

# Council Open 23 September 2020

MEETING 23 September 2020 09:30

PUBLISHED 16 September 2020



**Meeting of the Council**To be held by teleconference at 09:30am on Wednesday 23 September 2020

# Agenda

| Philip<br>Chair | o Graf<br>r   | Fionnuala Gil<br>Secretary | I                        |
|-----------------|---|----------------------------|--------------------------|
| 1               | Welcome and Chair's opening remarks   | NMC/20/73                  | 09:30                    |
| 2               | Reflections on the past six months  | NMC/20/74                  |                          |
|                 | Chief Executive and Registrar Ruth Walker Contributions from NMC colleagues who returned to clinical practice Chair |                            |                          |
| 3               | Apologies for absence   | NMC/20/75                  |                          |
| 4               | Declarations of interest  | NMC/20/76                  |                          |
| 5               | Minutes of the previous meeting   | NMC/20/77                  |                          |
|                 | Chair   |                            |                          |
| 6               | Summary of actions  | NMC/20/78                  |                          |
|                 | Secretary   |                            |                          |
| 7               | Executive report  | NMC/20/79                  | 10:00-10:45<br>(45 mins) |
|                 | Chief Executive and Registrar/Executive   |                            | (10 1111110)             |
|                 | Comfort break   |                            | 10:45-11:00<br>(15 mins) |

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| Matt | er for decision   |           |                          |
|------|---|-----------|--------------------------|
| 8    | 8.1 Adroddiad Monitro'r Cynllun iaith Gymraeg ar<br>gyfer y cyfnod rhwng 1 Ebrill 2019 a 31 Mawrth 2020 | NMC/20/80 | 11:00-11:10<br>(10 mins) |
|      | 8.2 Welsh Language Scheme Monitoring Report 2019-2020   |           |                          |
|      | Executive Director, Strategy and Insight  |           |                          |
| Matt | ers for discussion  |           |                          |
| 9    | Impact of Covid-19 on our 2020-2025 Strategy  | NMC/20/81 | 11:10-11:50              |
|      | Executive Director, Strategy and Insight/Executive Director, Resources and Technology Services          |           | (75 mins)                |
|      | Comfort break   |           | 11:50-12:00<br>(10 mins) |
|      | Impact of Covid-19 on our 2020-2025 Strategy (continued)  |           | 12:00-12:35              |
|      | Executive Director, Strategy and Insight/Executive Director, Resources and Technology Services          |           |                          |
| 10   | Questions from observers  | NMC/20/82 | 12:35                    |
|      | Chair   | (Oral)    |                          |
| Mat  | ters for information  |           |                          |
| 11   | Chair's action taken since the last meeting   | NMC/20/83 |                          |
|      | Chair   |           |                          |
|      | CLOSE   |           | 12:50                    |
|      |   |           |                          |
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Item 5 NMC/20/77 23 September 2020



Meeting of the Council Held on 29 July 2020 by videoconference.

# **Minutes**

#### Members:

Philip Graf Chair Hugh Bayley Member Karen Cox Member Maura Devlin Member Claire Johnston Member Robert Parry Member Marta Phillips Member Derek Pretty Member Lorna Tinsley Member Ruth Walker Member Anne Wright Member

#### In attendance

Jane Slatter Chair, Appointments Board Sue Whelan Designate Council member Lynne Wigens Designate Council member Anna Walker Designate Council member

#### **NMC Officers:**

Andrea Sutcliffe Chief Executive and Registrar

Emma Broadbent Executive Director, Professional Regulation

Sarah Daniels Director, People

Matthew McClelland Executive Director, Strategy and Insight

**Andy Gillies** Executive Director, Resources and Technology Services

Geraldine Walters Executive Director, Professional Practice

**Edward Welsh** Executive Director, Communications and Engagement

Clare Padley General Counsel

Fionnuala Gill Secretary to the Council Pernilla White Senior Governance Manager

Legislation Reform Lead (for NMC/20/68 only) John Lucarotti Dr David Foster

Independent Chair, Post-registration steering group

(from NMC/20/68)

A list of all who joined by teleconference to listen to the meeting is at Annexe A.

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#### **Minutes**

# NMC/20/62 Welcome and Chair's opening remarks

- 1. The Chair welcomed all attendees to the virtual Council meeting. The Council welcomed in particular, Jane Slatter, Chair, Appointments Board and Dr David Foster, Chair, Post-registration Steering Group who were joining the meeting.
- 2. The Chair noted the successful launch of the search and selection process for a new member for Scotland to join the Council. As well as living or working in Scotland, the new member would also need to bring significant midwifery expertise, helping the Council to ensure that the perspective of midwifery was always heard. The Council was also offering two people the opportunity to join as Associates and wished to attract registered midwives and/or registered midwifery or nursing professionals from black, Asian and minority ethnic communities.

# NMC/20/63 Apologies for absence

1. Apologies had been received from Council member, Stephen Thornton.

#### NMC/20/64 Declarations of interest

- 1. In relation to **NMC/20/68 Emergency rule changes** all registrant members and Geraldine Walters declared an interest in relation to the proposed amendments. These were not considered material such as to require those concerned to withdraw from discussion or decisions.
- 2. In relation to NMC/20/69 Update on review of Post Registration Standards all registrant members and Geraldine Walters declared an interest in the update. These were not considered material such as to require those concerned to withdraw from the discussion.

# NMC/20/65 Minutes of the previous meeting

1. A correction was noted to the attendance list in the minutes of the previous meeting. Jane Beach represented Unite (not Unison). Subject to that correction, the minutes of the meeting on 2 July 2020 were agreed as an accurate record.

# NMC/20/66 Summary of actions

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

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### NMC/20/67 Executive Report

- 1. The Chief Executive and Registrar introduced the Executive report.
- 2. In discussion, the following points were noted:
  - a) The NMC's equality impact assessment (EQIA) of our response to Covid-19 up to 30 June 2020 was an impressive piece of work by Aishnine Benjamin and the Equality Diversity and Inclusion team with input from colleagues across the organisation. The EQIA would be updated on a regular basis to reflect subsequent activities and decisions over the coming months.
  - b) Publication of the Preceptorship Principles was welcome. These had been co-produced with and endorsed by the four Chief Nursing Officers (CNOs). It was for employers to ensure that the right environment and support for newly registered nurses, midwives and nursing associates were in place. Conversations were continuing with system and quality regulators about how this could be factored into their work with providers. Some form of evaluation or assessment of the impact of the principles in due course would be helpful.
  - c) The request made by the review team led by Donna Ockenden for the disclosure of all data and related documents held by the NMC concerning Shrewsbury and Telford NHS Trust since 1995 was significant. The Executive was satisfied that the resources and capacity to respond were available and additional temporary staff had been recruited to support this.
  - d) The NMC was writing to the Chair of the Public Accounts Committee to provide registration data and to amplify the written evidence already provided to support the inquiry into the nursing workforce in England.
  - e) The Chair and Chief Executive and Registrar's meeting with the Secretary of State for Health and Social Care, had been constructive and included discussion of international recruitment. Whilst the overall number on the permanent register had continued to grow as highlighted in the recently published registration data report, the Covid-19 pandemic was likely to affect the flow of overseas applicants.
  - f) The objective structured clinical examination (OSCE) test centres had reopened on 20 July 2020. Individuals who had joined the temporary register to support the UK's response to Covid-19 were being encouraged to take the OSCE to join the permanent register. Appropriate social distancing and protective measures had been put in place and were working well. Sufficient capacity was available and more would be released in future. A taskforce had also been established with representatives from the four countries, to monitor sector demand and address any issues.
  - g) The Code campaign had been initiated as a way of supporting professionals with quick and accessible additional information, recognising the pressures and challenges posed by Covid-19. Seven animations were currently being developed as well as social media guidance; the first animation would be published shortly.

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- The 2020-2025 strategy contained a commitment to explore further how the NMC could produce supportive information distinct from formal standards.
- 3. The Council welcomed the new public support newsletter and the Public Support Service was congratulated for being shortlisted for Patient Safety Team of the Year in the Patient Safety Awards. The Council also congratulated Andrea Sutcliffe, and Emma Broadbent on winning the Equality and Inclusion Senior Champion 2020 award at the Annual Employers Network for Equality and Inclusion Awards.

# Performance and financial monitoring report for quarter one (April to June 2020)

- 4. The Executive Director, Resources and Technology Services introduced the quarter one report and noted that performance against the corporate plan and some KPIs had been negatively affected by Covid-19. The budget had also been affected, but in a net positive way, for this financial year. An update on the impact of Covid-19 on the strategy for 2020-2025 and the delivery plan and budget for 2020-2021 would be presented to the Council in September 2020.
- 5. In discussion, the following points were noted:
  - a) The new Microsoft Dynamics (MD) 365 would replace day to day use of the WISER registrations system by the contact centre and registration staff. It was anticipated that WISER would need to be retained as an interface with the Fitness to Practise case management, although the options would be explored. The Executive Director confirmed that both WISER and MD365 would draw data from the same single source.
  - b) Due to reprioritisation arising from Covid-19, introduction of the new test of competence had been deferred to April 2021.
  - c) The update on the approach to restoring Fitness to Practise (FTP) activity was welcome. The caseload had already been high at the end of March 2020 compared to March 2019 prior to any impact arising from Covid-19 and this continued to be a challenge. Additional resources had been approved to assist with this work and external support had been brought in to review current volumes and assist with future forecasting and caseload projections and help identify potential streamlining opportunities.
  - d) Delays were distressing for all involved in FTP processes. Individuals involved in cases were being kept updated by case officers. However, once the trajectory was clear, consideration would be given to broader communications to provide a clear picture of likely timescales.
  - e) Whilst staff turnover figures were in a good place, resource gaps were visible in all directorates. Recruitment had initially been paused at the onset of the pandemic; a phased approach was now in place with the most pressing recruitment being undertaken first and further phases being rolled out to ensure that the right capacity was available.

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### Corporate Risk Register at 30 June 2020

- 7. The Executive Director, Resources and Technology Services introduced the Corporate risk register.
- 8. The Executive Director highlighted the addition of a new risk FIN20/01 to reflect that long-term funds were now being invested. The Investment Committee had reviewed the risk and concluded that it was misdescribed: revisions had been suggested to ensure that the risk addressed the main concern of short-term capital loss. In the long term, gains from investment should help keep the fee at £120 a year. The risk description would be revised and brought back to Council when the Corporate risk register was next presented.
- 9. In discussion, the following points were noted:
  - a) The replacement of the emergency education standards with a set of recovery standards by the end of September 2020 was positive. This would provide a more stable learning environment for students in all years and ensure that current final year students could qualify and register as planned. Approximately 80 percent of students were expected to graduate in the Autumn. There remained concerns going forward relating to placement availability on the part of providers and the requirements of the EU directive.
  - b) The implementation of the second stage of the new organisational design had been rescheduled until the end of the year due to the Covid-19 impact. In the meantime, work on seven key reviews was progressing to identify how to configure a range of functions and activities in a corporate and streamlined way to support delivery of the new strategy.
  - c) The Council noted that the organisational design had created some large directorates and was assured that work was underway to review spans of control and ensure these were appropriate, particularly for larger directorates, mindful of the significant volume of work across the organisation and the stamina of individuals.
- 10. The Council thanked the Executive and staff across the organisation for the continued hard work and commitment.

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Action: Present the plans to make further changes for Quarter two reporting

to the Council.

For: Executive Director, Resources and Technology Services

By: 23 September 2020

Action: i. Share the expected trajectory of fitness to practise caseloads

with Council.

ii. Once the trajectory is clear, consider wider communications to

provide a picture of likely timescales.

For: Executive Director, Professional Regulation

By: 23 September 2020

### NMC/20/68 Emergency rule changes

1. The Executive Director, Strategy and Insight introduced the paper and highlighted the following points:

- a) In March 2020, the Council approved emergency rules to give greater flexibility around the way the NMC would regulate during the pandemic The emergency rules did not relate to temporary registration which was enabled by separate legislation and was not affected by the proposals in the paper.
- b) Parliamentary and the NMC's own scrutiny after the event, had identified some areas which needed amendment, including greater clarity about public access to virtual hearings; and correcting some drafting errors in the original rules.
- c) The Department of Health and Social Care (DHSC) also proposed to remove the 'sunset clause', with the effect that the amended Rules would remain in force indefinitely.
- d) The NMC was under a duty to consult before making Rule changes. As full public consultation was not possible during the emergency more limited consultation had taken place, including with the Public Support Steering Group, which was supportive. The NMC had also been working very closely with the representative bodies throughout and was grateful for their support and engagement over a long period of time. The representative bodies had been true partners and critical friends and were thanked for continuing to support the NMC on what had not been a straightforward journey.
- e) The collective views of the representative bodies were set out at annexes 2 and 3. Annexe 2 which included the latest correspondence dated 21 July 2020, related to the current Council paper; annexe 3 dated June 2020, referred to a previous draft Council paper. The Unions' concerns regarding removal of the sunset clause were recognised: it was intended that the emergency powers in the amended Rules would not be used beyond 31 March 2021 without first undertaking a full consultation. That would enable the NMC to hear and act on the full range of views at that point.

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- audio-only access to virtual hearings for members of the public would be allowed;
- ii) members of the public would be allowed to attend our hearing centres to view the video stream live if they wished to do so, with a member of staff present; and
- iii) the usual right of access to transcripts and the publication of hearing outcomes continued to apply.
- 2. The need for panels to include a registrant was an important element of the regulatory model. Although the emergency rules allowed for cases to be heard with only two panel members and without a registrant, these powers had not been used to date. However, it was important to retain this rule change for the duration of the emergency in case any second wave affected the availability of registrant panel members. There was no intention to use this power outside the emergency period.
- 3. The Executive Director also addressed each of the additional written questions submitted in advance by Gail, Adams, Unison on behalf of the Unions and representative bodies. The questions and responses are provided at **annexe B** to these minutes.
- 4. In discussion, the following points were noted:
  - a) The provisions allowing extension of panel member appointments had been used to extend Investigating Committee members only. The support of the Appointments Board in facilitating this at short notice had been appreciated. So far there had been no need to extend the terms of members of the Fitness to Practise Committee, but, where necessary, this would be considered in preference to holding hearings without a registrant panel member.
  - b) Every effort would continue to be made to avoid using the power to dispense with the need for one of the three panel members to be a registrant. Guidance was in preparation and would be published shortly. The Executive undertook to report any use of this power to the Council.

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- d) Engagement had taken place with the public, people attending hearings and regulatory bodies in line with the consultation requirements in the Order. No specific engagement with barristers or other legal representatives was required by the Order. However, the NMC discussed its approach with panel members and legal assessors regularly and had also learned from the approach the courts were taking during the pandemic.
- e) The wording of the Rule changes was complex and technical and not easy for most people to fully understand. It was important that the consultation communicated issues in a way that people could understand how this would affect them directly. The consultation would be on the policy principles underpinning the rule changes which would make it easier to understand.
- f) Whilst the commitment to consult was welcome, there was a need to consider what would happen if the emergency situation got worse and the good intentions were impossible to fulfil. If the situation was so severe as to prevent even an online consultation exercise, that would suggest that the emergency was still ongoing at 31 March 2021 and the Council would be able to consider the position at that point.
- 5. The Council endorsed the access arrangements set out in paragraph 1(f) above.
- 6. There was concern that the DHSC had removed the Sunset clause. It was important to note that the NMC had suggested retaining a Sunset clause in the emergency rules with an end date of 12 months, which could be extended again if needed, to enable smooth transition.
- 7. The NMC was pressing for more flexibility through regulatory reform and in considering this, Parliament would rightly look at whether the Council had acted responsibly in exercising powers already available. It was proposed and agreed that the Council should, in effect, operate its own 'Sunset clause' by committing to review use of the new permissive powers provided for in the emergency rules following consultation and reach a decision before 31 March 2020 about the ongoing use of any or all of the powers indefinitely or for any specified purpose or period beyond that date.

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- 8. **Decisions: The Council** 
  - agreed to make in accordance with its powers set out in the Nursing and Midwifery Order 2001, and subject to any minor drafting changes required by the Privy Council, the Nursing and Midwifery Council (Coronavirus) (Amendment) (No 2) Rules 2020 Order of Council 2020.
  - endorsed the planned approach to consulting on use of the powers in the Rules beyond 31 March 2021.
  - agreed to review the consultation outcomes on use of the new permissive powers provided for in the Rules and reach a decision before 31 March 2021 about the ongoing use of any or all of the powers indefinitely or for any specified purpose or period beyond that date.
- 9. The Council expressed its considerable thanks to representative bodies for their engagement and to Gail Adams, Unison for the additional questions submitted. These contributions had enabled and informed a very thorough consideration of these complex and challenging issues. The Executive Director, Strategy and Insight, General Counsel and the Legislation Reform Lead were commended for their commitment and hard work on this matter.

Action: Ensure that any use of the power to dispense with a registrant panel

member is reported as a standing item in the Executive report.

For: Executive Director, Professional Regulation

By: 23 September onwards

Action: Bring back the outcomes of the consultation before 31 March 2021

on the ongoing use of any or all the permissive powers in the Rules

for decision by the Council.

For: Executive Director, Professional Regulation

By: 24 March 2021

### NMC/20/69 Update on review of Post Registration Standards

- 1. The Executive Director, Professional Practice and Dr David Foster, Independent Chair, Post-registration steering group introduced the report. The following points were highlighted:
  - a) In terms of co-production and wider engagement it was noted that virtual engagement in the form of webinars, round table events and smaller discussion groups had already taken place with 2,000 people in attendance so far, which highlighted the interest in these standards. This presented a greater engagement reach than what would have been achieved with regular face to face engagement and although the feedback was via submitted comments, this had already yielded rich feedback for consideration.

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- b) A core SCPHN group had been established before the emergency and included the three independent chairs for health visiting (HV), occupational health nursing (OHN) and school nursing (SN) who would be working on the development of new standards in these areas.
- c) An independent chair for SPQ standards development had been appointed and had convened small group discussions to consider the direction of travel for a new SPQ in community and primary care nursing, which would define a higher level of specialist knowledge and skills, which could be applied to a range of nursing roles working with people at home, or settings closer to home. It was important to note that the proposal for a generic "community/close to home" specialist practice qualification did not suggest that the traditional roles of District Nurse, Community Learning Disability Nurse, Community Children's Nurse, Community Mental Health Nurse, or General Practice Nurse should no longer exist.
- d) It was important that any specialist qualifications offered high value to professionals and employers, improving, and advancing care and practice and protecting patients and the public; the regulatory content must be convincing.
- 2. In discussion, the following points were noted:
  - a) To justify regulation of post registration SPQ standards there was a need to identify standards that clearly articulated a higher level of knowledge and skill above and beyond experience and career development and where consistency of educational preparation and standards offered quality and safety benefits for people who used services.
  - b) A clear evidence base for this work was critical. Current engagement had focused on practitioners, but it was important to also engage with employers, commissioners and programme providers and get wider input to establish future service needs. Data on how the changes would affect future health outcomes should also be gathered and considered. It was crucial to consider what we were trying to regulate and why.
  - c) There was a need to ensure the platforms were future proofed and mindful of the social economic and political climate and of integrated teams. The platforms at annexe 1 were headings, produced to give a "thumb nail" sketch of the nature of the role, and would be underpinned by the proficiencies.
  - d) This work could be described as 'advancing' practice and could be a longer-term work on 'advanced' practice.
  - e) The current registration annotation for SPQs would not change. The focus was on practical and timely changes, which did not need a change in legislation.

