# Meeting of the Midwifery Committee

To be held between 12:45 and 13:30 on Tuesday 28 October 2014 at 23 Portland Place, London, W1B 1PZ

## Agenda

<table>
<thead>
<tr>
<th>Item</th>
<th>Description</th>
<th>Reference</th>
<th>Time</th>
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<tr>
<td>1</td>
<td>Welcome and Chair’s initial statement</td>
<td>M/14/51</td>
<td>12:45</td>
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<td>2</td>
<td>Apologies for absence</td>
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<td>Declarations of interest</td>
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<td>Minutes of the previous meeting</td>
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<td>5</td>
<td>Summary of actions</td>
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<td>6</td>
<td>Revalidation and review of the Code: update</td>
<td>M/14/56</td>
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<td>Director of Continued Practice</td>
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<td>7</td>
<td>LSA annual report and quarterly quality monitoring report of the LSAs</td>
<td>M/14/57</td>
<td>13:15</td>
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<td>Assistant Director, Education and Quality Assurance</td>
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<td>(oral)</td>
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<td>8</td>
<td>Any other business</td>
<td>M/14/58</td>
<td>13:25</td>
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## Items for discussion

The next meeting of the Midwifery Committee is scheduled to be held on Wednesday 25 February 2015 at 10:00 at 23 Portland Place, London W1B 1PZ.
Meeting of the Midwifery Committee
Held at 10:00 on 25 June 2014
at Atlantic Quay, Glasgow, G2 8LU

Minutes

Present

Members:

Anne Wright  Chair
Pradeep Agrawal  Committee Member
Kirsty Darwent  Committee Member
Patricia Gillen  Committee Member
Ann Holmes  Committee Member
Marie McDonald  Committee Member

NMC officers:

Katerina Kolyva  Director of Continued Practice
Chris Bell  Standards Development Manager (by teleconference)
Elizabeth Hancock  Revalidation research and evidence lead officer (by teleconference)
Paul Johnston  Council Services Manager (minutes)
Anne Trotter  Acting Assistant Director, Education and Quality Assurance

Observers:

Zoe Boreland  DHSSPSNI
Yvonne Bronsky  LSAMO for South East and West of Scotland
Louise Silverton  Royal College of Midwives
Mary Vance  LSAMO for the North of Scotland LSA Consortium
Verena Wallace  LSAMO, Northern Ireland

The meeting of the Midwifery Committee commenced at 10:15.
Minutes

**M/14/29 Welcome from the Chair**

1. The Chair welcomed all attendees to the meeting.

**M/14/30 Apologies for absence**

1. Apologies for absence were received from Lorna Tinsley (Committee member) and Alison Sansome (Director of Registration).

**M/14/31 Declarations of interest**

1. There were no declarations of interest.

**M/14/32 Minutes of the previous meeting**

1. The Committee requested that the second sentence of M/14/24/4(a) be removed.

2. Subject to this amendment, the Committee agreed the minutes of the meeting held on 29 April 2014 as a correct record.

**M/14/33 Matters arising**

1. The Committee noted progress on responding to actions arising from previous meetings of the Council. In discussion, the following points were noted:

   a) **M/14/21.** The NMC did not currently collect data on the number of occasions on which either the midwife under investigation or the investigating officer was on sick leave. This formed part of a wider issue of performance management within Local Supervising Authorities, which would be explored through quarterly monitoring activity.

   b) Should any concerns around performance management emerge through this activity, the above issue of sick leave was one area that could be explored further through monitoring activity; any such concerns around performance management would be reported to the Midwifery Committee.

