developing the training programme for 2024, the Panel Support team held design and content meetings with a range of colleagues, including the NMC's safeguarding lead.
The four country factors and considerations.	Yes		The Board is mindful that the NMC is a four country regulator and seeks to reflect this in its programme of work.
Resource implications including information on the actual and expected costs involved.	Yes	Para 19	The cost of the selection process being carried out in 2024 is covered within the Panel Support team's budget.
Risk implications associated with the work and the controls proposed/ in place.	Yes		If we do not have high quality panels there is a risk that panels will not make decisions which protect the public and maintain public confidence in the effective regulation by the NMC. The Board has approved a new plan to deliver high quality panels which mitigates this risk.
Legal considerations.	Yes		All aspects of the Panel Member and Legal Assessor services agreements and the policies sitting under them must be compliant with the NMC's legal framework and other relevant legislation. General Counsel has provided direction and advice to ensure this.

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Midwives and/or nursing associates.	Yes		The Panel Member pool includes registered midwives. The 2024 Panel Member campaign will need to maintain sufficient numbers of midwife Panel Members to allow cases to be heard in a timely manner. The campaign will also seek to appoint nursing associates.
Equality, diversity, and inclusion.	Yes	Paras 16, 20, 25, 26, 27, 33.2 and 33.4	
Stakeholder implications and any external stakeholders consulted.	Yes	Not applicable	
Regulatory Reform.	Yes		The Board continues to be sighted on developments in relation to Regulatory Reform, receiving an update in October 2023. Regulatory Reform is one of six interlinked strands of work set out in the plan for delivering high quality panels.

Council

Chair's actions taken since the last meeting of the Council

Action requested:	Reports action taken by the Chair of the Council The Council is asked to note the report.
Key background and decision trail:	This paper reports action taken by the Chair of the Council since 22 May 2024 under delegated powers in accordance with Standing Orders. There has been one Chair's action: <ul style="list-style-type: none">• Appointment of Assistant Registrar (04-2024)
Key questions:	<ul style="list-style-type: none">• What action on minor, non-contentious or urgent matters falling under the authority of the Council (Scheme of Delegation, paragraph 4.6) has the Chair taken on behalf of the Council since the last meeting?
Annexes:	<ul style="list-style-type: none">• Annexe 1: - Chair's action 04/2024
Further information:	If you require clarification about any point in the paper or would like further information, please contact the author or the director named below. Secretary: Matthew Hayday Phone: 020 7681 5516 matthew.hayday@nmc-uk.org

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04-2024 Chair's Action

Under NMC Standing Orders, the Chair of the Council has power to authorise action on minor, non-contentious or urgent matters falling under the authority of the Council (Scheme of Delegation, paragraph 4.6). Such actions shall be recorded in writing and passed to the Secretary who maintains a record of all authorisations made under this paragraph. The Chair is required to report in writing, for information, to each Council meeting the authorisations which have been made since the preceding Council meeting.

Each Chair's action must set out full details of the action that the Chair is requested to authorise on behalf of the Council.

Requested by: Secretary to the Council	Date: 03 June 2024
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Appointment of Assistant Registrar

- 1 The Chair is asked to approve the re-appointment of the following member of staff as an Assistant Registrar (AR), to act on behalf of the Registrar, in relation to the matters set out in paragraph 3, in accordance with Article 4 of the Nursing and Midwifery Order 2001 and the Standing Orders:

Ximena Hayes, Case Assessor

Background

- 2 The appointment of Deputy and Assistant Registrars is governed by Article 4(5) of the Nursing and Midwifery Order 2001 ('the Order'), which states:

a) *If the Council appoints a deputy or assistant Registrar and that Deputy or Assistant Registrar is authorised by the Registrar to act for him in any matter, any reference in this Order to "the Registrar" shall include a reference to that Deputy or Assistant Registrar.*

- b) Standing Order 6.6 describes the process for the appointment of Deputy and Assistant Registrars by the Council:

"6.6 Deputy and Assistant Registrars

6.6.1 The Council may, upon the nomination of the Registrar, appoint a member of staff as a Deputy or Assistant Registrar. 6.6.2 The Registrar may authorise in writing any person appointed by the Council under Standing Order 6.6.1 to act on her / his behalf in any matter.

6.6.3 In determining whether to authorise a person under Standing Order 6.6.2, the Registrar shall ensure that (a) appropriate training, guidance, and procedures are available to enable the proper discharge of the delegated

functions; (b) due consideration is given to (i) the segregation of duties, where appropriate; (ii) potential conflicts of interest.”

- 3 Assistant Registrars are appointed in the Quality of Decision Making team to:
 - 3.1 Review or reconsider initial decisions not to investigate fitness to practise cases further, following an “initial consideration of an allegation of impaired fitness to practise” under Rule 2A of the Order.
 - 3.2 Pursuant to Rule 7A of the Order, carry out reviews of decisions in Fitness to Practise cases which:
 - 3.2.1 Find there is no case to answer in a fitness to practise case
 - 3.2.2 Recommend that undertakings should be agreed with the registrant or that undertakings should no longer apply
 - 3.2.3 Direct that fitness to practise allegations should not be considered further
 - 3.3 Make decisions on Voluntary Removal Applications
- 4 In May 2021, the Council approved the appointment of three Assistant Registrars **(NMC/21/39)** to carry out all of the decision-making functions set out in paragraph 3 above.
- 5 In November 2023, one of the Case Assessors, **Ximena Hayes**, appointed as an Assistant Registrar in May 2021, came to the end of their secondment and moved back to their substantive role. The Council approved the recommendation to rescind the appointment of the colleague as an Assistant Registrar **(NMC/23/94)**, as they were no longer required to act on behalf of the Registrar, in accordance with Article 4 of the Nursing and Midwifery Order 2001 and the Standing Orders.
- 6 The basis for the recommendation to re-appoint is set out below:
 - a) The colleague named in paragraphs 1 and 5 now been appointed in a permanent role as Case Assessor and the Chair’s approval is sought to re-appoint them in the role of Assistant Registrar.
 - b) The Registrar is satisfied that:- (i) appropriate training, guidance, and procedures are available to the decision-makers to enable the proper discharge of their functions as an Assistant Registrar and; (ii) due consideration has been given to (iii) the segregation of duties, where appropriate and (iv) potential conflicts of interest.
 - c) To ensure consistency of decision-making in the pool of Assistant Registrars we will (i) continue to provide them with relevant training; (ii) quality assure their decisions, and (iii) provide them with feedback themes and learning to ensure continuous improvement in the decision-making process.

Signed  (Chair)

Date 11 June 2024

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