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- f) In relation to practice supervisors, the new standards for supervision and assessment had moved away from specifying inputs and were now outcome focused, setting out 'what' practice supervisors and practice and academic assessors needed to be able to do to fulfil these roles and 'what' support was necessary to enable this to happen. As part of education quality assurance, the NMC would look to ensure that adequate provision was made.
- 3. The Council expressed its considerable thanks to all those engaging with this work and to the Executive Director, Professional Practice and to Dr David Foster for their leadership in this complex area.

## NMC/20/70 Appointments Board Annual Report 2019–2020

- 1. The Chair of the Appointments Board introduced the Board's Annual Report 2019-2020 and thanked all members of the Board and the Fitness to Practise team for their positive collaborative approach to working with the Board.
- 2. The Appointments Board was committed to ensuring that its work was aligned with the wider strategic aims of the Council, in particular the new NMC strategy for 2020–2025, the new values and behaviours, and the new strategic approach to Fitness to Practise. The Board had welcomed the changes to its terms of reference to reflect this and to extend its responsibilities to also cover Registration Appeals Panel members.
- 3. The Board had worked in collaboration with the FTP team to put in place a three-year strategy and framework to continue to improve the quality of panels' work and decisions. This included a focus on increasing diversity of panel members and ensuring panels operated in a fair and inclusive way, in line with the NMC's values, and delivered high quality decisions.
- 4. In discussion, the following points were noted:
  - a) The most recent recruitment round in 2018 had been targeted at increasing diversity of panel members and had achieved some degree of success. Further work would be done on how to continue to address any barriers in future exercises and tackle any issues encountered in reaching diverse candidates.
  - EDI data for legal assessors was patchy and it may be helpful to consider requiring provision of such information on renewal of engagements.
  - c) There may be value in engaging with employers to encourage them to release registrants by improving understanding of what being a registrant panel member involved and how this could add value both to the employer and the registrant.

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# NMC/20/71 **Questions from observers** 1. The Council noted the written questions submitted by observers and the responses as set out in Annexe B to the minutes. NMC/20/72 Chair's action taken since the last meeting 1. The Council noted the Chair's action to reappoint Judith McCann Fitness to Practice Committee for a second four-year term on the recommendation from the Appointments Board. Chair's closing remarks 1. The Chief Executive and Registrar announced that Francesca Ok been appointed as the new Executive Director, People and Organisational Effectiveness. The Council was delighted to welco to the NMC team. 2. The Chair thanked everyone for listening, for sending in questions their patience with the technological challenges.

Confirmed by the Council as a correct record and signed by the Chair:

**SIGNATURE:** 

DATE:

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#### Annexe A

#### **Observers**

Fred Psyk Member, Appointments Board

Gail Adams Head of Professional Services, Unison Jane Beach Lead professional officer regulation, Unite

Michael Humphreys Scrutiny Manager, Professional Standards Authority Professional advisor, CNO Directorate Scotland

Jon Stones Professional Regulation, DHSC
Elaine Plumb Professional Regulation, DHSC
Anthony Johnson Registered Nurse, Nurses United UK

Kate Robinson Senior Policy & Research Manager – Nursing, NHS

England and NHS Improvement

John Edwin Cachuela Nurse, Overseas

Alwin Anto Company Director, ASORES Overseas Services UK Ltd

Dani Collins Senior nurse lecturer, Middlesex University

Michele Mtandabari Nursing Apprenticeship Programme Lead, Imperial College

**Hospital Trust** 

Mickey Bonin Head of Strategy and Product, Cambridge Boxhill Language

Assessment

Patrick Harrison Workstream Programme Manager, NHS England and NHS

Improvement

Trevor Peel Member, RCN International Committee, Royal College of

Nursing

Suzanne Miller Regional Officer, Royal College of Midwives

#### **NMC Staff Observers**

Ellie Taylor Social media officer
Lauren Haslehurst Head of News
Beth Faircliffe Event Manager

Hannah Cole Governance Assistant

Lucy Thorne Policy Manager Professional Regulation

Lisa McLeod Quality Assurance Officer

Anne Trotter Assistant Director, Education and Standards

Sonia Waigo Business Change Manager

Kirsten Van Balen Head of Strategy Communications

#### **Press**

Stephanie Jones Berry Nursing Standard

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#### **Annexe B**



# **Observer questions – Council meeting 29 July**

# Question 1 - Anthony Johnson, Lead Organiser and Registered Nurse, Nurses United

### Interpretation of the Code

"I'd like to ask if our interpretation of the Code is correct? We believe that Nurses are able to campaign politically and that there is no difference to them whistleblowing by their patient's bedside or in the public eye when policies and systemic issues put them and their patient's at risk. We believe that Nurses should use the evidence base when they make statements in their jobs but also when they discuss nursing policies and politics. We believe that Registered Nurses have a human right to freedom of speech and they are allowed to speak their opinions as long as they justify them as such."

I've previously had NMC staffers say as such but I would like the NMC to put out a statement to the effect.

I would also like to be able to submit a document from Nurses United on our interpretation of the code for the Council to be able to give their opinion.

My rationale for this are simple. Nurses have died because we haven't felt able to speak out and campaign because the institutions that purport to represent us have previously said they can't. The Nursing and Midwifery Council has a moral and regulatory duty to clarify this situation.

# **Response: Executive Director, Professional Practice**

Thank you for your question regarding nurses participating in political activities and campaigns, and the NMC's position with regard to our registrants engaging in such activities.

With regard to nurses engaging in political activities, the NMC has never stated that registrants should not be free to engage in political activities or campaign on matters they feel strongly about. Indeed, our recently published Future Nurse standards of proficiency for registered nurses (NMC, 2018) state that nurses should demonstrate an understanding of the importance of the importance of exercising political awareness throughout their career, in order to maximise the influence and effect of registered nursing on quality of care, patient safety and cost effectiveness.

As with all other activities they undertake, registrants must at all times be aware of and abide by the requirements of the Code. This includes section 16.2 on raising and if necessary escalating any concerns they may have about patient or public safety

However, the Code also requires them to be aware at all times of how their behaviour can affect and influence the behaviour of other people Nurses will therefore be expected to use their professional judgement to ensure they balance any political activity they undertake with these requirements of the Code, in order to ensure that the standards and values set out in the Code are upheld.

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## Question 2 - John Edwin Cachuela, Nurse, Overseas

I am one of the applicants from overseas and would like to clarify the recent advice regarding the new system of NMC that validates all documents submitted in the portal after completing the OSCE which is affected by the current pandemic.

Based on the NMC's official website:

17.3 Evidence type 3: Recent practice for one year in a majority English-speaking country.<sup>7</sup>

#### Evidence type 1

- 18 Evidence type 1: Recent achievement of the required score in IELTS or in one of the other English language tests accepted by the NMC. You must achieve the required score in reading, writing, listening and speaking.
- 19 We will accept an overall score of 7 in the academic version of IELTS. IELTS tests reading, writing, listening and speaking. You must achieve a score of no less than 7 in reading, listening and speaking, and no less than 6.5 in writing.
- 20 You may provide two IELTS test certificates to meet the above requirements, but must not have scored below 6.5 in any categories in either of the test sittings. You must take the two test sittings within six months of each other.
- 21 By recent we mean you must have achieved the required score within the last two years at the point when you apply to register with the NMC.<sup>8</sup>
- 22 We may accept other English language tests that meet the following criteria:
  - 22.1 it tests knowledge of English in either a healthcare or academic

As highlighted, the English language test has to be valid at the point when you apply to register with the NMC.

Is creating a profile and paying evaluation fees considered an application to register with the NMC already as seen in the screenshot below?

Complete eligibility and qualification application

#### Hide

This is the first part of your registration.

We'll check you're eligible to register via this route.

Begin your application

Provide identity evidence

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If yes, does it mean that if the document submitted in the portal prior its expiry will still be acknowledge even if it has lapsed while completing the OSCE?

I hope we can discuss this in the next council meeting in order to make things clearer especially for overseas nurses who have already started their application.

Thank you for your time and more power to NMC and the NHS!

# **Response: Executive Director, Professional Regulation**

Thank you for your question.

We have recently reviewed the guidance on our website and will be updating it to make it as clear as possible.

We recognise that some applicants like yourself have been impacted by the global pandemic and have not been able to progress their applications with us. We have therefore introduced a temporary measure to enable applicants whose language evidence expired between 23 March 2020 and 20 January 2021 to provide additional evidence that demonstrates that their language skills haven't deteriorated since expiry. Applicants will have six months after their language expires to complete registration with us and use that evidence.

You may provide additional evidence to show that you have been working and using your English in a clinical setting in the UK or in registered practice in a majority English speaking country.

If you are in a non-majority English speaking country, we recognise it may be difficult to provide this additional evidence but we will consider any additional evidence you provide in accordance with paragraph 16 of our English language guidance. It will need to show that your language has not deteriorated between the expiry date of your previous successful test result and your completed application.

Full details are on our website: https://www.nmc.org.uk/news/coronavirus/test-of-competence/

# **Question 3 - Jane Beach, Lead Professional Officer for Regulation UNITE**

My question relates to the post registration standards paper. Paragraph 22 states:

The proposal for a generic "community/close to home" specialist practice qualification does not suggest that the traditional roles of District Nurse, Community Learning Disability Nurse, Community Childrens Nurse, Community Mental Health Nurse, or General Practice Nurse should no longer exist

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Unite would urge caution here. We are dealing with, what we assume is an unintended consequence of making the revised standards for student supervision and assessment also applicable to SCPHN students. Organisations are using the change to practice assessor as an opportunity to remove practice teacher posts and down band existing practice teachers. Unite is extremely concerned about the impact this will have on the preparation of future SCPHNs for safe and effective practice. When practice teachers undertook a post graduate certificate in order to effectively prepare the SCPHNs of the future, it is simply not feasible that practice assessors, with as is proposed by one AEI, one day of training, will prepare students to the same degree. Unite considers this is a risk to public safety. How will the NMC address this in the new SCPHN programme standards and in relation to district nursing, community mental health nursing, what can the NMC do to prevent these titles disappearing and have you assessed what the unintended consequences of a generic qualification might be?

I assume the NMC did not intend that student SCPHNs would require less preparation for practice. Our expectation was that practice teachers would become the practice assessor and that a similar level of preparation and support for the role would still be required.

# **Response: Executive Director, Professional Practice**

Thank you for your questions

We are not suggesting that the new standards will lead to generic roles. What we are proposing for SPQ standards is that we will develop/scope out the content for one set of proficiency standards that applies to different fields of community and primary care nurses and their practice and in recognising that their context of practice will be different.

With regards to practice teachers:

- Specifically we did not intend that those SCPHNs who support student SCPHNs would require less preparation for practice. Instead the preparation and continued support to undertake both practice supervisor and assessor roles to meet SSSA remains an NMC requirement.
- Those who are already practice teachers do not need to undertake a further period of preparation as someone new to supervision and assessment (both a practice supervisor and practice assessor roles) instead they may need additional preparation in line with both the new SSSA standards and the new standards of proficiency for SCPHN and their associated programme standards. Inevitably someone new to supervision and assessment would require additional preparation and support to undertake the role for the first time.

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We accept that a side effect of changing the standards for supervision and assessment has
had an impact in relation to the fact that people who had undertaken an NMC approved
teaching course would attract a higher pay band. These decisions were outside of the remit
of the NMC. We will be looking at the requirements for supervision and assessment of
SCPHN and SPQ students as part of the work on the programme standards for these
courses. This will identify any specific requirements for these students (as we did for
prescribing courses). Any requirements will be subject to Quality Assurance processes as
part of programme approval.

# **Question 4 - Christine Dickinson, Community practice teacher**

I've raised my concerns within the school nursing consultation for SCPHN standards. How can the requirements for these students support be radically decreased to supervisors completing a 3 hour e learning session?

I'm totally confused and bewildered that previously staff who wished to support SCPHN students had to complete a year long course and then be supervised in practice with a student. I'm not adverse to change and The NHS is always changing with the view to improve and enhance practice. I my view this is not enhancing practice or indeed how is this adequate support for the SCPHN student?

# **Response: Executive Director, Professional Practice**

Thank you for this question.

To clarify – we/the NMC has not stated at any time that the preparation necessary to become a practice supervisor should be 3 hours. We published our new outcome focused standards for supervision and assessment (SSSA) in 2018. At the same time we indicated the period of transition to implement these standards. SSSA highlight 'what' practice supervisors and practice and academic assessors need to be able to do in order to fulfil these roles and 'what' support is necessary to enable this to happen. We do not however approve programmes in the way we used to when we often stated processes for 'How' these programme are run.

We continue to be committed to ensuring that SCPHN School Nurse students receive appropriate support and supervision that enables them to be assessed and to meet their proficiencies in order to register as a SCPHN School nurse. All the standards apply to those who support, supervise and/or assess SCPHN students.

We will be consulting on new SCPHN proficiencies for School nurses and new standards for SCPHN programmes. The programme standards are organised under 5 main headings and one of those headings is Supervision and Assessment where we align to SSSA but where we will state specific standards for safe and effective supervision and assessment for SCPHN programmes. This is something we did successfully for prescribing programmes. We are looking at this now as part of our overall review and will formally consult in due course.

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### **Question 5 - Gail Adams Head of Professional Services UNISON**

- 1. The Department of Health (England) have made some proposed changes to the Emergency Statutory Instrument. How will the NMC consult in a meaningful way after the event, given that it will already be in law? And what assurance can registrant have that the legislation will again be changed if this is what the outcome of the consultation calls for?
- 2. Can council assure registrants that it will always retain a panel of 3 to hear cases and that this will include the registrant member for all substantive decisions of facts?
- 3. Is the NMC concerned about the precedence set if the Department of Health (England) are setting the rules for an independent regulator?
- 4. Have the NMC consulted with the devolved nations Governments about the proposed changes to fitness to practice given that it will have UK wide implications?

Will the NMC publish its data risk assessment on these plans?

# Response: Executive Director, Strategy and Insight

Thank you for these questions.

- 1. We recognise that this is not a normal situation and that our solution is not how we would normally do things in this space. However, we think the substance is the same. Namely that there will be an opportunity for stakeholders to feed back in detail on our proposals, which will be considered by Council before a final decision is taken on whether and how to use the powers in a non-emergency setting.
  - We will ensure that our consultation provides sufficient information about our experience of using these powers during the emergency period and asks questions in a way that gives respondents the opportunity to set out their views on each of the changes. It would not be appropriate for us to pre-judge the outcomes of that consultation at this stage, but clearly if we reached the conclusion post-consultation that a certain rule was not appropriate in a non-emergency period then we would communicate this to DHSC with a view to requesting a further rule change, and in the interim undertake not to use such a power.
- 2. We intend to release an updated version of our emergency guidance over the coming weeks, the guidance states "We will only go ahead with our substantive meetings and hearings where we have a panel of three members including a registrant member."
  - The guidance sets out the circumstances in which we might have to use a 2 person panel, to date we have not had to use 2 person panels and we do not plan to do so. As we are gradually increasing our levels of activity we do not expect there to be exceptional pressure on our panel member capacity at the end stages of the fitness to practise process and therefore do not envisage having to use 2 person panels. However, we wish to retain the flexibility to do so in an emergency, should the need arise.

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- 4. We understand from DHSC that they have been in regular contact with their colleagues in devolved administrations around the rules amendments.
- 5. Now that we have decided on our approach to how individuals can observe our virtual events we will finalise our Data Protection Impact Assessment. We do not generally publish DPIAs but we are happy to provide a copy to the rep bodies once we have finished it.

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# Council

# **Summary of actions**

**Action:** For information.

**Issue:** Summarises progress on completing actions from previous Council

meetings.

**Core** Supporting functions.

regulatory function:

**Strategic** Strategic priority 4: An effective organisation.

priority:

**Decision** None.

required:

Annexes: None.

**Further** If you require clarification about any point in the paper or would like further information: information please contact the author below.

Secretary: Fionnuala Gill Phone: 020 7681 5842 Fionnuala.gill@nmc-uk.org

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# Summary of outstanding actions arising from the Council meeting on 29 July 2020

| Minute    | Action  | Action owner  | Report back date     | Progress to date  |
|-----------|---|---|----------------------|---|
| NMC/20/67 | Performance reporting  Present the plans to make further changes for Quarter two reporting to the Council.  | Executive Director,<br>Resources and<br>Technology Services | 23 September<br>2020 | This is included in the Impact of Covid-19 on our Strategy item on the agenda.  |
| NMC/20/67 | i. Share the expected trajectory of fitness to practise caseloads with Council.  ii. Once the trajectory is clear, consider wider communications to provide a picture of likely timescales. | Executive Director,<br>Professional<br>Regulation           | 23 September<br>2020 | <ul> <li>i. Casework resumed on 20 July 2020 and we have around 2,000 cases in screening and 2,000 in Investigations. Case Examiner caseload remains steady but is not decreasing. Our new forecasting model is being finalised and our teams are working on the data around assumptions to feed into the model. We expect to complete that work by the end of September 2020. An update will be provided to the Council in December 2020. In the interim we have appointed additional extra resource to our screening team and will soon allocate additional resource to investigations.</li> <li>ii. A communications plan will be agreed and put in place when the impact of additional resource and the modelling work is known.</li> </ul> |

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| Minute    | Action   | Action owner                                      | Report back date     | Progress to date   |
|-----------|--|---|----------------------|--|
| NMC/20/68 | Emergency rule changes  Ensure that any use of the power to dispense with the need for one of the three panel members is reported as a standing element of Executive report.   | Executive Director,<br>Professional<br>Regulation | 23 September<br>2020 | We have started to report on this in the Executive Report on the agenda. |
| NMC/20/68 | Emergency rule changes  Bring back the outcome of the consultation and recommendations on the ongoing use of any or all of the permissive powers in the Rules before 31 March 2021. These recommendations may include requesting the Government to change or remove any of the Rules in the future, whether via further rule changes or wider regulatory reform. | Executive Director,<br>Professional<br>Regulation | 24 March 2021        | Not yet due.   |

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# Summary of outstanding actions arising from the Council meeting on 2 July 2020

| Minute    | Action   | Action owner                                | Report back date     | Progress to date   |
|-----------|--|---|----------------------|--|
| NMC/20/51 | Temporary Register survey  Share the outcomes of the Temporary Register survey with Council.   | Executive Director of Strategy and Insight  | 23 September<br>2020 | Complete. The Temporary Register survey data was published on 10 September 2020. |
| NMC/20/52 | Black Lives Matter  Provide an action plan bring together the range of planned work including Council activities and the below actions, which can be used to monitor progress. | Executive Director,<br>Strategy and Insight | 23 September<br>2020 | An update has been provided in the Executive report on the agenda.               |

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| Minute    | Action   | Action owner     | Report back date  | Progress to date   |
|-----------|--|------------------|-------------------|--|
| NMC/20/52 | Provide an overview of the uptake of continuing development and subsequent progression for staff at the NMC as a result. | Director, People | 23 September 2020 | We have 20 black and minority ethnic mentees paired with 20 mentors accepted into the inclusive mentoring programme launching in September. We received 6 dual applications, 55 mentee and 29 mentor applications. These colleagues are on a waitlist for the next round of mentoring. Evaluation is scheduled at 6 and 12 months for continuous improvements of the scheme.  187 colleagues attended the recent values and behaviours virtual training events, these addressed EDI issues and barriers to inclusion. The Leadership Development Programme will focus on building inclusive teams and developing our management culture.  Future resourcing plans have been agreed to increase EDI internal resource to deliver BLM, WRES and EDI action plans and will evaluate staff progression as a key outcome. |

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| Minute    | Action  | Action owner                                      | Report back date     | Progress to date   |
|-----------|---|---|----------------------|--|
| NMC/20/52 | Black Lives Matter  Provide an evaluation of the impact of the actions taken following the University of Greenwich report (2017). | Executive Director,<br>Professional<br>Regulation | 23 September<br>2020 | The research has informed our plans for new ways of working on fitness to practise cases. We will report an update on the fitness to practise strategic direction at the December 2020 Council meeting and highlight the impacts so far. |

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# Summary of outstanding actions arising from the Council meeting on 20 May 2020

| Minute    | Action  | Action owner  | Report back date     | Progress to date  |
|-----------|---|---|----------------------|---|
| NMC/20/36 | Learning from our response to the Covid-19 pandemic  Share learning from utilising new ways of working and how things could change for the future as a result | Executive Director,<br>Strategy and Insight /<br>Executive Director<br>Resources and<br>Technology Services | 23 September<br>2020 | As part of our accommodation programme, we are considering the impact of more flexible ways of working on our people and on our future estate requirements.                         |
| NMC/20/37 | Employee turnover  Provide data and insight on the reasons for staying at the NMC when available  | Director, People  | 29 July 2020         | Due to COVID and other surveys we have not completed this analysis. We are aiming to present this to Council in December 2020 as part of our Executive report narrative submission. |

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# Summary of outstanding actions arising from the Council meeting on 25 March 2020

| Minute    | Action  | Action owner  | Report back date                                    | Progress to date   |
|-----------|---|---|---|--|
| NMC/20/22 | i. Consider how to reflect the impact of the Covid-19 pandemic and other external constraints which may impinge on the NMC's ability to achieve the Strategy's ambitions; and ii. Schedule a thorough review of progress given the impact of the Covid-19 pandemic. | Director of Strategy and Insight                    | i. 20 May<br>2020/29 July<br>2020<br>ii. March 2021 | An update is provided within the Impact of Covid-19 on our Strategy paper on the agenda. |
| NMC/20/22 | Corporate Plan and Budget  Undertake a thorough review of the Corporate Plan and Budget in the autumn, including a fundamental review of the Key Performance Indicators   | Director of Resources<br>and Technology<br>Services | 23 September<br>2020                                | An update is provided within the Impact of Covid-19 on our Strategy paper on the agenda. |

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# Council

# **Executive report**

**Action:** For discussion.

**Issue:** The Council is invited to consider the Executive's report on key developments

up to late August 2020.