**M/14/34 Code review update**

1. The Committee received a presentation from the Director of Continued Practice and the Standards Development Manager on the views gathered to date through the consultation on proposed revisions to the Code. The Committee were asked to provide comments on the draft revised Code along the following themes:
2. In discussion, the following points were noted by the Committee:

a) Revisions to the Code reflected the need to cover all scopes of practice and stipulations on revalidation; as such, the revised Code was longer than the current document. Language used in the Code needed to be user-friendly and be tailored to meet the needs of various audiences; this included the Committee recommending the use of ‘registrant’ and ‘the NMC’ rather than ‘you’ and ‘we.’

b) In order to ensure that nursing and midwifery students were taught on the revised Code, the NMC would need to engage further with education institutions on embedding the revised Code within nursing and midwifery courses. This was an area for further discussion at the Education Advisory Group.

c) Sections on raising concerns and on whistleblowing needed to be separate points as they were two distinct mechanisms.

d) Fundamentals of care were core to the revised Code, as this area was a key theme arising from the Francis Inquiry.

e) A suggestion was made to include clarification of the purpose of the Code as part of the introduction; and to include a further section that placed a clear onus on registrants to determine which sections of the revised Code applied to them and what their responsibilities were under those sections.

f) Engagement by registrants with social media remained a relatively new phenomenon and it would take more time for registrants using social media to fully understand what were acceptable distinctions between their professional and private lives. The revised Code had a role to play in explicitly setting out the professional standards that registrants should aspire to in using social media; similarly, it would be helpful within the revised Code to include broad stipulations on what practising nurses and midwives could disclose on social media platforms. Officers agreed to review paragraph 114 of the revised Code accordingly.

3. Observers noted that the language used in the Code should aim to be similar to that used in guidance issued by the NMC on the fitness to practise process. Observers also noted that some comments had been received on the use of “we” and “they” having been perceived as divisive.
4. The Chair of the Committee thanked members and observers for their comments.

**Action:**
Include item on Education Advisory Group agenda on engagement with education institutions on the revised Code

**For:**
Secretary to the Advisory Group

**By:**
28 October 2014

**M/14/35 Revalidation update**

1. The Committee considered the paper, which set out how the results of Part 1 of the revalidation consultation had informed the content and design of Part 2 of the consultation. The Committee received a presentation from the Revalidation research and evidence lead officer, which expanded on the points within the paper.

2. The Committee was asked to comment primarily on feedback received through part 1 of the consultation on third party confirmation and on the registration of Specialist Community Public Health Nurses (SCPHNs) and practice hours.

3. In discussion on third party confirmation, the following points were noted:

   a) 84% of midwives responding to part 1 of the consultation had supported the proposal that a Supervisor of Midwives provide third party confirmation for revalidation purposes. Supervisors of Midwives would need additional training and support to undertake this role.

   b) It was important to ensure that any confirmation process was as streamlined as possible. The Committee therefore advised that any proposal involving two individuals being sought for confirmation needed to be carefully considered to ensure that it was not duplicative.

   c) Service users would play an important role in providing feedback but it was not envisaged that this feedback would contribute toward the formal confirmation mechanism.

   d) Evidence secured through annual performance reviews of midwives should form part of the three-yearly revalidation process.

4. The Committee agreed to endorse the principle that supervisors of midwives’ views should be embedded in the confirmation process as part of revalidation of midwives. The Committee agreed that options and process proposals to support this principle would be developed further following part 2 of the revalidation consultation and considered at the next Committee meeting.
In discussion on the registration of SCPHNs and practice hours, the following points were noted:

a) The current proposal out for consultation was that any individual registered as a nurse or midwife would be required to undertake 450 practice hours every three years; and that, for any individual also registered as a SCPHN, their practice hours as a SCPHN would also toward those hours required to maintain their registration as a nurse of midwife.

b) Individuals currently practising either primarily or wholly as SCPHNs when using their midwifery registration were currently required to submit an intention to practise; there was scope in so doing for a lack of clarity about how many hours SCPHNs were dedicating to either SCPHN or midwifery practice. The Committee would receive an update on what was currently mandated under legislation in this area.

c) The Committee discussed the appropriateness of keeping the current standard of 900 hours for midwives and SCPHN. The proposed 450 practice hours for confirmation would be against the individual's scope of relevant practice; practice hours did not necessarily mean in clinical practice. The Committee noted that it was for the individual undertaking the confirmation to confirm which scope of practice was being reported against.