Core regulatory function:

All regulatory functions.

Strategic priority:

All priorities for the strategic period 2020–2021.

Decision required:

None.

Annexes: None

**Further** If you require clarification about any point in the paper or would like further **information**: information please contact the author or the director named below.

Author: Roberta Beaton Author: Andy Gillies
Phone: 020 7681 5243 Phone: 020 7681 5641
Roberta.Beaton@nmc-uk.org Andy.Gillies@nmc-uk.org

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#### **Context:**

- This paper is produced by the Executive and provides an update on key areas of activity to deliver the goals set out in the NMC's 2020-2025 corporate strategy and response to the Covid-19 pandemic, up to 31 August 2020.
- We have updated the style of the report to align our updates to our six thematic areas from our 2020–2025 strategy.

# Four country factors:

3 Same in all UK countries.

## **Discussion:** Innovation and Improvement

- We will provide effective regulation of nurses and midwives across the UK and nursing associates in England, and make improvements to ensure that that we have easily accessible processes, support and advice available for those interacting with us.
- In response to the Covid-19 pandemic, we have made operational changes to ensure we continue to regulate nurses, midwives and nursing associates effectively. These are:

#### **Revalidation extension changes**

- At the outbreak of the pandemic, we recognised the additional pressure on nurses and midwives who were due to revalidate. In response, we put in place a programme of 12-week revalidation extensions to support our professions.
- After careful consideration, taking into account contextual factors such as the current status of the pandemic and feedback from stakeholders, we have made the decision to phase out revalidation extensions by the end of 2020.
- We will continue to work with stakeholders and take into account the ongoing development of the pandemic to respond to demand for extensions where appropriate.

#### Temporary register data report

- On 10 September 2020, we published a data report on the characteristics and experiences of those on the Covid-19 temporary register. This analysis is based on the 14,243 people on the temporary register, as of 2 July 2020.
- 10 Most of the data in the report comes from responses to a survey we sent asking about registrants' characteristics, deployment and interest in joining the permanent register.

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11 Working with our partners, we are using this insight to build a better picture of the Covid-19 temporary register and how it can support the ongoing and future response to the pandemic.

### **Emergency rules decision and consultation**

- In March 2020, the Council approved emergency rules to give us greater flexibility and ensure that we could carry out our important regulatory work during the pandemic.
- The Department of Health and Social Care proposed changes which would allow us to retain greater flexibility indefinitely. Council approved the proposed changes to the emergency rules in July 2020, to give greater clarity about holding virtual hearings in public.
- We have been in close dialogue with the representative bodies on the proposed changes and have discussed them with our public support steering group. We will continue to work with the representative bodies and seek their views as we begin to implement these changes.
- We also recognise that it would not be appropriate to use the powers indefinitely without a proper public consultation. We therefore plan to consult with the public, professionals, and our partners on our approach to using these powers beyond 31 March 2021.
- In July 2020, the Council discussed and agreed changes to the Emergency Rules. One of our ongoing actions is to ensure that we report to the Council on any use of the power enabling cases to be heard by a panel that includes no registrant members.
- We will include this in each Executive Report and will also report on the use of our power to enable cases to be heard by two-person panels rather than three, even if there is a registrant member. On this occasion we can report that between March 2020 and 25 August 2020, there were no cases heard by a two-person panel.

### **Physical hearings**

- During the first wave of the pandemic we temporarily paused some of our fitness to practise work, prioritising cases or hearings where there was immediate risk to public safety.
- We are now moving forward with a resumption of fitness to practise casework, including some physical hearings from September 2020.
- We have introduced safety measures to ensure the wellbeing of those attending physical hearings both in London and Edinburgh is protected at all times.

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- We will also consider the view of the hearing participants and the complexity of the case when deciding whether to hold a hearing virtually or in person, and consider whether a particular format might prevent a hearing from running smoothly. In some cases, hearings may be held through a mix or both physical and virtual attendance.
- Hearings will now also be able to accommodate members of the public who wish to observe. There will be a limited number of places available for physical hearings in order to maintain social distancing, and for virtual hearings because of technical constraints.

### **Equality impact assessment**

- On 24 July 2020, we published an equality impact assessment on the work we have done to respond to Covid-19. We use equality impact assessments (EqIAs) as a tool to demonstrate our work complies with equalities legislation.
- We are seeking ongoing feedback on our Covid-19 response and we will publish updated versions of the assessment that reflect our progress. We have received positive feedback from the Care Quality Commission (CQC), and the Equality and the Human Rights Commission (EHRC) has requested to use our assessment as an example of best practice for a review of the impact of the Equality Act 2010.

# Resumption of objective structure clinical examinations (OSCEs)

- We are extremely grateful for the contribution of overseas candidates on the temporary register. We considered whether other options for facilitating their transition to the permanent register were available but concluded that the OSCE test is the quickest and most effective option, which meets our standards and provides the necessary level of assurance for permanent full registration. Candidates can stay on the temporary register and continue to work while they await their OSCE, and once on the permanent register, the conditions of practice that apply to their temporary registration will be removed.
- Our three OSCE test centres re-opened on 20 July 2020, having been closed since 24 March 2020. OSCE colleagues have worked hard to enable candidates on the temporary register to sit an OSCE, whilst also maintaining a strong service to new candidates wishing to sit the test. Demand is being monitored closely to ensure we can meet the current and future demand, and we have strong plans in place to scale up if required.

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27 A total of 2,606 overseas applicants were registered on our temporary register at the end of August 2020. We are on track to get all temporary registrants who want to transfer tested by the end of October 2020. As of the end of August 2020, test centres had booked around 4,815 OSCEs for the period up to the end of December 2020.

### **English Language Test**

- The Occupational English Test (OET) is one of the two English Language tests accepted by the NMC for the purposes of registration. These are conducted at test venues worldwide. The Covid-19 pandemic has brought about challenges for applicants in being able to sit tests, for example travel restrictions and test venue closures.
- OET have developed and piloted two new versions of the OET paper test; OET@Home and OET on computer. Both tests are taken on a computer and use the same test material, format and activities as at the test venues. However OET@Home enables candidates to take the test at home on a personal computer.
- After careful consideration of both tests, we decided to accept both OET@Home and OET on computer. This provides flexibility for candidates. OET will roll out the new tests from September and October 2020 and OET candidates can decide which of the three test mediums to use.

#### **Education quality assurance**

- On 17 August 2020, we went live with our new quality assurance (QA) online system which replaced our external supplier's online QA system, 'the QA Hub'.
- We migrated all of the relevant data from the QA Hub to our online system; however, a number of issues arose with the migration which has required us to implement a number of fixes post go-live.
- Unfortunately the issues that were identified impacted a number of our external stakeholders (education institutions and visitors) and this led to delays in submitting information for their approval visits. We have been communicating directly with stakeholders to notify them of resolutions that have been deployed and fixes that are currently ongoing. We are working to resolve the issues.

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## **Muckamore Abbey Hospital**

- We continue to monitor developments relating to Muckamore Abbey 34 Hospital. On 8 September 2020, the Northern Ireland Health Minister announced a statutory public inquiry into serious allegations of abuse at the hospital. We stand ready to assist the inquiry and will seek to meet the inquiry team in due course.
- 35 The announcement of the public inquiry following the publication in August 2020 of 'A review of the leadership and governance at *Muckamore Abbey Hospital*. Key points to note include:
  - 35.1 The review found that, despite governance structures being in place, the Hospital developed its own distinct culture and this contributed to failings in care. This was in part due to the hospital being isolated, or feeling isolated, from the rest of the Trust. These findings echo findings from reports into other failings in care.
  - 35.2 The review also highlights the significance of a just and learning culture, which we have sought to foster both through our standards and guidance for nursing and midwifery professionals and through our strategic approach to fitness to practise.
  - The review recommends that the Department of Health in Northern Ireland consider extending the remit of the Regulation and Quality Improvement Authority to align with the Care Quality Commission in England by regulating and inspecting hospitals. This would have an impact on how we share information and work with them.
- 36 We currently have 38 fitness to practise referrals relating to Muckamore Abbey Hospital.

#### **Proactive support**

We work to enable our professions to uphold our standards today and tomorrow, anticipating and shaping future nursing and midwifery practice.

#### **Post-registration standards**

Continuing our online engagement to inform the development of new 38 post-registration standards, we haveheld five webinars to date. The attendance of over 2,400 people demonstrates the enormous level of interest in the review. Over 200 people also submitted comments through a web survey.

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- We have also held a number of targeted roundtables for groups such as frontline practitioners, educators, employers and advocacy groups.
- There is general agreement in relation to the content of the proposed standards. However, there are still some stakeholders who do not support regulation of specialist practice qualifications, and others, who do not favour the transition to one new specialist practice qualification in community nursing that can be gained by registrants working within their own field of specialist community practice.
- We are continuing with targeted engagement to fully explore these issues to achieve a resolution, and will update Council if the outcome of those discussions results in a change to our previously published plans.
- 42 At the present time, our intention remains to formally consult on the SPQ and SCPHN standards from January 2021 and aim to introduce the new standards in September 2021.

### Code campaign

- In September through to December 2020, we will run a campaign that aims to help our professions feel supported by their professional Code.
- 44 Eight short video animations will bring to life key themes relating to our Code, such as accountability, person-centred care and speaking up. These will be easily found on our NMC website and social media.

## **NHS People Plan**

The first part of the NHS People Plan for England, the People Promise, was published at the end of July 2020. We look forward to contributing to the next stage of the People Plan (coming later in the year), and continuing to work with our partners across all four UK countries to support our professions and people using health and care services.

### A more visible and informed regulator

We work in close contact with our professions, their employers and their educators so we can regulate with a deeper understanding of the learning and care environment in each country of the UK.

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## Four countries engagement

- Internal working groups to support lead directors for each country, which had been suspended during the height of the pandemic, have begun meeting regularly again to build and maintain stakeholder relations and consider developments in the respective nations.
- In September 2020, we will hold a further series of virtual meetings with our partners in each country to discuss the impact of the coronavirus pandemic.

### **Engaging and empowering**

We actively engage with and empower the public, our professions and partners. We contribute to an NMC that is trusted and responsive, actively building an understanding of what we and our professionals do for people.

## **Enhancing our communications and engagement tools**

- In July 2020, the NMC's corporate twitter account @nmcnews surpassed 100,000 followers, a significant milestone in growing and improving our social media presence.
- We have updated our tone of voice guidelines to reflect our new values and behaviours and improve the accessibility of our communications.
- We have secured a bi-monthly column with the *Nursing Times* that we will use to communicate our latest work to our professions as well as health and care leaders. The first column was published in the September 2020 issue, in print and online. We will explore whether a similar opportunity could be secured with a midwifery publication.

# Insight and influence

53 Learning from data and research, we improve what we do and work collaboratively to share insights responsibly to help improve the wider health and care system.

# Equality, Diversity and Inclusion (EDI) research

In August 2019, we embarked on an ambitious programme of work to assess the impact of our regulatory processes on different groups of nurses, midwives and nursing associates. We want to understand whether professionals with different protected characteristics have different outcomes from our processes. We want to understand why there are these differences and, where unfairness arises, take action to stop it.

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We are now scoping the next phases of the research and engaging with our stakeholders as part of that. We will publish the report in October 2020 and will report to the Council in December 2020 on next steps.

## **Equality, Diversity and Inclusion**

Together with BMe, our employee network for black, Asian and minority ethnic colleagues and allies, and LGBT+ network, we are developing a programme of internal and external communications and engagement. Starting with Black History Month, this programme will include publication of our EDI research, webinars, storytelling and an updated web hub.

#### **Black Lives Matter action plan**

- We have put in place an initial action plan to ensure that we meet the commitments we agreed with the Council in July 2020. By way of progress update:
  - 58.1 The review of our internal leadership and resourcing for EDI has concluded. The Executive Board discussed the findings and recommendations on 8 September 2020 and has agreed to collocate roles that are currently in different parts of the organisation and to fund additional investment in the team.
  - 58.2 We have gone out to tender for an external expert to work with the Council and the executive team to plan further interventions. We expect to make an appointment in September.
  - 58.3 We have appointed an internal secondee to work with colleagues internally and with the external expert to shape and drive forward the EDI agenda over the next six months.

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- We have launched our inclusive mentoring scheme, which has seen 20 sets of mentors and mentees being paired and introduced. Training and support systems are being set up to facilitate the new mentoring relationships.
- 58.5 We are working towards making our first submission to the NHS Workplace Race Equality Standard by the end of October 2020. We surveyed staff on the specific areas needed to inform our response and received responses from 319 colleagues.
- 58.6 We created the tools to undertake specific risk assessments for colleagues returning to the workplace, considering Public Health England's guidance and emphasising the need for tailored assessments on an individual basis.
- With the benefit of external expertise, we expect to develop the action plan further and will report in more detail to the Council at its next meeting.

## **Engagement with UK Parliament**

- We continue to provide political stakeholders across the UK with regular briefing on our response to the Covid-19 pandemic, and to engage with interested committees and parliamentarians.
- The NMC wrote to Meg Hillier MP, the Public Accounts Committee (PAC) Chair, to provide information on our latest registration data report as part of PAC's inquiry into the NHS nursing workforce in England, after its oral evidence session on 20 July 2020.
- On 25 August 2020, Sue West gave evidence to the All-Party Parliamentary Group (APPG) on Rural Health and Social Care on behalf of the NMC. The session was part of the APPG's work to develop evidence-based policy recommendations for the government on the rural health (both mental and physical) and social care economy of England.
- On 24 August 2020, Matthew McClelland joined a meeting chaired by the Secretary of State for Health and Social Care, Rt Hon Matt Hancock MP. The meeting discussed the health sector's response to changes in assessing A-Level results and was also attended by colleagues from Health Education England.
- This meeting was followed up on 25 August 2020, by a subtaskforce on medical placements chaired by Michelle Donelan MP, Minister of State for Universities and attended by Jo Churchill MP, Parliamentary Under Secretary of State for Health. Matthew McClelland attended alongside university representatives.

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- 65 On 25 August 2020, Business, Energy & Industrial Strategy (BEIS) launched its consultation into 'Recognition of professional qualifications and regulation of professions'. The NMC is currently drafting a response for the deadline of 23 October 2020, liaising with key stakeholders including the GMC and nursing and midwifery representative bodies.
- 66 On 9 September 2020, Andrea Sutcliffe met with the Chair of the Health and Social Care Select Committee, Jeremy Hunt MP. This meeting is a part of our continuing dialogue with Mr Hunt on issues including just culture and regulatory reform. The NMC also submitted evidence to the Health and Social Care Committee inquiries into the safety of maternity services in England and workforce burnout and resilience in the NHS and Social Care.

#### **Regulatory Reform**

- We have been working closely with our fellow professional 67 regulators and the Department of Health and Social Care (DHSC) on what a future legislative framework could look like.
- 68 We are continuing work on model fitness to practice rules, which would show how we and other regulators could use any future changes to our legislative framework. This work is likely to continue over the next six months and will include seeking the views of our key stakeholders on our proposed approach and any particular areas that we should cover. We have also liaised with the DHSC around potential changes to governance and the operating framework.
- We have started to look more closely at education and training, and registration, as these are further areas being considered by the DHSC as part of the regulatory reform programme. We are beginning to develop our policy thinking in these areas to inform our approach to these ongoing discussions.
- 70 On 30 July 2020, Andrea Sutcliffe attended the Secretary of State for Health and Social Care's speech on the future of healthcare. Matt Hancock used the speech to praise the work of regulators such as the NMC during the pandemic and spoke about "bureaucracy that our healthcare system can do better without." The NMC has responded to the subsequent government consultation, 'Reducing bureaucracy in the health and social care system'. Our response provides an overview of the progress we have made to reduce bureaucracy and highlights the areas where we would like to undertake further work, in particular through changes to our legislative framework via regulatory reform.

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## **Appointments of new Executive Director and General Counsel**

- On 29 July 2020, we announced that Francesca Okosi will be joining us as our new Executive Director of People and Organisational Effectiveness.
- On 12 August 2020, we also announced to colleagues that Alice Hilken will be our interim General Counsel from October 2020, replacing Clare Padley who leaves end September after 10 years at the NMC.

# Midwifery implications:

There are no differences to the application of this topic for midwifery.

# Public protection implications:

Public protection implications are considered when reviewing performance and the factors behind poor or good performance.

# Resource implications:

75 No external resources have been used to produce this report.

# Equality diversity and inclusion implications:

Figure 16 Equality and diversity issues are taken account of within the work we do. Separate equality impact assessments (EQIA) are produced for all major areas contributing to our strategic objectives. An EQIA for our work regarding Covid-19 is in place.

# Stakeholder engagement:

77 Not applicable.

# Risk implications:

78 The impact of risks is assessed and rated within our corporate risk register.

# Legal implications:

79 None.

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# Cyngor

# Adroddiad Monitro Blynyddol y Cynllun Iaith Gymraeg

# 1 Ebrill 2019 - 31 Mawrth 2020

Cam I'w drafod.

Gweithredu:

**Mater:** Mae'r papur hwn yn gofyn i'r Cyngor gymeradwyo'r Adroddiad Monitro

Blynyddol, sydd i fod i gael ei gyflwyno i Gomisiynydd y Gymraeg ym mis

Hydref 2020.

**Swyddogaet** Swyddogaethau ategol

h reoleiddio Pob swyddogaeth reoleiddio

graidd:

Blaenoriaet Blaenoriaeth strategol 1: Gwella ac arloesi

h strategol: Blaenoriaeth strategol 3: Rheoleiddiwr mwy gweladwy a gwybodus

Blaenoriaeth strategol 4: Ymgysylltu a grymuso

Penderfynia Dim.

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ol:

**Atodiadau:** Mae'r atodiad canlynol ynghlwm wrth y papur hwn:

Atodiad 1: Adroddiad Monitro Blynyddol y Cynllun Iaith Gymraeg,

1 Ebrill 2019 - 31 Mawrth 2020, yn Gymraeg ac yn Saesneg.

**Rhagor o** Os hoffech eglurhad am unrhyw bwynt yn y papur neu os hoffech gael rhagor **wybodaeth**: o wybodaeth cysylltwch â'r awdur neu'r cyfarwyddwr a enwir isod.

Awdur: Emma Lawrence Cyfarwyddwr: Matthew McClelland

Rhif Ffôn: 020 7681 5266 Rhif Ffôn: 020 7681 5987

Emma.Lawrence@nmc-uk.org Matthew.McClelland@nmc-uk.org

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Cyd-destun:

Mae'r papur hwn yn gofyn i'r Cyngor gymeradwyo'r Adroddiad Monitro Blynyddol drafft, sydd i fod i gael ei adrodd i Gomisiynydd y Gymraeg ym mis Hydref 2020.

Ffactor pedair 2 gwlad:

Mae'r adroddiad hwn yn arbennig o berthnasol i Gymru a siaradwyr Cymraeg.

#### Trafodaeth Cefndir

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- Mae'r NMC, fel corff cyhoeddus sy'n arfer swyddogaethau statudol yng Nghymru, yn ddarostyngedig i Ddeddf yr laith Gymraeg 1993 sy'n ei gwneud yn ofynnol i ni:
  - 3.1 Sefydlu'r egwyddor y dylid trin y Gymraeg a'r Saesneg ar y sail eu bod yn gyfartal wrth gynnal busnes cyhoeddus.
  - 3.2 Hwyluso'r defnydd o'r Gymraeg.

### **Adroddiad Monitro Blynyddol**

- Fel sy'n ofynnol o dan Ddeddf yr laith Gymraeg, rydym wedi sefydlu Cynllun laith Gymraeg cymeradwy ers 2011. Bob blwyddyn, rydym yn gwneud Adroddiad Monitro Blynyddol i Gomisiynydd y Gymraeg ar y camau rydym wedi'u cymryd i gydymffurfio â'r Cynllun ac i hyrwyddo cyfleoedd i ddefnyddio'r Gymraeg.
- 5 Mae ein hwythfed Adroddiad Monitro Blynyddol y Cynllun Iaith Gymraeg ar gyfer y cyfnod rhwng 1 Ebrill 2019 a 31 Mawrth 2020 wedi'i atodi yn Gymraeg ac yn Saesneg (Atodiad 1).
- Rydym yn hyderus ein bod wedi cydymffurfio'n llwyddiannus â'n Cynllun laith Gymraeg rhwng 1 Ebrill 2019 a 31 Mawrth 2020. Yn benodol, croesawyd anghenion siaradwyr Cymraeg drwy gydol y gwaith o ddatblygu ein strategaeth gorfforaethol ar gyfer 2020-2025.
- Mae ein dull ailstrwythuro o ymgysylltu â phedair gwlad y DU yn llwyddiant nodedig arall, sydd wedi creu cyfleoedd i gryfhau cysylltiadau a chydweithio â phartneriaid allweddol yng Nghymru.
- Yn dilyn cyfarfod y Cyngor, disgwylir i'r Adroddiad Monitro Blynyddol gael ei gyflwyno i'r Comisiynydd erbyn 01 Hydref 2020.
- 9 **Argymhelliad**: Gwahoddir y Cyngor i gymeradwyo'r Adroddiad Monitro Blynyddol drafft.

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## Ymgynghoriad Safonau'r Gymraeg

- Mae Llywodraeth Cymru wrthi'n ymgynghori ar Safonau newydd y Gymraeg. Caiff y safonau terfynol eu nodi mewn deddfwriaeth a byddant yn disodli ein cynllun iaith Gymraeg presennol, a byddant yn effeithio ar ein prosesau adrodd a monitro.
- 11 Rydym yn falch o gael y cyfle i roi sylwadau ar ymgynghoriad Llywodraeth Cymru ar y safonau drafft hyn, ac rydym wrthi'n ystyried yr effaith reoleiddiol bosibl cyn ymateb i'r Comisiynydd, hefyd ym mis Hydref 2020.

Goblygiadau o ran diogelu'r cyhoedd: 12 Nid oes gan yr adroddiad hwn unrhyw oblygiadau o ran diogelu'r cyhoedd.

Goblygiadau o ran adnoddau: Mae'r goblygiadau o ran adnoddau sy'n deillio o'r adroddiad hwn yn ymwneud â llunio, cyfieithu a chyhoeddi'r adroddiad, sy'n cael eu cynnwys yn yr adnoddau presennol.

Goblygiadau o ran cydraddoldeb ac amrywiaeth: Mae ystyriaethau o ran y Gymraeg wedi'u cynnwys yn ein pecyn cymorth asesu'r effaith ar gydraddoldeb a byddant yn cael eu hadolygu'n barhaus i sicrhau ein bod, yn ein holl waith, yn cynnal yr ymrwymiadau rydym wedi'u gwneud yn ein Cynllun.

Ymgysylltu â rhanddeiliaid:

Mae'r adroddiad yn cynnwys gwybodaeth am sut yr oedd siaradwyr Cymraeg yn cymryd rhan yn ein gweithgareddau sefydliadol yn ystod y cyfnod adrodd.

Goblygiadau o ran risg: Dim.

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Goblygiadau cyfreithiol:

Rydym yn cydymffurfio â'r cynllun ac nid oes unrhyw oblygiadau cyfreithiol.

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Eitem 8.1: Atodiad 1 NMC/20/80 23 Medi 2020



Adroddiad monitro'r cynllun iaith Gymraeg

1 Ebrill 2019–31 Mawrth 2020

# Gwybodaeth amdanom ni

Ein gweledigaeth yw sicrhau nyrsio a bydwreigiaeth ddiogel, effeithiol a charedig sy'n gwella iechyd a lles pawb. Fel rheoleiddiwr proffesiynol dros 700,000 o weithwyr nyrsio a bydwreigiaeth proffesiynol, mae gennym rôl bwysig i'w chwarae i wireddu hyn.

Ein rôl graidd yw **rheoleiddio**. Yn gyntaf, rydym yn hyrwyddo safonau proffesiynol uchel ar gyfer nyrsys a bydwragedd ledled y DU, a chymdeithion nyrsio yn Lloegr. Yn ail, rydym yn cadw cofrestr o weithwyr proffesiynol sy'n gymwys i ymarfer. Yn drydydd, byddwn yn ymchwilio pan fydd gofal nyrsio neu ofal bydwreigiaeth yn mynd o chwith – rhywbeth sy'n effeithio ar lai nag un y cant o weithwyr proffesiynol bob blwyddyn.

Er mwyn rheoleiddio'n dda, rydym yn **cefnogi** ein proffesiynau a'r cyhoedd. Rydym yn creu adnoddau a chanllawiau sy'n ddefnyddiol drwy gydol gyrfa pobl, gan eu helpu i gyflawni ein safonau wrth weithio a mynd i'r afael â heriau newydd. Rydym hefyd yn cefnogi pobl sy'n rhan o'n hymchwiliadau, ac rydym yn gwneud ein hunain yn fwy amlwg er mwyn i bobl deimlo eu bod yn cael eu cynnwys a'u grymuso i lywio ein gwaith.

Mae rheoleiddio a chefnogi ein proffesiynau yn ein galluogi i **ddylanwadu** ar iechyd a gofal cymdeithasol. Rydym yn rhannu gwybodaeth o'n gweithgareddau rheoleiddio ac yn gweithio gyda'n partneriaid i gefnogi'r gwaith o gynllunio'r gweithlu a gwneud penderfyniadau ar draws y sector. Rydym yn defnyddio ein llais i siarad o blaid amgylchedd gwaith iach a chynhwysol i'n proffesiynau.

# Llywodraethu ein gwaith iaith Gymraeg

Mae aelodau'r Cyngor, y tîm Gweithredol a'r holl weithwyr yn chwarae rhan yn y gwaith o gyflawni ein cynllun iaith Gymraeg. Nodir y cyfrifoldebau allweddol isod:

- Mae'r Cyngor yn gyfrifol am bennu a goruchwylio ein strategaeth gyffredinol.
- Y tîm Gweithredol sy'n gyfrifol am weithredu ein strategaeth ac am bennu polisïau mewnol a chynlluniau busnes sy'n cefnogi'r gwaith o gyflawni'r cynllun iaith Gymraeg.
- Cyfarwyddwr Strategaeth a Mewnwelediad sy'n bennaf gyfrifol am gyflawni'r cynllun iaith Gymraeg, a'r Cyfarwyddwr Rheoleiddio Proffesiynol yw cyfarwyddwr arweiniol Cymru.
- Y tîm Polisi a Deddfwriaeth sy'n gyfrifol am fonitro newid deddfwriaethol a'r effaith ar ein proses cynllunio busnes yng nghyswllt cydymffurfio â Deddf yr laith Gymraeg 1993.

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 Y tîm Rheoleiddio Cydraddoldeb, Amrywiaeth a Chynhwysiant (EDI) sy'n gyfrifol am ymwybyddiaeth o'r Gymraeg a chefnogi ein gweithwyr i deimlo'n hyderus ac yn gymwys wrth gydymffurfio â'n cynllun iaith Gymraeg.

# Ein hymrwymiad i'r Gymraeg

Yn unol ag Adran 21 Deddf yr laith Gymraeg 1993, rydym yn glir ynghylch yr angen i drin y Gymraeg a'r Saesneg yn gyfartal wrth gynnal busnes cyhoeddus a gweinyddu cyfiawnder yng Nghymru, cyn belled ag y bo'n briodol o dan yr amgylchiadau ac yn rhesymol ymarferol. Cymeradwywyd ein cynllun iaith Gymraeg gan Fwrdd yr laith Gymraeg ym mis Ionawr 2011.

Nod yr adroddiad monitro blynyddol hwn yw crynhoi ein cynnydd o ran gweithredu ein cynllun iaith Gymraeg yn ystod y cyfnod rhwng 1 Ebrill 2019 a 31 Mawrth 2020, yn unol â gofynion Comisiynydd y Gymraeg. Ceir adroddiad cryno (yn seiliedig ar gwestiynau gan Swyddfa Comisiynydd y Gymraeg) yn Atodiad 1.

Rydym wedi ymrwymo i gydymffurfio'n gyson â'n cynllun iaith Gymraeg, ac ymgysylltu â Chomisiynydd y Gymraeg ac eraill i fod yn ymatebol ac yn wybodus wrth i ni ddatblygu ein dull o ddiwallu anghenion siaradwyr Cymraeg. Mae'r adroddiad hwn yn nodi ein gwaith yn y maes hwn, a bydd ar gael i gwsmeriaid drwy drafodaeth gyhoeddus mewn sesiwn o'r Cyngor yn ogystal â chael ei gyhoeddi ar ein gwefan, yn yr un modd â'r blynyddoedd blaenorol.

# Gweithgarwch diweddar

Ym mis Hydref 2019, rhoddodd y tîm Gweithredol ddull arwain newydd ar waith o ymgysylltu ag anghenion pobl ledled pedair gwlad y DU a'u deall drwy neilltuo cyfarwyddwr arweiniol ar gyfer pob gwlad i gryfhau cysylltiadau, amlygrwydd a threfniadau gweithio mewn partneriaeth. Ein Cyfarwyddwr Rheoleiddio Proffesiynol, Emma Broadbent, yw cyfarwyddwr arweiniol Cymru. Mae'r dull hwn wedi galluogi'r tîm Gweithredol i gael darlun cliriach o faterion sy'n effeithio ar bobl yng Nghymru, gan gynnwys siaradwyr Cymraeg.

Ers ymgymryd â'r cyfrifoldeb ychwanegol hwn, mae Emma wedi cwrdd â'r Gweinidog dros lechyd a Gwasanaethau Cymdeithasol, Addysg a Gwella lechyd Cymru, Arolygiaeth Gofal lechyd Cymru, Gofal Cymdeithasol Cymru, y Comisiynydd Pobl Hŷn, cynrychiolwyr o Gymru o'r Coleg Nyrsio Brenhinol a Choleg Brenhinol y Bydwragedd a Phrif Swyddog Nyrsio Cymru.

Yn ogystal ag ymweld â gwasanaethau yng Nghymru, mae Emma wedi mynd i gyfarfodydd allweddol fel cyfarfod Bord Gron GMC Cymru ar Weithio a Sicrhau Newid Gyda'n Gilydd, ac wedi cynnal digwyddiadau ymgysylltu yng Nghymru, gan gynnwys ar gyfer ein safonau Bydwragedd yn y Dyfodol. Aeth aelodau o'n tîm Cofrestru yn y DU hefyd i Brifysgol De Cymru ym mis Chwefror 2020 i wneud cyflwyniad i fyfyrwyr nyrsio am rôl yr NMC.

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Ym mis Gorffennaf 2019 dechreuwyd ein gwaith ymgysylltu allanol ar ein <u>strategaeth</u> <u>gorfforaethol 2020-2025</u> newydd. Roedd anghenion siaradwyr Cymraeg yn y rhaglen waith hon yn cael eu croesawu, gan gynnwys drwy:

- Cafodd ein dogfen ymgynghori ar ddatblygu ein strategaeth newydd ei chyfieithu i'r Gymraeg a'i rhoi ar ein gwefan.
- Fe wnaethom ofyn i'r cwmni ymchwil annibynnol a gontractiwyd gennym i gynnal ein harolwg ymgynghori i sicrhau bod fersiwn Gymraeg o'r arolwg ar gael.
- Pan gynhaliwyd gweithdy ymgynghori yng Nghaerdydd, cynigiwyd cyfle ymlaen llaw i bawb a gofrestrodd ar gyfer y digwyddiad i gael cyfieithydd Cymraeg (ni wnaeth neb fanteisio ar y cynnig).
- Drwy gydol y gwaith o ddatblygu ein strategaeth rydym wedi rhoi'r wybodaeth ddiweddaraf am ein gwaith i Brif Swyddog Nyrsio Cymru, a rhanddeiliaid allweddol eraill yng Nghymru, ac wedi ystyried unrhyw oblygiadau posibl i Gymru.
- Cafodd fersiwn derfynol y strategaeth ei chyfieithu i'r Gymraeg a'i chyhoeddi ar ein gwefan.

Yn y flwyddyn adrodd, gwnaethom hefyd hyrwyddo'r angen i'n gweithwyr ddod yn fwy cymwys yn eu hymwybyddiaeth o'r Gymraeg, gan gynnwys drwy:

- Annog gweithwyr i gwblhau ein modiwl e-ddysgu am y Gymraeg, sy'n rhoi
  cefndir a hanes yr iaith, yn tynnu sylw at y defnydd presennol ac yn pwysleisio
  dyletswydd gyfreithiol cyrff cyhoeddus yng Nghymru i ddarparu gwasanaethau
  i aelodau'r cyhoedd yn y cyfrwng hwn.
- Cynnal cystadleuaeth pobi cacennau cri ar gyfer Dydd Gŵyl Dewi gyda gohebiaeth gysylltiedig a oedd yn berthnasol i'n cynllun iaith Gymraeg. Mae'r digwyddiad hwn yn prysur ddod yn draddodiad blynyddol i'r NMC, ac yn un sy'n cael llawer o groeso.

Mae ystyriaethau o ran y Gymraeg wedi'u hymgorffori yn ein proses datblygu Safonau Addysg. Mae gennym ddogfennau iaith Gymraeg yng nghyfnodau allweddol yr ymgynghoriad, megis safonau drafft a chwestiynau ymgynghori, ac rydym yn cynnig y dewis o ymateb i'n hymgynghoriadau yn Gymraeg. Mae adborth a thystiolaeth ar yr effaith ar siaradwyr Cymraeg hefyd yn cael eu cynnwys fel rhan o'n gwaith asesu'r effaith ar gydraddoldeb ar ein safonau. Yn ystod y cyfnod adrodd dilynwyd y dull hwn yn ystod ein hadolygiad o'n safonau <u>Dychwelyd i ymarfer</u>, ein Safonau Hyfedredd newydd ar gyfer <u>bydwragedd</u>, yn ogystal â'r cam cynllunio ar gyfer adolygu ein safonau addysg <u>ar ôl cofrestru</u>.

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Ystyriwyd yr iaith Gymraeg ac ymgysylltu yn ofalus hefyd wrth ddatblygu ein hymateb i Covid-19, gan gynnwys cydweithio â Phrif Swyddog Nyrsio Cymru i sicrhau bod ein dull gweithredu yn cyd-fynd â'i weithgarwch. Gwnaethom sicrhau bod ein dulliau cyfathrebu am safonau ein <u>rhaglen addysg frys</u> yn cael eu hanfon yn Gymraeg ac yn Saesneg at addysgwyr yng Nghymru ac yn cael eu cyhoeddi yn Gymraeg ar gyfer myfyrwyr ar ein canolfan we Covid-19 ar-lein. Cafodd dogfennau allweddol eraill, fel ein canllaw ar <u>ail-ddilysu yn ystod Covid-19</u>, eu cyhoeddi yn Gymraeg ar ein gwefan.

# Safonau iaith Gymraeg

Ar y cyd â'r rheoleiddwyr proffesiynol eraill, rydym wedi gweithio'n agos gyda Llywodraeth Cymru ar ei safonau iaith Gymraeg newydd. Er bod yr ymgynghoriad presennol y tu allan i'r cyfnod adrodd hwn, mae'r gweithgaredd hwn wedi rhoi cyfle i ni adolygu sut rydym yn cydymffurfio â'n cynllun iaith Gymraeg presennol a deall yn well sut rydym yn diwallu anghenion siaradwyr Cymraeg ar hyn o bryd.

Ym mis Medi 2019 roedd <u>ein hymateb</u> yn glir i Ymgynghoriad Iechyd, Addysg a Gwella Cymru a Gofal Cymdeithasol Cymru ar 'Cymru Iachach: Strategaeth Gweithlu ar gyfer Iechyd a Gofal Cymdeithasol' sef ein bod yn credu y dylai pobl ar ein cofrestr, pobl sy'n defnyddio ein gwasanaethau a'r cyhoedd allu defnyddio'r Gymraeg sut bynnag y dymunant.

Rydym yn edrych ymlaen at gyflwyno ein hymateb i Lywodraeth Cymru ar y safonau arfaethedig sy'n debygol o ddisodli ein cynllun iaith Gymraeg presennol, a mapio sut y gallwn fodloni'r gofynion newydd yn y ffordd fwyaf effeithiol ar draws y sefydliad.