The Chair of the Committee thanked members and observers for their comments.

M/14/36 Quarterly quality monitoring report of the LSAs

1. The Committee considered the report, which set out the findings arising from quarterly quality monitoring by local supervising authorities (LSAs) across the United Kingdom for the periods 1 April 2013 – 31 March 2014.

2. The Committee noted that a particular issue had arisen in respect of the transfer of confidential records from a terminally ill independent midwife to a Local Supervising Authority. The Committee expressed concerns on the apparent intractability of the issues that had arisen in this case, and agreed that the Chair of the Committee would write on behalf of the Committee to the applicable LSA.

Action: Prepare correspondence for the Chair of the Committee as per paragraph 2 above
For: Acting Assistant Director, Education and Quality Assurance
By: 28 October 2014
M/14/37  Midwifery review

1. The Committee received a tabled paper (NMC/14/58, “Review of midwifery regulation: update”) that was presented to the Council on 4 June 2014.

2. Members noted that two further meetings of the Committee were required to discuss progress with the King’s Fund on the midwifery regulation review; these would be scheduled for September 2014 and January 2015.

Action: Convene additional meetings of the Committee in September 2014 and January 2015
For: Secretary to the Committee
By: September 2014

M/14/38  NMC strategy

1. The Committee received an update on the development of the NMC’s strategy for 2015 – 2020. The Council, at its meeting on 4 June 2014, had discussed key strategic themes and transformation priorities.

2. A further paper would go to the Council on 30 July 2014 developing these themes and priorities further; it was currently intended that the Council would consider the final strategy for approval at the January 2015 meeting.

M/14/39  Education Advisory Group report

1. The Committee considered the report, which detailed discussions held at recent meetings of the Education Advisory Group.

2. In particular, the Committee noted the Group’s discussions on the EU Mutual Recognition of Professional Qualifications (MRPQ) directive; and on the ongoing Shape of Caring review. This review was focussed on nursing.

M/14/40  Committee work plan

1. The Committee considered the work plan for future meetings. A draft work plan for 2015 would be presented to the Committee for discussion at the October 2014 meeting.

Action: Develop a draft work plan for the Midwifery Committee for 2015
For: Secretary to the Committee
By: 28 October 2014

M/14/41  Any other business

1. The Committee noted that it held one current vacancy following
Frances McCartney’s resignation. Two partner members’ second terms of office were due to expire at end-December 2014, and legislation governing the Midwifery Committee restricted members to two terms of office. A recruitment exercise would therefore shortly commence to fill those further vacancies by January 2015.

2. The Committee noted the experience and expertise held by the two partner members whose terms of office were expiring; and asked that those members continue to attend Committee meetings in early-2015 to provide for continuity. The Secretary to the Committee would explore options to allow for this.

3. The Director of Continued Practice noted that the NMC was currently evaluating its pre-registration standards and was to commission an external organisation to assist with the evaluation. The Committee’s views would be sought in due course.

4. The Committee noted that it had not been able to hold a seminar on registration at the meeting and agreed that this be scheduled for the next Committee on 28 October 2014.

5. The Chair of the Committee sought members’ views on the meeting. Members confirmed that they were content with the quality of papers and that the Chair had managed the agenda business well.

6. The Chair of the Committee thanked Verena Wallace, as it was the last meeting that she would attend as an observer.

| Action: | Examine options to allow for partner members whose terms of officer are to expire at end-2014 to continue to attend the Committee |
| For: | Secretary to the Committee |
| By: | 28 October 2014 |

| Action: | Schedule seminar on registration for the next Committee meeting; and add “evaluation of standards” to Midwifery Committee work plan |
| For: | Secretary to the Committee |
| By: | 28 October 2014 |

The date of the next meeting is to be 28 October 2014 in London.

The meeting of the Midwifery Committee ended at 13:16.

SIGNATURE..............................................................................................................................................

DATE............................................................................................................................................................
Midwifery Committee

Summary of actions

Action: For discussion.