# Blaenoriaeth strategol

Yn ein Strategaeth newydd ar gyfer 2020-2025, a gyhoeddwyd ym mis Ebrill 2020, gwnaethom yn glir 'bod angen cysylltiadau cryf arnom ar draws pedair gwlad y DU a gwerthfawrogiad o'r cyd-destunau gwleidyddol, darparu gwasanaethau a chynllunio'r gweithlu amrywiol', ac fe wnaethom ymrwymo i 'adolygu a datblygu ein presenoldeb' yng Nghymru a rhannau eraill o'r DU.

Bydd ein fframwaith gwerthoedd ac ymddygiad newydd cysylltiedig yn sail i'n dull o gydymffurfio â'r Gymraeg, fel y nodir isod:

 Teg – byddwn yn sicrhau y bydd pobl sy'n rhyngweithio â'n gwasanaethau yn cael cyfleoedd teg i gael gafael ar wybodaeth yn Gymraeg, a byddwn yn gallu ymddiried yn ein hymrwymiad i'n cynllun iaith Gymraeg.

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- Caredig rydym yn gwerthfawrogi pobl sy'n defnyddio'r Gymraeg, a byddwn yn barchus wrth ddelio â cheisiadau am y Gymraeg. Byddwn yn ymdrechu i sicrhau bod siaradwyr Cymraeg yn teimlo eu bod wedi'u cynnwys ac yn hyderus i ymgysylltu â ni yn Gymraeg.
- **Cydweithredol** byddwn yn buddsoddi yn ein perthynas bresennol, gan gynnwys gyda Chomisiynydd y Gymraeg, ac yn ymgysylltu â chymunedau ehangach Cymru, gan gydnabod ein bod ar ein gorau pan fyddwn yn gweithio'n dda gydag eraill.
- **Uchelgeisiol** byddwn yn agored i ffyrdd newydd o fodloni ein gofynion o ran y Gymraeg, a byddwn bob amser yn anelu at wneud ein gorau dros siaradwyr Cymraeg.

# Camau gweithredu allweddol ar gyfer y flwyddyn nesaf

Dros y flwyddyn nesaf, byddwn yn canolbwyntio ein hymdrechion ar y canlynol:

- 1 Codi ymwybyddiaeth o anghenion siaradwyr Cymraeg, gan feithrin cymhwysedd a hyder gweithwyr NMC i ymateb yn effeithiol i'r anghenion hyn.
- 2 Adeiladu ar ein hymgysylltiad allanol, gan gynnwys adolygu a datblygu ein presenoldeb yng Nghymru, yn unol â'n nodau strategol.
- 3 Adolygu ein cydymffurfiaeth â'r Gymraeg, ymateb i Lywodraeth Cymru ar ofynion newydd arfaethedig, a mapio ein trefniadau llywodraethu mewnol a'n dull newydd o fodloni safonau.

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# Atodiad 1: Adroddiad cryno ar roi'r cynllun iaith Gymraeg ar waith rhwng 1 Ebrill 2019 a 31 Mawrth 2020

| Gwybodaeth y<br>gofynnwyd amdani  | Ein gwaith   |  |
|---|--|--|
| Asesiad o'r effaith ar bolisi   |  |  |
| Nifer a chanran y<br>polisïau (gan gynnwys y<br>rhai a adolygwyd neu a<br>ddiwygiwyd) lle<br>rhoddwyd ystyriaeth i'r<br>effeithiau y byddai'r<br>polisi'n eu cael ar<br>ddefnyddio'r Gymraeg. | Nid ydym wedi cynnal dadansoddiadau effaith ar unrhyw nifer sylweddol o bolisïau yn ystod y cyfnod adrodd hwn. Yn ystod y cyfnod 2018-19 roeddem yng ngham dadansoddi nifer o'n ffrydiau gwaith rheoleiddiol ac felly fe wnaethom gynnal nifer o asesiadau effaith ar y Gymraeg yn ystod y cyfnod hwnnw. Daeth y rhan fwyaf o'r gwaith hwn i ben yn 2019-20. |  |
|   | Yr unig asesiad effaith a wnaethom yn ystod y cyfnod hwn oedd yng nghyswllt ein gofyniad statudol ledled y DU i fod â gwybodaeth am y Saesneg er mwyn cadw cofrestriad. Roedd hyn yn golygu cyflwyno mân newid yn ein canllawiau Saesneg.  |  |
|   | Diweddarwyd hefyd yr asesiad o'r effaith ar y Gymraeg ar gyfer y gwaith a wnaethpwyd ar ein strategaeth Addasrwydd i Ymarfer 2018 yn ystod 2019-20. Unwaith eto, nid oedd hyn yn dangos unrhyw effaith negyddol.   |  |
|   | Mae gan bob polisi asesiadau o'r effaith ar gydraddoldeb sy'n cynnwys ystyried yr effeithiau y mae'r polisi'n eu cael ar ddefnyddio'r Gymraeg. Cyhoeddir dogfennau am safonau'r Saesneg ochr yn ochr â chyfieithiadau Cymraeg.   |  |
| Enghraifft o asesiad y bernir ei fod yn effeithio ar y defnydd o'r Gymraeg a manylion am sut y cafodd y polisi ei ddiwygio o ganlyniad.   | Nid ydym wedi cynnal unrhyw ddadansoddiad effaith a arweiniodd at ddiwygio polisi arfaethedig neu bolisi sy'n bodoli eisoes yn ystod y cyfnod adrodd hwn.  |  |
| Cyhoeddiadau  |  |  |
| Nifer y cyhoeddiadau<br>sydd ar gael i'r cyhoedd  | Mae gennym 695 o gyhoeddiadau ar y wefan.  |  |
| Nifer y cyhoeddiadau<br>sydd ar gael i'r cyhoedd<br>yn Gymraeg  | Mae 95 o ddogfennau Cymraeg ar y wefan yn gan gynnwys adroddiadau blynyddol, dogfennau safonau, dogfennau ail-ddilysu a dogfennau safonau addysg.  |  |

|   | Mae hyn yn unol â'n cynllun iaith Gymraeg sy'n dweud y bydd gwybodaeth wedi'i hanelu at gleifion ac aelodau o'r cyhoedd ar gael yn Gymraeg ac yn Saesneg. Cyhoeddir safonau, canllawiau a deunydd technegol neu arbenigol arall sydd wedi'i anelu at weithwyr proffesiynol ac nid yn uniongyrchol at y cyhoedd yn Saesneg.  Fodd bynnag, rydym yn cynnig cyfieithiad i'r Gymraeg ar gais. Yn ogystal â gofynion ein cynllun rydym yn cyfieithu deunyddiau pan fyddwn yn ymgysylltu â'r cyhoedd sy'n siarad Cymraeg, er enghraifft ein deunyddiau ymgynghori a'n dogfennau ar gyfer digwyddiadau |
|---|---|
|   | ymgysylltu yng Nghymru.   |
| Cwynion   |   |
| Nifer yr holl gwynion a<br>dderbyniwyd am<br>ymddygiad ymarferwyr<br>yng Nghymru                                    | Cawsom 228 o atgyfeiriadau yng nghyswllt nyrs gofrestredig, bydwraig neu nyrsys cyswllt gyda chyfeiriad cofrestredig yng Nghymru rhwng mis Ebrill 2019 a mis Mawrth 2020.   |
| Nifer y cwynion a<br>dderbyniwyd yn<br>Gymraeg am ymddygiad<br>ymarferwyr yng<br>Nghymru                            | Rhwng mis Ebrill 2019 a mis Mawrth 2020 cawsom gyfanswm o 5,704 o atgyfeiriadau newydd. Roedd 228 o'r rhain yn ymwneud ag ymarferwyr yr oedd eu cyfeiriad cartref cofrestredig yng Nghymru. Nid oes gennym gofnod o fod wedi derbyn unrhyw atgyfeiriadau newydd yn Gymraeg.   |
| Roedd nifer y cwynion a<br>dderbyniwyd yn<br>ymwneud â<br>chydymffurfiaeth y<br>Cyngor â'i gynllun iaith<br>Gymraeg | Ni dderbyniodd y tîm Ymholiadau a Chwynion Cwsmeriaid unrhyw gwynion corfforaethol yng nghyswllt cydymffurfiaeth yr NMC â'r cynllun iaith Gymraeg yng nghyfnod adrodd 2019 - 2020.  |
| Gwefan  |   |
| Canran gwefan y<br>sefydliad sydd ar gael<br>yn Gymraeg   | Llai nag un y cant.  Mae gennym un brif dudalen gyflwyno yn Gymraeg ar y wefan, sydd ar gael drwy'r botwm 'Cymraeg' yn y bar llywio. Byddwn yn diweddaru'r dudalen hon er mwyn iddi gyd-fynd â'n strategaeth newydd. Ym mlwyddyn ariannol 2019/2020 ymwelwyd â'r dudalen honno 2,979 o weithiau. <a href="https://www.nmc.org.uk/about-us/our-role/ein-rol/">https://www.nmc.org.uk/about-us/our-role/ein-rol/</a>  |
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|  | Fel y nodwyd uchod, mae hyn yn unol â'n cynllun iaith Gymraeg sy'n dweud y bydd gwybodaeth wedi'i hanelu at gleifion ac aelodau o'r cyhoedd ar gael yn Gymraeg ac yn Saesneg. Rydym hefyd yn cynnig cyfieithiad i'r Gymraeg ar gais.  |
|--|---|
| Tystiolaeth yn ymwneud<br>ag unrhyw gynlluniau i<br>wella neu gynyddu'r<br>ddarpariaeth Gymraeg<br>ar y wefan  | Ar hyn o bryd rydym yn adolygu ein safonau hygyrchedd, a fydd<br>hefyd yn edrych ar ddarpariaeth cynnwys Cymraeg ar ein gwefan.<br>Mae oedi cyn yr adolygiad hwn oherwydd Covid-19.   |
| Mae tystiolaeth sy'n ymwneud â'r broses a ddefnyddir i sicrhau bod cynnwys, diweddariadau a chynnwys newydd presennol yn cydymffurfio â gofynion y cynllun iaith Gymraeg (os yw'r broses yn wahanol i'r hyn a nodwyd yn 2018-19) | Pryd bynnag y caiff cyhoeddiad ei lunio, mae'r tîm cyfathrebu corfforaethol yn gwneud asesiad i weld a oes angen llunio fersiwn Gymraeg hefyd ar gyfer y cyhoeddiad penodol hwnnw.  |
| Hyrwyddo gwasanaethau Cymraeg  |   |
| Gwybodaeth am ddulliau a ddefnyddir i hyrwyddo gwasanaethau Cymraeg y sefydliad a thystiolaeth o unrhyw gynnydd dilynol yn y gwasanaethau a ddefnyddir gan y cyhoedd.  | Mae tudalen ar ein gwefan wedi'i neilltuo ar gyfer rhoi manylion ein cynllun iaith Gymraeg, gan gynnwys y gwasanaethau a gynigiwn. Gweler hefyd yr wybodaeth uchod am ein dogfennau a'n cyhoeddiadau Cymraeg.   |
| Gwybodaeth am y dulliau a ddefnyddir i asesu ansawdd gwasanaethau Cymraeg y sefydliad (e.e. drwy asesu profiad defnyddwyr gwasanaeth presennol/darpar  | Er nad ydym wedi cael unrhyw adborth gan gwsmeriaid yn sôn am y Gymraeg, rydym yn asesu profiad defnyddwyr presennol drwy estyn gwahoddiad i'n harolygon adborth cwsmeriaid. Mae cwsmeriaid yn rhoi sgôr i'w boddhad ac yn cael cyfle i adael sylwadau ychwanegol, fel adborth ar ohebiaeth Gymraeg. Ceir dadansoddiad meintiol ac ansoddol o'r ymatebion mewn adolygiadau boddhad cwsmeriaid, sy'n ffurfio'r sylfaen i wella profiad ein cwsmer. |

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| ddefnyddwyr<br>gwasanaeth)  | Ar ben hynny, rydym yn defnyddio'r adborth a gawsom o ymatebion i'r ymgynghoriad gan gyrff sy'n cynrychioli siaradwyr Cymraeg i ystyried ansawdd gwasanaethau ein sefydliad ar gyfer siaradwyr Cymraeg.  |
|---|--|
|   | Mae ein harweinydd gweithredol ar gyfer ymgysylltu â Chymru wedi rhoi adborth gan randdeiliaid drwy gydol y flwyddyn, a fydd wedi'i ychwanegu at ein hystyriaeth o ansawdd ein gwasanaethau Cymraeg.   |
| Achosion addasrwydd i   | ymarfer  |
| Nifer y gwrandawiadau<br>a gynhaliwyd yng<br>Nghymru  | Yn ystod y flwyddyn ariannol ddiwethaf cynhaliwyd 80 o ddigwyddiadau Pwyllgor FtP (ystyriwyd 113 o achosion yn y digwyddiadau hyn), 49 o ddigwyddiadau'r Pwyllgor Ymchwilio (ystyriwyd 132 o achosion yn y digwyddiadau hyn) a 5 gwrandawiad Apêl Cofrestru.   |
| Nifer y gwrandawiadau<br>lle gwnaethpwyd cais<br>gan y tyst i siarad<br>Cymraeg   | Ni wnaethpwyd unrhyw geisiadau gan dyst i siarad Cymraeg, a dim<br>ceisiadau gan bartïon sy'n gwrando i siarad Cymraeg mewn<br>gwrandawiad   |
|   | Nid ydym wedi derbyn cais am gyfieithydd Cymraeg mewn gwrandawiad yn y flwyddyn ariannol ddiwethaf.  |
| Nifer y gwrandawiadau<br>lle cyflwynwyd<br>tystiolaeth yn Gymraeg.  | Ni chafwyd unrhyw wrandawiad lle cyflwynwyd tystiolaeth yn Gymraeg.  |
| Hyfforddiant ymwybyddiaeth iaith  |  |
| Nifer a chanran staff<br>newydd y sefydliad (h.y.<br>newydd ers 1 Ebrill<br>2019) a gafodd<br>hyfforddiant<br>ymwybyddiaeth o'r<br>Gymraeg. | Mae 128 o ddechreuwyr newydd wedi cael hyfforddiant ymwybyddiaeth o'r Gymraeg ers mis Ionawr 2019 (64.6%).   |
| Nifer a chanran gweithlu<br>cyfan y sefydliad sydd<br>wedi cael hyfforddiant<br>ymwybyddiaeth o'r   | Mae 193 o gyflogeion yn yr NMC wedi cael hyfforddiant ymwybyddiaeth o'r Gymraeg (22.7%), ynghyd ag 20 arall wedi cwblhau'r modiwl e-ddysgu ymwybyddiaeth o'r Gymraeg. Nid yw'r e-ddysgu'n orfodol, ond rydym wedi'i hyrwyddo ar Ddydd Gŵyl Dewi, yn ogystal ag ar ein platfform cyfryngau cymdeithasol mewnol, |

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nodi ein bod yn credu y dylai cofrestryddion, pobl sy'n defnyddio gwasanaethau a'u teuluoedd, yn ogystal â'r cyhoedd allu defnyddio'r Gymraeg sut bynnag y dymunant. Rydym wedi ymrwymo'n llwyr i'r egwyddor y bydd y Gymraeg

a'r Saesneg yn cael eu trin yn gyfartal a nodir hyn yn ein Cynllun laith Gymraeg. Gellir gweld ein hymateb yma:

workforce-consultation-september-2019.pdf

https://www.nmc.org.uk/globalassets/sitedocuments/consultations/nmc-responses/2019/nmc-response-to-heiw-and-scw-

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# Council

# The Welsh Language Scheme Annual Monitoring Report 1 April 2019 - 31 March 2020

**Action:** For discussion.

**Issue:** This paper seeks Council's approval of the Annual Monitoring Report, which

is due to be reported to the Welsh Language Commissioner in October 2020.

Core regulatory function:

Supporting functions
All regulatory functions

**Strategic** Strategic priority 1: Improvement and innovation

**priority:** Strategic priority 3: A more visible and informed regulator

Strategic priority 4: Engaging and empowering

Decision required:

None.

**Annexes:** The following annexe is attached to this paper:

• Annexe 1: The Welsh Language Scheme Annual Monitoring Report,

1 April 2019 - 31 March 2020, in both English and Welsh.

Further information:

If you require clarification about any point in the paper or would like further

information: information please contact the author or the director named below.

Author: Emma Lawrence Director: Matthew McClelland

Phone: 020 7681 5266 Phone: 020 7681 5987

Emma.Lawrence@nmc-uk.org Matthew.McClelland@nmc-uk.org

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#### Context:

This paper seeks Council's approval of the draft Annual Monitoring Report, which is due to be reported to the Welsh Language Commissioner in October 2020.

# Four country factors:

2 This report is of particular relevance to Wales and Welsh speakers.

#### **Discussion Background**

- The NMC, as a public body that exercises statutory functions in Wales, is subject to the Welsh Language Act 1993 which requires us to:
  - 3.1 Establish the principle that the English and Welsh languages should be treated on a basis of equality in the conduct of public business.
  - 3.2 Facilitate the use of the Welsh language.

### **Annual Monitoring Report**

- As required under the Welsh Language Act, we have had in place since 2011 an approved Welsh Language Scheme. Every year, we make an Annual Monitoring Report to the Welsh Language Commissioner on the steps we have taken to comply with the Scheme and to promote opportunities to use the Welsh language.
- Our eighth Welsh Language Scheme Annual Monitoring Report for the period 1 April 2019 to 31 March 2020 is attached in both English and Welsh language (Annexe 1).
- We are confident that we have successfully complied with our Welsh Language Scheme between 1 April 2019 and 31 March 2020. In particular the needs of Welsh speakers were embraced throughout our 2020-2025 corporate strategy development.
- Our restructured approach to engaging with the four nations of the UK is another notable success, which has created opportunities to strengthen relationships and collaborate with key partners in Wales.
- Following the Council meeting, the Annual Monitoring Report is due to submitted to the Commissioner by 01 October 2020.
- 9 **Recommendation**: Council is invited to approve the draft Annual Monitoring Report.

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## Welsh Language Standards consultation

- The Welsh Government is currently consulting on new Welsh Language Standards. The final standards will be set out in legislation and will replace our current Welsh language scheme, and will impact on our reporting and monitoring processes.
- We are pleased to have the opportunity to comment on the Welsh Government's consultation on these draft standards, and are currently considering the potential regulatory impact before responding to the Commissioner, also in October 2020.

Public protection implications:

12 This report does not have any implications for public protection.

Resource implications:

13 Resource implications arising from this report relate to the compilation, translation and publication of the report, which are covered within current resources.

Equality and diversity implications:

Welsh language considerations are included in our equality impact assessment toolkit and will continually be reviewed to ensure that in all of our work we uphold the commitments we have made in our Scheme.

Stakeholder engagement:

15 The report includes information about how Welsh language speakers were engaged in our organisational activities in the reporting period.

Risk implications:

16 None.

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Legal implications:

We are compliant with the scheme and there are no legal implications.

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Item 8.2: Annexe 1 NMC/20/80 23 September 2020



# The Welsh language scheme monitoring report

1 April 2019–31 March 2020

## **About us**

Our vision is safe, effective and kind nursing and midwifery that improves everyone's health and wellbeing. As the professional regulator of more than 700,000 nursing and midwifery professionals, we have an important role to play in making this a reality.

Our core role is to **regulate**. First, we promote high professional standards for nurses and midwives across the UK, and nursing associates in England. Second, we maintain the register of professionals eligible to practise. Third, we investigate when nursing or midwifery care goes wrong – something that affects less than one percent of professionals each year.

To regulate well, we **support** our professions and the public. We create resources and guidance that are useful throughout people's careers, helping them to deliver our standards in practice and address new challenges. We also support people involved in our investigations, and we're increasing our visibility so people feel engaged and empowered to shape our work.