Issue: A summary of the progress on completing actions agreed by the meeting of Midwifery Committee held on 25 June 2014.

Core regulatory function: Supporting functions.

Corporate objectives: Corporate objective 8: “We will develop effective policies, efficient services and governance processes that support our staff to fulfil all our functions.”

Decision required: To note the progress on completing the actions agreed by the Midwifery Committee at the meeting held on 25 June 2014.

Annexes: There are no annexes attached to this paper.

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.

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Director: Katerina Kolyva
Phone: 020 7681 5882
katerina.kolyva@nmc-uk.org
## Summary of the actions arising out of the Midwifery Committee meeting on 25 June 2014

<table>
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<tr>
<th>Minute</th>
<th>Action</th>
<th>For</th>
<th>Report back to: Date:</th>
<th>Progress</th>
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<tbody>
<tr>
<td>M/14/34</td>
<td>Include item on Education Advisory Group agenda on engagement with education institutions on the revised Code</td>
<td>Secretary</td>
<td>Midwifery Committee. 28 October 2014</td>
<td>Completed. This has been added to the agenda for the Education Advisory Group on 24 November 2014</td>
</tr>
<tr>
<td>M/14/36</td>
<td>Prepare correspondence for the Chair of the Committee as per paragraph 2 above</td>
<td>Acting Assistant Director, Education and Quality Assurance</td>
<td>Midwifery Committee. 28 October 2014</td>
<td>An oral update will be given at the Committee meeting.</td>
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<td><em>Paragraph 2: (The Committee noted that a particular issue had arisen in respect of the transfer of confidential records from a terminally ill independent midwife to a Local Supervising Authority. The Committee expressed concerns on the apparent intractability of the issues that had arisen in this case, and agreed that the Chair of the Committee would write on behalf of the Committee to the applicable LSA.)</em></td>
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<tr>
<td>M/14/37</td>
<td>Convene additional [confidential] meetings of the Committee in September 2014 and January 2015</td>
<td>Secretary</td>
<td>Midwifery Committee. 28 October 2014</td>
<td>Completed. The January 2015 Committee is scheduled for 21 January 2015.</td>
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<td>M/14/40</td>
<td>Develop a draft work plan for the Midwifery Committee for 2015</td>
<td>Secretary</td>
<td>Midwifery Committee. 28 October 2014</td>
<td>A draft work plan for the Midwifery Committee in 2015 has been developed. It is important that the work plan be developed alongside Committee objectives for 2015. The Committee will have the opportunity to review proposed objectives at its next ordinary meeting in February 2015; and will review the work plan for 2015 at every ordinary meeting of that year</td>
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<tr>
<td>M/14/41</td>
<td>Examine options to allow for partner members whose terms of officer are to expire at end-2014 to continue to attend the Committee</td>
<td>Secretary</td>
<td>Midwifery Committee. 28 October 2014</td>
<td>Three partner members’ terms of office expire on 31 December 2014. Each of those members has served the maximum terms of office permitted within the NMC’s Standing Orders. All partner members whose term of office is to expire on 31 December 2014 remain welcome to attend future meetings of the Committee in an observer capacity.</td>
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<td>M/14/41</td>
<td>Schedule seminar on registration for the next Committee meeting; and add “evaluation of standards” to Midwifery Committee work plan</td>
<td>Secretary</td>
<td>Midwifery Committee. 28 October 2014</td>
<td>Due to other pressing business, the seminar on registration has been postponed until the ordinary meeting of the Committee in February 2015. This will provide an induction</td>
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<td>opportunity for newly appointed partner members. Evaluation of standards has been added to the draft Committee work plan for 2015</td>
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Revalidation and Code review update

Midwifery Committee
28th October 2014
Revalidation and Code evidence gathering

- 6 month consultation in two parts
- 5 revalidation and Code summits March – July 2014
  - Attended by over 1200 stakeholders
  - Mostly managers/leaders of nurses and midwives.
- Extensive stakeholder engagement directly engaged approx. 2750 stakeholders
- Social media monitoring
- Close work with steering groups including public and patient forum
Consultation - part one