Regulating and supporting our professions allows us to **influence** health and social care. We share intelligence from our regulatory activities and work with our partners to support workforce planning and sector-wide decision making. We use our voice to speak up for a healthy and inclusive working environment for our professions.

# Governance of our Welsh language work

Members of the Council, the Executive team and all employees play a part in delivering our Welsh language scheme. Key responsibilities are set out below:

- The Council is responsible for setting and overseeing our overall strategy.
- The Executive team is responsible for implementing our strategy and for setting internal policies and business plans that support the delivery of the Welsh language scheme.
- The Director of Strategy and Insight has overall responsibility for the delivery of the Welsh language scheme, while the Director of Professional Regulation is the lead director for Wales.
- The Policy and Legislation team is responsible for monitoring legislative change and the impact on our business planning in relation to compliance with the Welsh Language Act 1993.

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 The regulatory Equality Diversity and Inclusion (EDI) team is responsible for Welsh language awareness and supporting our employees to feel confident and competent complying with our Welsh language scheme.

# Our commitment to Welsh language

In accordance with Section 21 of the Welsh Language Act 1993, we are clear about the need to treat Welsh and English equally in the conduct of public business and the administration of justice in Wales, as far as is appropriate in the circumstances and reasonably practicable. Our Welsh language scheme was approved by the Welsh Language Board in January 2011.

The aim of this annual monitoring report is to summarise our progress in implementing our Welsh language scheme during the period 1 April 2019 to 31 March 2020, in compliance with the requirement of the Welsh Language Commissioner. A summary report (based on questions from the Welsh Language Commissioner's Office) is set out in Annexe 1.

We're committed to consistent compliance with our Welsh language scheme, and engaging with the Welsh Language Commissioner and others to be responsive and informed as we develop our approach to meeting the needs of Welsh speakers. This report sets out our work in this area, and will be accessible to customers through public discussion at a Council session as well as being published on our website, in line with previous years.

# Recent activity

In October 2019 the Executive team implemented a new leadership approach to engaging with and understanding the needs of people across the four nations of the UK by assigning a lead director for each country to strengthen relationships, visibility and partnership working. Our Director of Professional Regulation, Emma Broadbent, is the lead director for Wales. This approach has enabled the Executive team to have a clearer picture of matters affecting people in Wales, including Welsh speakers.

Since taking up this additional responsibility, Emma has met with the Minister for Health and Social Services, Health Education and Improvement Wales, Healthcare Inspectorate Wales, Social Care Wales, the older people's commissioner, Welsh representatives from the Royal College of Nursing and the Royal College of Midwives and the Chief Nursing Officer for Wales.

As well as visiting services in Wales, Emma has attended key meetings such as the GMC's Wales Roundtable on Working and Delivering Change Together, and hosted engagement events in Wales, including for our Future Midwife standards. Members of our UK Registration team also went to the University of South Wales in February 2020 to present to student nurses about the role of the NMC.

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In July 2019 we commenced our external engagement on our new <a href="2020-2025">2020-2025</a>. The needs of Welsh speakers were embraced in this programme of work, including by:

- Our consultation document on the development of our new strategy was translated into Welsh and made accessible on our website.
- We directed the independent research company that we contracted to host our consultation survey to make a Welsh version of the survey available.
- When we hosted a consultation workshop in Cardiff, we offered everyone who
  registered for the event an opportunity in advance to request a Welsh
  translator (no one took us up on the offer).
- Throughout the development of our strategy we have kept the Chief Nursing Officer for Wales, and other key Welsh stakeholders, updated on our work, and considered any resultant implications that there may be for Wales.
- The final version of the strategy was translated into Welsh and published on our website.

In the reporting year we also promoted the need for our employees to become more competent in their awareness of Welsh language, including by:

- Encouraging employees to complete our e-learning module on Welsh language, which provides a background and history of the language, highlights current usage and emphasises the legal duty of public bodies in Wales to provide services to members of the public in this medium.
- Holding a Welsh cakes baking competition for St. David's Day with associated communications that linked to our Welsh language scheme. This event is fast becoming an annual and very welcome tradition for the NMC.

Welsh language considerations are embedded in our Education Standards development process. We have Welsh language documents at key stages of consultation, such as draft standards and consultation questions, and we offer the option of responding to our consultations in Welsh. Feedback and evidence on the impact on Welsh speakers is also captured as part of our equality impact assessment work for our standards. During the reporting period this approach was followed during our review of our Return to practice standards, our new Standards of proficiency for midwives, as well as the planning stage for the review of our Postregistration education standards.

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We also carefully considered Welsh language and engagement while developing our response to Covid-19, including working in collaboration with the Chief Nursing Officer for Wales to ensure our approach was aligned with their activity. We ensured that communication about our <a href="mailto:emergency education programme">emergency education programme</a> Standards were sent in both English and Welsh to educators in Wales and were published in Welsh for students on our online Covid-19 web hub. Other key documents, such as our guidance on <a href="mailto:revalidation during Covid-19">revalidation during Covid-19</a>, were published on our website in Welsh.

# Welsh language standards

We have, with the other professional regulators, worked closely with the Welsh Government on its new Welsh language standards. While the current consultation falls outside of this reporting period, this activity has provided us with the opportunity to review our compliance with our existing Welsh language scheme and better understand how we currently meet the needs of Welsh speakers.

In September 2019 we were clear in <u>our response</u> to Health Education and Improvement Wales' and Social Care Wales' consultation on 'A Healthier Wales: A Workforce Strategy for Health and Social Care' that we believe that people on our register, people who use services and the public should be able to use the Welsh language however they wish to.

We look forward to submitting our response to the Welsh Government on the proposed standards that are likely to replace our existing Welsh language scheme, and mapping how we can meet new requirements most effectively across the organisation.

# A strategic priority

In our new 2020-2025 Strategy, published in April 2020, we made it clear that 'we need strong links across the four countries of the UK and an appreciation of the diverse political, service delivery and workforce planning contexts', and we committed to 'review and develop our presence' in Wales and other parts of the UK.

Our accompanying new values and behaviours framework will underpin our approach to Welsh language compliance, as set out below:

- Fair we will ensure people interacting with our services will have fair opportunities to access information in Welsh, and will be able to trust our commitment to our Welsh language scheme.
- Kind we value people who use the Welsh language, and we will be respectful when dealing with Welsh language requests. We will strive to ensure Welsh language speakers feel included and confident to engage with us in Welsh.

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- **Collaborative** we will invest in our existing relationships, including with the Welsh Language Commissioner, and engage with wider Welsh communities, recognising we're at our best when we work well with others.
- **Ambitious** we will be open to new ways of meeting our Welsh language requirements, and will always aim to do our best for Welsh language speakers.

# Key actions for the next year

Over the next year, we'll focus our efforts on:

- 1 Raising awareness of the needs of Welsh speakers, building the competence and confidence of NMC employees to respond effectively to these needs.
- 2 Building on our external engagement, including reviewing and developing our presence in Wales, in line with our strategic aims.
- 3 Reviewing our Welsh language compliance, responding to the Welsh Government on proposed new requirements, and mapping our internal governance and approach to meeting new standards.

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# Annexe 1: Summary report of the implementation of the Welsh language scheme from 1 April 2019 to 31 March 2020

| Requested information  | Our work   |
|--|--|
| Policy impact assessme   | ent  |
| Number and percentage of policies (including those that were reviewed or revised) where consideration was given to the effects the policy would have on the use of the Welsh language. | We have not undertaken impact analyses on any significant number of policies during this reporting period. In the 2018-19 period we were in the analysis stage of a number of our regulatory work streams and so we undertook a number of Welsh language impact assessments during that period. Most of this work concluded in the 2019-20 period. |
|  | The only impact assessment that we undertook during this period was in relation to our UK-wide statutory requirement to have knowledge of English in order to hold registration. This related to a minor change in our English language guidance.  |
|  | We also updated the Welsh language impact assessment for the work that was undertaken on our 2018 Fitness to Practise strategy during the 2019-20 period. Again this did not show any negative impact.   |
|  | All policies have equality impact assessments that include consideration of the effects the policy has on the use of the Welsh language. Welsh language translations are published alongside English language standards documents.   |
| Example of an assessment deemed to have an impact on the use of the Welsh language and details of how the policy was amended as a result.  | We have not undertaken any impact analysis which resulted in an amendment to a proposed or existing policy during this reporting period.   |
| Publications   |  |
| Number of publications available to the public   | We have 695 publications on the website.   |
| Number of publications available to the public in Welsh  | 95 documents on the website in Welsh including annual reports, standards documents, revalidation documents and education standards documents.  |

|  | This is in line with our Welsh language scheme that says information aimed at patients and members of the public will be available in English and Welsh. Standards, guidance and other technical or specialised material aimed at professionals and not directly at the public is published in English. |
|--|---|
|  | However, we offer a translation into Welsh on request. In addition to our scheme requirements we translate materials when we engage with the Welsh-speaking public, for example our consultation materials and documents for engagement events in Wales.  |
| Complaints   |   |
| Number of all complaints received about the conduct of practitioners in Wales                    | We had 228 referrals in relation to a registered nurse, midwife or nursing associate with a registered address in Wales from April 2019 to March 2020.  |
| Number of complaints received in Welsh about the conduct of practitioners in Wales               | Between April 2019 and March 2020 we received a total of 5,704 new referrals. 228 of these related to practitioners whose registered home address was in Wales. We do not have a record of having received any new referrals in Welsh.  |
| Number of complaints received related to the Council's compliance with its Welsh language scheme | The Customer Enquiries and Complaints team received no corporate complaints in relation to the NMC's compliance with the Welsh language scheme in the reporting period 2019 - 2020.   |
| Website  |   |
| Percentage of the organisation's website that is available in Welsh                              | Less than one per cent.   |
|  | We have one main introduction page in Welsh on the website, accessed through a 'Cymraeg' button in the navigation bar. We will be updating this page so it's in line with our new strategy. In the financial year 2019/2020 that page received 2,979 views.   |
|  | https://www.nmc.org.uk/about-us/our-role/ein-rol/   |
|  | As stated above this is in line with our Welsh language scheme that says information aimed at patients and members of the public will be available in English and Welsh. We also offer a translation into Welsh on request.   |

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| Evidence relating to any plans to improve or increase the Welsh Language provision on the website   | We are currently reviewing our accessibility standards, which will also look at provision of Welsh language content on our website. This review has been delayed due to Covid-19.   |
|---|---|
| Evidence relating to the process used to ensure that existing content, updates and new content, complies with the requirements of the Welsh language scheme (if the process is different to that reported in 2018-19) | Whenever a publication is produced, an assessment is taken by the Corporate communications team as to whether a Welsh version also needs to be produced for that particular publication.  |
| Promotion of Welsh language services  |   |
| Information about methods used to promote the organisation's Welsh language services and evidence of any subsequent increase in the public's use of the services.   | There is a page on our website dedicated to giving details of our Welsh language scheme, including the services we offer. Also see information above regarding our Welsh language documents and publications.   |
| Information about methods used to assess the quality of the organisation's Welsh language services (e.g.  | While we haven't had any customer feedback mentioning Welsh language, we assess the experience of existing users by invitation to our customer feedback surveys. Customers rate their satisfaction and have the opportunity to leave additional comments, such as feedback on Welsh language communications. Quantitative and |
| by assessing the experience of existing/ potential service users)   | qualitative analysis of responses are captured in customer satisfaction reviews, which form the bedrock to improving our customer's experience.   |
|   | In addtion we use the feedback we gain from consulation responses from bodies that represent Welsh language speakers to consider the quality of our our organisation's services for Welsh language speakers.  |
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|   | Our Executive lead for Welsh engagement has provided feedback from stakeholders throughout the year, which will have been added to the consideration of the quality of our Welsh language services.  |
|---|--|
| Fitness to practise case  | s  |
| Number of hearings<br>held in Wales   | In the past financial year we held 80 FtP Committee events (113 cases were considered at these events), 49 Investigating Committee events (132 cases were considered at these events) and 5 Registration Appeal hearings.  |
| Number of hearings<br>where a request was<br>made by the witness to<br>speak in Welsh   | There were no requests made by a witness to speak in Welsh, and no requests by hearing parties to speak Welsh at a hearing.  We have not received a request for a Welsh interpreter in a hearing   |
|   | in the last financial year.  |
| Number of hearings in which evidence was presented in Welsh.  | There were no hearings in which evidence was presented in Welsh.   |
| Language awareness training   |  |
| Number and percentage of the organisation's new staff (i.e. new since 1 April 2019) that received Welsh language awareness training.                | 128 new starters have had Welsh language awareness training since January 2019 (64.6%).  |
| Number and percentage of the organisation's entire workforce that has received Welsh language awareness training since the training was introduced. | 193 of employees in the NMC have had Welsh language awareness training (22.7%), plus a further 20 have completed the Welsh language awareness e-learning module. The e-learning is not mandatory, but we have promoted it on St David's Day, as well as on our internal social media platform, Workplace, and in our Equality and Diversity Leadership Group meetings. |
| Self-regulation   |  |
| Details of the arrangements and procedures the organisation has   | We have, with the other professional regulators, worked closely with the Welsh Government on its new Welsh language standards. These are the standards that will replace our existing Welsh language scheme, and are expected to come into force in 2021.  |

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The draft standards are currently being consulted on and the consultation closes on 2 October.

Even though it is currently at the consultation stage, the ongoing review we are currently undertaking across the organisation is paramount in understanding what we will have to do as an organisation to meet the new standards, and the needs of Welsh speakers. It will also ensure that we will be in the best possible position to implement the new standards when introduced.

Additionally, in 2019/20 we responded to the following consultation that relates to health and social care services in Wales, and included a section on the opportunities for Welsh speakers to use the Welsh language. This consultation was:

Health Education and Improvement Wales' and Social
Care Wales' consultation on 'A Healthier Wales: A
Workforce Strategy for Health and Social Care'
(September 2019). We said that we believe that registrants,
people who use services and their families and the public
should be able to use the Welsh language however they wish
to. We are fully committed to the principle that the English
and Welsh languages will be treated on the basis of equality
and this is set out in our Welsh Language Scheme. Our
response can be accessed here:

https://www.nmc.org.uk/globalassets/sitedocuments/consultations/nmc-responses/2019/nmc-response-to-heiw-and-scw-workforce-consultation-september-2019.pdf

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# Council

# Impact of Covid-19 on our 2020-2025 Strategy

Action: For discussion.

Issue: The Council is invited to consider the analysis of the impact of Covid-19 on

our strategy, our budget for the remainder of the year and a discussion paper

on performance reporting.

Core regulatory function:

All regulatory functions.

Strategic priority:

All priorities for the strategic period 2020–2021.

Decision required: None.

Annexes: The following annexes are attached to this report:

Annexe 1: Impact of Covid-19 on our corporate plan for 2020-2021.

Annexe 2: Financial monitoring report (with budget forecast).

Annexe 3: Corporate performance reporting.

**Further** 

If you require clarification about any point in the paper or would like further **information:** information please contact the author or the director named below.

> Author: Roberta Beaton Author: Matthew McClelland Phone: 020 7681 5243 Phone: 020 7681 5987

Roberta.Beaton@nmc-uk.org Matthew.McClelland@nmc-uk.org

Author: Kim Butler Author: Andy Gillies Phone: 020 7681 5243 Phone: 020 7681 5641 Kim.Butler@nmc-uk.org Andy.Gillies@nmc-uk.org

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#### Context:

- In March 2020, the Council agreed our 2020–2025 strategy and 2020–2021 corporate plan and budget, following a year of extensive consultation and development work.
- At the same time the coronavirus pandemic happened, requiring us to immediately support the UK's emergency response by facilitating an increase in capacity of nurses and midwives through the introduction of new regulatory powers, providing targeted information, guidance and support to our registrants, and working with the wider sector to coordinate our response.
- As a result we have diverted resources onto our Covid-19 work, whilst making sure that we continued to deliver our regulatory duties. We have had to make choices about which activities we continue to deliver during the emergency, and which activities we will rescheduled for later within this financial year or those we will move into next year's plans. A detailed analysis is at annexe 1.
- This is reflected within our budget forecast, where reduced spend out on core business and project activities means that we are expecting a significant surplus at the end of the year. A detailed analysis is at annexe 2.

### Four country 5 factors:

Implications for our plans are the same in all UK countries.

Variances in Covid-19 rules continue to be understood and reflected as required.

#### Discussion:

#### **Taking Stock**

- Since March 2020, we have delivered an enormous amount of new work which we can be extremely proud of.
- The experience of the pandemic and our response to it were supported by our new strategy for 2020–2021, confirming its relevancy and ethos behind it. The concept of 'regulate support influence' have provided vital pillars to frame our response planning, and our new values and behaviors have guided how we interact with each other and those across the sector.
- 8 Other reflections are:
  - 8.1 The importance of collaboration and engagement with sector partners to align our support and guidance (e.g. joint statements regarding safety and consulting on policy changes);

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- 8.2 That we can be adaptable, responsive and flexible. Our stakeholders want more of this from us, whilst not compromising on safety (e.g. nursing and midwifery education);
- 8.3 We can successfully deliver activities at greater pace (e.g. the technology solution we used to host the temporary register), and should consider our appetite for doing more of this in the future:
- 8.4 Although some activities, notably fitness to practise hearings, mean that some people need to attend offices, we can successfully work remotely across many of our activities, which creates potential opportunities for our future estates planning and NMC colleagues.

#### The external context

- 9 There are a number of external factors we continue to monitor and factor into our plans, including:
  - 9.1 A further resurgence of Covid-19 appears probable, and additional restrictions have started to be introduced.
  - 9.2 The nursing and midwifery workforce remains under pressure across the UK.
  - 9.3 The socio-economic impact of Covid-19 is likely to have a long-term impact on public services.
  - 9.4 There is still considerable uncertainty about the UK's future relationship with the EU and trading relationships with other countries.
- There are changes in the way health and care are delivered, and in public expectations of services and of nursing and midwifery.
- 11 A full discussion of the external context and the implications for our strategic planning will take place at the Council and Executive Board seminar in October 2020.

#### Implications for our 2020–2020 corporate plan and budget

12 At annexe 1 we have provided a detailed analysis of the current position of each of our 11 corporate commitments for 2020–2021.

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#### 13 Key points to note:

13.1 All directorate teams have been required to deliver work for Covid-19 in addition to their corporate plan commitments for 2020–2021.

#### 13.2 Covid-19 activities:

- Regulation: Setting up temporary registration (a register, practice conditions, policies, legal powers), emergency education standards, retention fee and revalidation extensions, implementing flexibility within our overseas requirements, and implementing virtual working arrangements (hearings, contact centre and education approvals).
- Support and influence: Extensive external and internal communications including a new web hub, and UK wide engagement with sector leaders and Department of Health and Social Care.
- Insight: EDI research and analysis of our temporary register and equality impact assessing of our Covid-19 response, horizon scanning and generating regular insights, including intelligence on Covid-19 referrals.
- People and infrastructure: continuous risk assessment and implementation of safety measures, supporting working from home, supporting the return to the office, and employee wellbeing.
- 13.3 Capacity to work on planned activities during the emergency was limited. We chose to reschedule a number of activities either to make sure that any changes we delivered did not distract the sector from the emergency response or to manage our own capacity.