- Online survey (January to March) on the revalidation model and Code
- 9,799 responses (6,741 online + 3,058 omnibus)
- Focused on operational aspects of the model, gathering intelligence on how it will work across all settings
- Gauged initial views on the content of the revised Code
- Outcomes informed part 2, drafting a revised Code and further revalidation model development.
Consultation part two

- May – August 2014
- Considered draft revised Code and refined revalidation model
- Online survey enhanced with qualitative research, including deliberative workshops, focus groups and online forums with nurses and midwives, employers, patients/public and seldom heard groups
- 1,652 responses from individuals (110 responses from organisations / stakeholders)
The Code

• Awareness and respect of the Code high among nurses and midwives

• The quantitative results suggest respondents found the language and tone to be good (83% of individuals, 70% organisations) and easy to understand (83% individuals, 68% organisations)

• Some concerns expressed in the online consultation, qualitative groups and stakeholder events about the tone being too ‘negative’ and ‘punitive’

• In the online consultation, nurses and midwives generally expressed confidence about applying the Code to their scope of practice (90% were confident)

• However, nurses in some scopes of practice e.g. education, management, were less confident
The Code

- Feedback from the stakeholder summits, online consultation and organisation responses was that many found the draft Code too long and not well structured

- Eight main additions/amendments to revised Code:
  - Raising concerns;
  - Prescribing and medicines management;
  - Maintaining clear professional/sexual boundaries;
  - Patient and public expectations;
  - Social networking;
  - Duty of Candour;
  - Emergency action;
  - Fundamentals of care

- Detailed comments re the above at stakeholder summits, online consultation and organisational responses which are being considered in the final Code revisions
The revalidation model

• Nurses, midwives and members of the public/patients in the Ipsos research were generally positive about the potential for revalidation to improve the regulation of nurses, and improve patient care.

• However, there were concerns about practical issues regarding how the model would work, e.g. how confirmation would work in practice, especially for nurses/midwives in some scopes of practice.

• There was also a desire to ensure that the system is as robust as possible.
Third party confirmation

- 77% of nurses responding to the consultation would have access to a UK registered nurse who oversees them and is familiar with their practice (one-confirmer model);
- 15% would have access to a two-confirmer model (a non-registrant manager plus a peer registrant).
- 77% of midwives had access to a UK registered midwife who oversees them and is familiar with their practice;
- The qualitative research identified three types of registrant who would not be able to confirm using either model: those working overseas; those working in independent practice; and agency nurses.
Continuing Professional Development (CPD)

• In the Ipsos qualitative groups, all audiences welcomed the inclusion of a CPD requirement in the revalidation model. Nurses, midwives and patients/members of the public thought that CPD could have a positive impact on patient care.

• Clarity and guidance needed from the NMC on what could be counted as CPD.

• ‘Participatory’ element broadly welcomed, but clear definition needed.

• Nurses and midwives expressed the need for CPD to be high quality and evidenced.

• Importance stressed for an outcomes-based approach
Reflective accounts and feedback

- Agreement about the importance of nurses/midwives reflecting on their practice in both the Ipsos groups and other stakeholder events.

- The concept of providing reflective accounts as a part of revalidation was generally accepted.

- However, questions were raised about preparing reflective accounts based on feedback. There were practical and ethical concerns raised about collecting feedback from patients, especially certain groups.

- Some nurses and midwives therefore felt that reflective accounts should not be based on feedback alone, but other elements should be incorporated, such as reflection on events/experiences.
Next steps

• Review of evidence sources to refine revalidation model and finalise the Code

• Code and revalidation strategic policy to be considered at December Council

• Evidence collated into two reports (Code and revalidation) and published mid November

• Planning for revalidation pilots
Revalidation pilots

Commences: early 2015

Purpose: test the process, tools and model

Outcomes: will inform refining the model, guidance, supporting information and NMC/employer systems and processes

Coverage: settings to reflect the diversity of the register
Thank you

Questions and Feedback