#### 13.4 Rescheduled activities:

- The implementation of our new pre-registration nursing standards, prescribing standards, and pre-registration midwifery standards (commitment 1);
- The launch of our new test of competence (commitment 3);
- Our organsiation wide person centered approach and co-production principles (commitment 7);
- Our targeted approach to stakeholder engagement (commitment 8);

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- The phasing of some activities within our corporate programmes (fitness to practice programme, People Plan, Accommodation) (commitments 2 and 11); and
- Some internal improvement work whilst corporate teams focus on Covid-19 restoration plans (such as HR policy work and foundational work regarding data infrastructure).
- 13.5 The scope and timing of our modernising our technology services (MOTS) programme which was independent of Covid-19 (commitment 11).
- 13.6 Rescheduling means that many items will need to carry over into next year's plans for 2021–2022 (year 2 of our strategy). Budget implications are discussed at annexe 2.

#### 13.7 Activities we continued to progress:

- Implementation of our approach to contextual factors within referrals (commitment 2),
- Post registrations standards development (commitment 3),
- Regulatory reform and preparations for Brexit (commitment 9);
- Internal reviews as part of our organisational design (including local engagement, Insight and Equality, Diversity and Inclusion) (commitments 6 and 11),
- The launch of our new values and behaviours (commitment 11); and
- Some aspects of our People Plan, and our MOTS and accommodation programmes (commitment 11).
- 13.8 Restoration of our regulatory casework within fitness to practice is a key priority for the remainder of this year and next, with investment plans being agreed. Covid-19 has exacerbated our backlog which needs to be reduced.
- 13.9 We have taken on additional commitments to respond to Black Lives Matters (see Executive Report at item 6).

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- A significant challenge we have had to overcome has been finding new ways to consult with and engage stakeholders virtually. We have quickly adapted to utilise webinars and round table discussions, but note that this approach is more potentially resource intensive. This has implications for how we will co-produce and engage with stakeholders in the future, which we are reviewing. In the meantime we have brought forward plans to introduce a new digital engagement platform to facilitate online engagement.
- As part of our business planning we will assess potential overall impact on the achievement of our outcomes for 2025, and recalibrate our plans for the next four years as needed, to ensure that we will achieve our strategy.
- We will continue to report progress as part of our corporate performance monitoring and risk register.

#### Expected implications for next year's plans for 2021–2022

- Overall, our assessment is that the ambitions in our strategy remain valid. Given changes in the external environment and the impact of Covid-19, we need to make choices about the prioritisation and pace of changes over the remaining four years of the strategy. At this early stage, the areas that we are likely to be working through as part of our planning for 2021–2022 include:
- Improvement and innovation (effective regulation of nurses and midwives across the UK and nursing associates in England, making improvements to ensure that that we have easily accessible processes, support and advice available for those interacting with us):
  - Reducing fitness to practise caseload and prioritising our person-centred approach;
  - Launching the updated test of competence;
  - Retendering the Objective Structured Clinical Examination (OSCE) contracts along broadly similar lines to the current model, ensuring there is sufficient demand and potential for UK-wide coverage to meet future demand.
- 19 **Proactive support for professionals** (enabling our professions to uphold our standards today and tomorrow, anticipating and shaping future nursing and midwifery practice).
  - Conclude our review of post-registration standards;
  - Re-evaluate our prioritisation and timing of reviewing our Code, revalidation model, and approach to advanced practice.

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- More visible and better informed (working in close contact with our professions, their employers and their educators so we can regulate with a deeper understanding of the learning and care environment in each country of the UK):
  - Conclude our review of stakeholder engagement and strategic communications;
  - Implement our new model for local engagement (new model for our employer link service);
- 21 **Engaging and empowering** (actively engage with and empower the public, our professions and partners. An NMC that is trusted and responsive, and actively building an understanding of what we and our professionals do for people):
  - Improving our approach to public engagement;
  - Implement our organsiation wide co-production approach.
- 22 **Greater insight and influence** (learning from data and research, we'll improve what we do and work collaboratively to share insights responsibly to help improve the wider health and care system).
  - Regulatory reform programme, including consulting on opportunities for greater flexible working for the longer term;
  - Insight and intelligence programme, working towards publication of our first State of Nursing and Midwifery Education and Practice report in 2022-2023.
- 23 **Fit for the future organisation** (ensure that we have the right capabilities, processes and resources to fulfil our ambitions for the strategic period ahead to become a modern and dynamic regulator):
  - Progressing plans for refurbishment of 23 Portland Place, and supporting greater flexible working for the longer term;
  - Further investment in modernising our technology systems;
  - The next phase of our people programme, including greater focus on equality, diversity, and inclusion.
- We began our annual business planning process in September 2020 with an initial discussion with the Executive Board regarding this analysis. Next steps are:
  - CEO led discussions to launch business planning (September 2020);

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- Corporate Leadership Team discussion of the Covid-19 analysis;
- Detailed planning with Executive Directors to propose next year's corporate commitments and resource requirements (October 2020);
- Executive Board priortisation (October 2020);
- Horizon scan to consider contextual factors and consideration of priorities by Council and the Executive (November 2020);
- Detailed resource planning and clarification of benefits (November/December 2020);
- Draft plan and budget (January 2021);
- Corporate measures reviewed and confirmed for 2021-2022 (by March 2021).
- Opportunities for the Council to discuss our emerging plans over the coming month will be confirmed in due course.

# Midwifery implications:

There are no differences to the application of this topic for midwifery.

# Public protection implications:

27 Public protection implications are considered when reviewing performance and the factors behind poor or good performance.

# Resource implications:

- The key resource implications are discussed at annexe 2. Since April 2020 we have experienced some limited shortfalls in income and significant underspends across our activities.
- Whilst our recovery will incur additional costs, particularly in addressing the regulatory casework backlog, we are forecasting that we will continue to be underspent at the end of the year with an expected surplus of £5.3 million.
- 30 We expect that the majority of these costs will move into 2021–2022.

# Equality diversity and inclusion implications:

Equality and diversity issues are taken account of within the work we do. Separate equality impact assessments (EQIA) are produced for all major areas contributing to our strategic objectives. An EQIA for our work regarding Covid-19 is in place and available on our website.

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#### Impact of Covid-19 on our corporate plan for 2020–2021

#### Improvement and innovation

**Corporate commitment 1.** We will continue to provide effective regulation of nurses and midwives across the UK and nursing associates in England (*An accurate register; robust standards of conduct, behaviour and proficiency; quality assurance of education; responding fairly to concerns)* 

(Led by the Executive Directors of Professional Regulation and Professional Practice)

**Work to date (April to September 2020):** Since April we have delivered new areas of work to support the Covid-19 emergency response, continued to register UK professionals and prioritised fitness to practise concerns which were the most serious/high risk. Specific activities were:

#### Professional Regulation

- Introduction of temporary registration for nurses and midwives to support an increase in capacity within health and social care *(register, conditions, policies);*
- Introduction of temporary register removals guidance;
- Implementation of payment extensions for the retention fee;
- Implementation of revalidation extensions for the emergency period:
- Changes to our overseas registration requirements to support overseas applicants;
- Implementation of virtual interim order applications, reviews and extensions;
- Implementation of virtual substantive order reviews;
- Introduction of taking account of context for Covid-19 within referrals.

#### Professional Practice

- Introduction of emergency standards to facilitate students supporting (which exited from in September 2020);
- Adapted our quality assurance approvals processes;
- Approved education institutions against our new standards remotely.

#### Communications:

- Provided advice and information about temporary registration;
- Developed statements on safety issues (many jointly with partners);
- Set up a dedicated C-19 web hub.

**Impact of Covid-19:** Covid-19 has meant that we have experienced some interruptions to our fitness to practise casework, delays in overseas registrations, and needed to reschedule our standards implementation work. Specifically:

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- We prioritised cases which were the most serious/ high risk;
- We suspended physical substantive hearings. These resumed in September 2020 but will lead to lower overall number of hearings throughout remainder of the year;
- We suspended objective structured clinical examination (OCSE) test centres in the first quarter of the year. Test centres reopened in July 2020;
- Some approved education institutions (AEIs) deferred approvals decisions against our new standards for their programmes;
- We rescheduled the implementation of our new pre-registration nursing and prescribing standards from September 20 to September 21;
- We rescheduled the implementation of our new pre-registration midwifery standards from September 2021 to September 2022.

**Expectations for March 2021**: Restoration of our regulatory duties is our top priority; we will continue to provide effective regulation with a focus on reducing the fitness to practise caseload. Specifically we will:

- Maintain temporary registration for as long as required;
- Continue to register and revalidate our registrants;
- Continue to act on fitness to practise concerns:
  - o Continue to progress our casework
  - Resume physical hearings
  - o And make investments to reduce our overall caseload
- Maintain Professional Practice core business including education quality assurance (QA) and approval decisions;
- Continue our Brexit planning and implementation.

**Corporate commitment 2.** We will continue to implement our new strategic approach to fitness to practice (FtP) to improve our approach to FtP investigations and to improve the experience and support for those involved, whether professionals or the public. (Led by the Executive Director of Professional Regulation)

**Work to date (April to September 2020):** Our focus in the first part of the year has been to implement our new approach to context by upskilling colleagues through a series of workshops and e-learning. We also continued to make progress on our project to support vulnerable witnesses, and completed additional training for presenters and panel members on the requirements of remediation.

**Impact of Covid-19**: We prioritised the implementation of our new approach to context due to its relevancy for understanding the context of Covid-19 for concerns raised during the emergency. The impact on other areas of the programme has meant that the pace of delivery has slowed or activities have been rescheduled for a later date. Specifically:

- We delayed launching our improved guidance for employers;
- And delayed work on to develop our new target operating model.

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**Expectations for March 2021:** Completing the implementation of our new approach to taking account of context. We will also progress internal engagement on our person centred approach (linked to commitment 7) and secure a provider for our lay advocacy and intermediary work. We are reviewing other elements of the strategy to re-plan delivery.

**Corporate commitment 3.** We will deliver the next stage of improvements for registration of overseas applicants *(continue to improve support to overseas applicants and those supporting them, and developing our test of competence model).* (Led by the Executive Director of Professional Regulation).

Work to date (April to September 2020): We delayed the launch of our new test of competence (TOC) to April 2021. In the meantime, preparatory work has continued.

In September 2020, we updated our English language guidance to accept results from Occupational English Tests (OET) via their new computer-based English language test which can be taken from home (OET@Home).

**Impact of Covid-19:** The closure of OSCE test centres resulted in delays in the registration of overseas candidates. Test centres have now re-opened.

**Expectations for March 2021:** We will continue to progress work regarding the implications of Brexit for EU applicants, and will be ready to launch of the new TOC from April 2021.

#### **Proactive support for professionals**

**Corporate commitment 4.** We will deliver a new set of ambitious post registration standards of proficiency which focus on community practice (health visiting, occupational health nursing, school nursing and specialist practitioner qualification: community nursing) (Led by the Executive Director of Professional Practice).

Work to date (April to September 2020): The focus has been to engage stakeholders to inform development of new post registration standards. Online engagement included a survey, round table discussions and webinars for groups such as frontline practitioners, educators, employers and advocacy groups. Outcomes from this engagement work will be used to develop the draft standards ready for consultation later in the year.

**Impact of Covid-19:** To respond to Covid-19 we have had to change our approach to stakeholder engagement to take account of virtual engagement within our co-production principles.

**Expectations for March 2021:** We will formally consult on the specialist practitioner qualification (SPQ) and specialist community public health nurse (SCPHN) standards from January 2021 and aim to introduce the new standards in September 2021.

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**Corporate commitment 5.** We will explore a new method for ensuring that we take a dynamic approach to developing professional standards, in order to respond rapidly to new professional challenges (Agree our approach for the provision of additional supportive tools, and produce a forward programme for updating our standards) (Led by the Executive Director of Professional Practice).

**Work to date (April to September 2020):** Work has been progressing with an internal working group which is now in place. The review has now started.

**Impact of Covid-19:** To respond to Covid-19 we have had to change our approach to stakeholder engagement to take account of virtual engagement within our co-production principle.

**Expectations to March 2021:** Our intention is to provide a new common set of principles for standards development and a proposed timeline for when we will review and develop our standards.

#### More visible and better informed

**Corporate commitment 6.** We will review and develop our presence in local areas across the English regions and in Scotland, Wales and Northern Ireland, maintaining a focus on providers and further extending our place-based networks. *(Co-produce a review of our model for our employer link service (ELS) and produce an implementation plan)* (Led by the Executive Director of Strategy and Insight).

**Work to date (April to September 2020):** We have begun the review of ELS model, including undertaking internal engagement.

**Impact of Covid-19:** ELS played an enhanced role in supporting employers with concerns during the emergency.

**Expectations for March 2021:** We will have undertaken the deliberative phase to look at future scenarios for the team, and expect to complete the review by March 2021 so that we are ready to begin implementation from quarter 1 2021-2022.

#### **Empowering and engaging**

**Corporate commitment 7.** We will formulate and agree an organisation-wide approach that ensures people are at the heart of what we do, and principles for co-production of our services and educational standards. (Establish co-production principles and agree our person centred approach).

(Led by the Executive Director of Communication and Engagement).

**Work to date (April to September 2020):** Covid-19 meant that this work had to be rescheduled. We began to resume some aspects of this work from quarter 2.

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**Impact of Covid-19:** Our communications and engagement directorate was diverted onto Covid-19. This impacted their ability to take forward non Covid-19 priorities.

With social distancing and remote working, there is a need for a new tool to undertake online engagement effectively. We have therefore brought forward plans to implement a digital engagement platform to support our consultation work on standards in this year (corporate commitment 3).

**Expectations for March 2021:** We intend to complete the review of co-production and start development of organisation wide co-production principles by building on good practice already used. We will have resumed work on our person centred approach starting with fitness to practice which will continue into next year. We will have implemented our digital engagement platform.

**Corporate commitment 8.** We will develop a more systematic and targeted approach to stakeholder engagement across the four countries of the UK. (Review our stakeholder relations across the organisation to inform a relationship framework, and developing a programme of targeted stakeholder engagement across all 4 countries)

(Led by the Executive Director of Communication and Engagement).

**Work to date (April to September 2020):** Covid-19 meant that this work had to be rescheduled. Our communications and engagement activity was instead used to support Covid-19. Specifically:

- Providing advice and information about temporary registration;
- Developing joint statements about regulatory and safety issues related to Covid-19;
- Undertaking Covid-19 focused engagement with stakeholders within each country of the UK and sector partners;
- Establishing a dedicated Covid 19 web hub.

We have now resumed our working groups to support the continuing stakeholder engagement across the 4 countries of the UK.

**Impact of Covid-19:** We paused our non Covid-19 communications and engagement and have rescheduled our review of stakeholder communications to later in the year.

Our Covid work has led to some positive outcomes where new relationships have been established, or existing relationships have a renewed focus. With localised recovery plans for each UK country we have been working closely with partners to understand and support their plans.

**Expectations for March 2021:** We will continue to foster our relationships within each UK country and collaborate on key issues. We aim start our review of focused strategic communications during 2020-2021, with a significant proportion of the work now rescheduled for next year (2021-2022). We will also progress short term aims such as a review of existing forums and development of a programme of targeted strategic communications. This will provide the necessary foundations for beginning next year.

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#### **Greater insight and influence**

**Corporate commitment 9.** We will work with the Department of Health and Social Care (DHSC) and others on a substantial programme of reform to shape improvements to our legislative framework across the UK.

(Led by the Executive Director of Strategy and Insight).

Work to date (April to September 2020): We have continued to work closely with DHSC and to set up the necessary internal resources to progress the project. Alongside this, we have delivered emergency legislation to support our Covid-19 response.

We continued work with partners on Brexit related implications for international registration (mutual recognition of professional qualifications) and education.

**Impact of Covid-19:** The DHSC are re-planning the timelines for the regulatory reform work which we are preparing for. There is significant pressure to provide greater flexibility around education once the EU Directive provisions are removed from UK law which we are focusing on.

**Expectations for March 2021:** The project will be progressed within DHSC timescales once clarified. Policy work will continue to clarify our position around education once the EU directive has been removed. This will be agreed ready for consultation.

**Corporate commitment 10.** We will start to improve the way we use and publish data and insight to add value for our stakeholders and help shape the sector. (*Publishing equality, diversity and inclusion (EDI) data and analysis, supporting future workforce planning, planning improvements to the information on the state of nursing and midwifery, and reviewing our insights and intelligence capabilities)* 

(Led by the Executive Director of Strategy and Insight).

**Work to date (April to September 2020):** Since April we have delivered new areas of work to support the Covid-19 emergency response, as well as continuing to build the foundations for our future data and insight capabilities. Specifically we have:

- Undertaken horizon scanning and research to understand the impact of Covid 19;
- Conducted EDI research into the temporary register;
- Agreed the terms of reference for the insight review and begun the review work;
- Put in place resources to support the insight and intelligence programme;
- Agreed recommendations designed to ensure that we produce the state of nursing and midwifery professions education and practice report which has been rescheduled from 2021-2022 to 2022-2023;
- Responded to and begun action planning for Black Lives Matter;
- Delivered the registrant data report.

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**Impact of Covid-19:** We have undertaken focused EDI research on the temporary register, and conducted and published our equality impact assessment for our Covid-19 work. We have provided focused research and insights on Covid-19 including intelligence on C-19 referrals and undertaken our Covid-19 equality impact assessment.

**Expectations for March 2021:** We intend to complete our insight review and establish our internal insight board ready to start implementing the capabilities we need during 2021-2022. Our EDI research will be analysed, disseminated and response plans agreed.

#### Fit for future organisation

**Corporate commitment 11.** We will make sure that we have the right capabilities, processes and resources to fulfil our ambitions for the strategic period ahead. *(People, technology and accommodation)* 

(Led by the Director of People and Executive Director of Resources and Technology Services)

**Work to date (April to September 2020):** Covid-19 has meant significant disruption for our corporate teams. They have also continued to deliver project work despite their resources being stretched. Key activities included:

#### For Covid-19:

- Covid-19 risk assessments;
- Enabled our remote Contact Centre and IT Helpdesk;
- Supported the technological set up of temporary registration and related data requirements;
- Supported NMC colleagues to work from home (including equipment, ICT support, wellbeing support, internal communications, policy updates, HR manager support)
- Modified learning and development for online delivery;
- Undertook recruitment and selection for our new executive director of people and organisational effectiveness;
- Maintained estates services and building maintenance during the emergency;
- Supporting the resumption of physical hearings and OCSE test centres;
- Maintained vital corporate services such as finance, procurement, IT, and HR.

#### Non Covid-19 activities we have progressed:

- Launched our new values and behaviours;
- Concluded phase 1 of our modernising our technology services (MOTS) programme (with the majority of UK registration systems online, launched a new approved programme database for educators, launched a secure and more flexible way to enable registrants to pay their fee);
- Independently reviewed the MOTS programme;
- Developed our ICT roadmap;

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- Progressed plans to select premises for Edinburgh colleagues;
- Continued review of 23 Portland place refurbishment.

**Impact of Covid-19:** Covid-19 has meant significant additional work to implement the logistics of working from home, employee wellbeing, and the IT infrastructure needed to support the temporary register.

Some internal work has been rescheduled such as consultation on our defined benefits (DB) pension scheme, some planning for the refreshment of our premises, and foundational work to support data and insights. The impact is that some activities will need to be rescheduled into 2021-2022, with our MOTS programme and accommodation programme continuing to be key priorities within our strategy.

#### **Expectations for March 2021:**

<u>People:</u> we will have supported employees to return to the office, completed our organisational design review work, completed our internal work race equality standards (WRES) survey and drafted an action plan, restored recruitment, started recruiting for additional resources to support clearing the casework backlog, completed the DB pension consultation, launched changes our new defined contribution pension arrangements (information/support) and delivered a unionised workplace.

<u>Technology:</u> we will have completed our 'plan and analyse' phase for phase 2 of our MOTS programme and agreed the business case by quarter 4. We will continue to maintain and report data regarding our temporary register.

<u>Accommodation:</u> we will have supported employees to return to the office, moved our Edinburgh colleagues into new offices, and confirmed our plans for refurbishing our offices at 23 Portland Place.

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Financial monitoring report
Table 1 – Income & Expenditure to 31 July 2020 (incl. Full-Year Forecast)

| Income & Expenditure (£'m)            |        | July 202 <u>0</u> | Year-to-Da | te      | 2020-21  | Full Year           |
|---------------------------------------|--------|-------------------|------------|---------|----------|---------------------|
| Income                                | Actual | Budget            | Var (£)    | Var (%) | Forecast | Budget <sup>1</sup> |
| Registration fees                     | 28.9   | 28.5              | 0.4        | 1%      | 86.6     | 85.9                |
| Other                                 | 0.8    | 1.6               | (8.0)      | (48%)   | 2.6      | 4.9                 |
| Total Income                          | 29.7   | 30.1              | (0.4)      | (1%)    | 89.2     | 90.7                |
|                                       |        |                   | (0)        | (170)   |          |                     |
| Expenditure                           |        |                   |            |         |          |                     |
| Core Business                         |        |                   |            |         |          |                     |
| Professional Regulation               | 11.4   | 13.9              | 2.6        | 18%     | 39.8     | 42.2                |
| Resources & Technology Services       | 5.8    | 5.9               | 0.1        | 2%      | 18.1     | 17.9                |
| People & Organisational Effectiveness | 2.2    | 2.5               | 0.3        | 11%     | 7.7      | 7.8                 |
| Professional Practice                 | 1.2    | 1.6               | 0.5        | 28%     | 4.5      | 4.8                 |
| Strategy & Insight                    | 1.2    | 1.4               | 0.2        | 14%     | 4.4      | 4.3                 |
| Communications & Engagement           | 0.8    | 1.0               | 0.2        | 19%     | 2.8      | 3.1                 |
| Directorate - Core Business           | 22.5   | 26.3              | 3.8        | 14%     | 77.2     | 80.1                |
| Corporate                             |        |                   |            |         |          |                     |
| Depreciation                          | 0.5    | 0.6               | 0.1        | 20%     | 2.4      | 2.7                 |
| PSA Fee                               | 0.5    | 0.6               | 0.0        | 0%      | 1.9      | 1.9                 |
| Apprenticeship Levy                   | 0.0    | 0.0               | 0.0        | 17%     | 0.2      | 0.2                 |
| Contingency                           | 0.1    | 0.0               | 0.0        | 0%      | 0.2      | 5.3                 |
| Other                                 | 0.0    | 0.0               | 0.0        | 0%      | 0.0      | 0.3                 |
|                                       | 1.2    | 1.3               | 0.0        | 10%     | 4.6      | 10.5                |
| Total Corporate                       | 1.2    | 1.3               | 0.1        | 10%     | 4.0      | 10.5                |
| Total Core Business                   | 23.6   | 27.6              | 4.0        | 14%     | 81.8     | 90.6                |
| Surplus/(Deficit) excl Programmes     | 6.1    | 2.5               | 3.6        |         | 7.4      | 0.1                 |
| Programmes & Projects                 |        |                   |            |         |          |                     |
| Accommodation Project                 | 0.0    | 0.1               | 0.1        | 100%    | 2.9      | 3.5                 |
| Modernisation of Technology Services  | 1.7    | 1.5               | (0.1)      | (9%)    | 5.0      | 4.0                 |
| FtP Change Strategy                   | 0.2    | 0.2               | 0.0        | 0%      | 0.5      | 0.6                 |
| People Strategy                       | 0.1    | 0.1               | 0.0        | 0%      | 0.3      | 0.4                 |
| Insight Plan                          | 0.0    | 0.0               | 0.0        | 0%      | 0.3      | 0.3                 |
| Technology Improvements               | 0.0    | 0.0               | 0.0        | 0%      | 0.6      | 0.6                 |
| Total Programmes/Projects             | 1.9    | 1.8               | (0.1)      | (4%)    | 9.7      | 9.3                 |
| , otal i logialimiosi. I specie       | 1.0    |                   | (01.)      | (170)   | 0.1      |                     |
| Strategy Implementation Fund          | 0.0    | 0.0               | 0.0        | 0%      | 0.4      | 2.8                 |
| T. 1. 5                               | 07.5   |                   |            | 4=0/    | 21.5     | 400 =               |
| Total Expenditure including capex     | 25.5   | 29.4              | 4.1        | 15%     | 91.8     | 102.7               |
| Capital Expenditure                   | 2.0    | 2.0               | 0.0        | 0%      | 8.5      | 10.7                |
| Total expenditure excluding capex     | 23.6   | 27.5              | 3.9        | 14%     | 83.3     | 92.0                |
| Unrealised (Gains)/Losses             | 0.1    | 0.0               | (0.1)      |         | 0.1      | 0.0                 |
| Net Surplus/(Deficit) excluding capex | 6.0    | 2.5               | 3.5        |         | 5.8      | (1.3)               |

<sup>&</sup>lt;sup>1</sup> 2020-2021 budget was restated for £2.7m MoTS programme budget transfer to Corporate Contingency

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| Free Reserves | 35.5 | 29.4 | 6.1 | 21% | 30.5 | 19.6 |
|---------------|------|------|-----|-----|------|------|
|---------------|------|------|-----|-----|------|------|

Table 2 – Balance sheet as at 31 July 2020 (incl. Full-Year Forecast)

| Balance Sheet (£'m)                   | Actual<br>31 March<br>2020 | Actual<br>31 July<br>2020 | Change | Change<br>% | Forecast<br>31 March<br>2021 | Budget<br>31 March<br>2021 |
|---------------------------------------|----------------------------|---------------------------|--------|-------------|------------------------------|----------------------------|
| Fixed Assets                          |                            |                           |        |             |                              |                            |
| Tangible Assets                       | 26.5                       | 28.1                      | 1.5    | 0.1         | 32.6                         | 34.7                       |
| Stock Market Investments              | 0.0                        | 9.9                       | 9.9    | 0.0         | 30.0                         | 30.0                       |
| Total Fixed Assets                    | 26.5                       | 38.0                      | 11.4   | 0.4         | 62.6                         | 64.7                       |
| Current Assets                        |                            |                           |        |             |                              |                            |
| Cash & cash equivalents               | 97.0                       | 83.2                      | (13.7) | (0.1)       | 57.0                         | 55.7                       |
| Debtors                               | 2.7                        | 2.2                       | (0.6)  | (0.2)       | 2.8                          | 1.4                        |
| Total Current Assets                  | 99.7                       | 85.4                      | (14.3) | (0.1)       | 59.8                         | 57.1                       |
| Total Assets                          | 126.3                      | 123.3                     | (2.9)  | (0.0)       | 122.4                        | 121.8                      |
| <u>Liabilities</u>                    |                            |                           |        |             |                              |                            |
| Deferred Income                       | (54.7)                     | (46.0)                    | 8.6    | 0.2         | (43.3)                       | (41.1)                     |
| Other creditors, accruals, provisions | (2.5)                      | (2.6)                     | (0.1)  | (0.0)       | (12.0)                       | (15.9)                     |
| Total Liabilities                     | (57.1)                     | (48.6)                    | 8.5    | 0.1         | (55.3)                       | (57.0)                     |
| Net Assets (excl pension liability)   | 69.1                       | 74.8                      | 5.6    | 0.1         | 67.1                         | 64.8                       |
| Pension Liability                     | (11.6)                     | (11.2)                    | 0.4    | 0.0         | (3.9)                        | (10.5)                     |
| Total Net Assets                      | 57.5                       | 63.5                      | 6.0    | 0.1         | 63.2                         | 54.3                       |
| Total Reserves                        | 57.5                       | 63.5                      | 6.0    | 0.1         | 63.2                         | 54.3                       |

Table 3 - Cash flow statement to 31 July 2020 (incl. Full-Year Forecast)

| Cashflow (£'m)   | Actual<br>31 March<br>2020 | Actual<br>31 July<br>2020 | Forecast<br>31 March<br>2021 | Budget<br>31 March<br>2021 |
|--|----------------------------|---------------------------|------------------------------|----------------------------|
| Cashflow from operating activities                             |                            |                           |                              |                            |
| Surplus/(deficit)  | 8.9                        | 6.0                       | 5.8                          | (1.3)                      |
| Adjustment for non-cash transactions                           | 1.9                        | 0.5                       | 2.4                          | 2.7                        |
| Unrealised (Gains)/Losses from Stock Market Investments        | 0.0                        | 0.1                       | 0.1                          | 0.0                        |
| Interest/Dividend income from Stock Market Investments         | 0.0                        | (0.0)                     | (0.3)                        | 0.0                        |
| (Increase)/decrease in current assets                          | 1.6                        | 0.6                       | (0.0)                        | (0.2)                      |
| Increase/(decrease) in liabilities                             | 0.9                        | (8.5)                     | (1.8)                        | (1.2)                      |
| Pension deficit payments                                       | (2.6)                      | (0.4)                     | (7.7)                        | (2.5)                      |
| Net cash inflow/(outflow) from operating activities            | 10.7                       | (1.8)                     | (1.5)                        | (2.5)                      |
| Cashflow from investing activities                             | (0.7)                      | (0.0)                     | (0.5)                        | (10.7)                     |
| Capital expenditure  | (8.7)                      | (2.0)                     | (8.5)                        | (10.7)                     |
| Net cash inflow/(outflow) from investing activities            | (8.7)                      | (2.0)                     | (8.5)                        | (10.7)                     |
| Cashflow from financing activities                             |                            |                           |                              |                            |
| Stock Market Investments                                       | 0.0                        | (10.0)                    | (30.0)                       | (30.0)                     |
| Interest/Dividend income from Stock Market Investments         | 0.0                        | 0.0                       | 0.3                          | 0.0                        |
| Net cash inflow/(outflow) from financing activities            | 0.0                        | (10.0)                    | (29.7)                       | (30.0)                     |
| Net increase/(decrease) in cash & cash equivalents or the year | 1.9                        | (13.8)                    | (39.7)                       | (43.2)                     |

| Cash & cash equivalent at the beginning of the year | 94.8 | 97.0 | 96.7 | 99.0 |
|---|------|------|------|------|
| Cash & cash equivalent at the end of the year       | 96.7 | 83.2 | 57.0 | 55.7 |

#### Financial Performance at July 2020 (year to date)

Excluding capital expenditure, the net surplus after 4 months was £6m, £3.5m above budget.

The Covid-19 pandemic has resulted in a significant underspend on our core functions of £3.8m (14 percent). This is offset by a decrease in income of £0.4m (1 percent) as the situation has reduced overseas application fees included in "other" income. Our main registration income of £28.9m, has remained stable and largely in line with budget.

Our bank balances have reduced by the £10m investment in the stock market made in July 2020.

Our investment of funds in the stock market has no impact on our free reserves since they are readily accessible if needed. Free reserves at the end of July 2020 were £35.5m. Although above the upper end of our target range of £25m we plan for this to reduce significantly as deferred expenditure catches up when we resume our normal activities post-Covid-19, including addressing the backlog in hearings. In particular we need to continue implementing our plans to invest in our IT and buildings infrastructure. This investment will help us keep our £120 annual registration fee (set in 2015) at that level for as long as possible.

#### Financial Forecast 2020-21 (year end)

#### **Income**

We forecast total income for the financial year to be about £89.2m (£1.5m/1.7 percent below budget) due to a significant dip in the overseas application and registration fees, offset by a potential small increase in UK registration fee income. Total forecast income for this year and the next two (see table "longer term overview" below) reflects our underlying central forecast on registrant numbers shown in the graph below. However, in the current uncertain external environment, forecasting application and registration numbers is particularly uncertain and makes it very difficult to accurately predict numbers and so income.



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#### **Expenditure on core business activities**

We forecast total expenditure on core business activities to be £81.8m, £8.8m (9.7 percent) below budget.

In July, the 2020-2021 budget was restated to reflect a transfer of £2.7m out of Modernisation of Technology Services (MoTS) programme budget back to the general contingency fund, to ensure consistency with the programme budget value that was approved by the Council in July 2020.

Due to the year to date (YTD) surplus position and the anticipated additional underspend by year-end, we have reduced the forecast value of the general contingency fund from £5.3m to £nil which has significantly increased the expected surplus.

Other key items contributing to the underspend are:

- a) **Professional Regulation**: expenditure is forecast to total £39.8m, £2.4m (5.7 percent) below budget for the year. We have kept our focus only on essential activities, prioritising the most serious Fitness to Practise cases. The "Restore & Recover" plans from September 2020 will reduce the overall underspend with a significant increase in staff costs to tackle caseload pressures created by Covid-19.
- b) **Professional Practice**: we forecast total expenditure to be £4.5m, £0.3m (6.3 percent) below budget. Due to Covid-19 a large number of programme approvals were deferred by education institutions into next financial year. A number of new areas Enhancing Registrant Capacity and Advanced Practice Work were identified which will require additional resourcing in the future years.

#### **Expenditure on strategic programmes and projects**

The forecast outturn on programmes and projects is £9.7m, £0.4m (4.3 percent) above budget.

- a) **Accommodation Project:** total expenditure is forecast to be £2.9m, £0.6m (17.1 percent) below budget. Total expenditure on the Edinburgh office relocation activity is expected to be on budget. The forecast underspend is due to changes to the 23 PP refurbishment final business case timetable. Costs are not planned to reduce, just occur later.
- b) **Modernisation of Technology Services (MoTS**: total expenditure is forecast to be £5m, £1m (25 percent) above the revised budget for completing Phase 1. This reflects a broad estimate of costs for Phase 2 of MoTS falling in 2020-2021 and is subject to Council approval.

#### **Capital Expenditure**

Total capital expenditure is forecast to be £8.5m, £2.2m, (20.6 percent) below budget. This is predominantly due to the delay in the start of Phase 2 of the MoTS programme which, depending on the Council approval of business cases, could commence later this year. A large part of the second phase is now deferred to the next two financial years.

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#### Strategy Implementation Fund (SIF)

The SIF was set up to meet the costs of a number of likely areas of work to support our five year strategy. It is being used as intended with planned spend lower than initially estimated. Funds have been allocated to the Insight Plan (£0.3m), Technology Improvements (£0.6m) and planned Business Architecture resourcing (£0.1m) with these amounts being transferred out of the SIF and into project or directorate budgets. A further £0.4m has been set aside for the Regulatory Intelligence Unit for their work in the Insight Plan, subject to planning and approval.

#### Initial Longer Term Overview: 2021-22 and 2022-23

| INCOME & EXPENDITURE (£'m)              | Full Year | 2021 - 22 | Full Year | 2022 - 23 |
|---|-----------|-----------|-----------|-----------|
| Income                                  | Forecast  | Budget    | Forecast  | Budget    |
| Registration fees                       | 87.4      | 86.2      | 88.3      | 86.6      |
| Other                                   | 5.4       | 4.8       | 5.3       | 4.7       |
| Total Income                            | 92.8      | 91.0      | 93.6      | 91.3      |
| Expenditure Core Business               |           |           |           |           |
| Professional Regulation                 | 42.4      | 40.7      | 40.2      | 39.2      |
| Resources & Technology Services         | 17.5      | 17.2      | 17.6      | 17.3      |
| People & Organisational Effectiveness   | 8.0       | 8.0       | 8.0       | 7.9       |
| Professional Practice                   | 4.8       | 4.0       | 3.5       | 3.3       |
| Strategy & Insight                      | 4.2       | 4.0       | 4.1       | 4.0       |
| Communications & Engagement             | 3.2       | 3.2       | 3.2       | 3.2       |
| Directorate - Core Business Expenditure | 80.0      | 77.1      | 76.5      | 74.8      |
| Corporate Expenditure                   | 9.7       | 10.1      | 12.2      | 12.0      |
| Total Core Business                     | 89.7      | 87.2      | 88.7      | 86.9      |
| Surplus/(Deficit) excluding Programmes  | 3.1       | 3.7       | 4.9       | 4.4       |
| Programmes/Projects                     | 13.4      | 10.7      | 20.6      | 14.1      |
| Strategy Implementation Fund            | 4.6       | 4.6       | 2.6       | 2.6       |
| Total Expenditure including capex       | 107.8     | 102.6     | 111.9     | 103.5     |
| Capital Expenditure                     | 13.0      | 10.3      | 15.0      | 8.0       |
| Total expenditure excluding capex       | 94.7      | 92.3      | 96.9      | 95.5      |
| Unrealised (Gains)/Losses               | -         | -         | -         | -         |
| Net Surplus/(Deficit) excluding capex   | (1.9)     | (1.3)     | (3.3)     | (4.2)     |

Key points from an initial high level review of finances over the next two years are:

- a) **Income:** we are anticipating our original assumptions around the number of overseas applications joining the register and some increase in the overall register. Given the uncertainty of the external environment, these are very much subject to change.
- b) Directorate Core Business Expenditure: we anticipate an increase in expenditure due to:
  - A spill over of some activities from 2020-21 due to Covid-19.
  - Deferral of efficiency savings by one year due to the delayed MoTS delivery is also a contributing factor to likely cost increases.
  - A large number of programme approvals were deferred by education institutions into 2021-2022, resulting in additional resource costs in the Professional Practice directorate. The directorate is also anticipating additional staffing to resource regulatory reform work.

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- The increase in the Resources and Technology Services directorate's indicative budgets for is due to estimated higher cost of the Edinburgh new office rent (reflecting existing market rates) and the office running costs.
- **c) Capital Expenditure**: the deferral of both the start of the 23 PP refurbishment project from 2020-2021 as well as initial estimates of Phase 2 of the MoTS programme are the main drivers of an increase in initial indicative budgets for capital expenditure.

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#### Part A: Review of corporate performance reporting and KPIs

#### **Discussion**

#### 1 Context

- 1.1 In March 2020, the Council requested a review of our corporate Key Performance Indicators (KPIs) and metrics, and a streamlining of the Executive Report to reduce its length and make the report more strategic.
- 1.2 The Council were informed in July 2020 that we planned to make iterative changes only for 2020-2021 due to Covid-19. We would undertake a deeper review of corporate performance measures later in the year, leading to new KPIs and measures to apply from April 2021.
- 1.3 We now intend to merge this deeper review into our annual business planning process for 2021-2022, which will start in September 2020. A reviewed set of measures will be provided to the Council in March 2021 for approval, and in the interim we will schedule a further discussion with the Council and Executive Board to gain their feedback.
- 1.4 The main benefit of combining the deeper review with business planning is that this will help to drive stronger alignment to our strategy because measures will be agreed alongside corporate commitments. Additionally, by using an established process this will help to reduce any separate burden on managers.
- 1.5 The remainder of this report presents the changes the Executive Board propose from quarter 2 (reported in December 2020).

#### 2 Composition of the Executive Report

- 2.1 The Executive report is comprised of three core sections of strategic reporting with space for optional annexes. These sections are:
  - a. **Executive report (cover report):** This is the report of the Executive Board to the Council which is provided at every public Council meeting. It is the main report for the Council to hold the Executives to account and discusses sector influences on how we regulate and support our professionals, and information about how we are engaging with, and influencing sector stakeholders. We will highlight significant regulatory events, concerns or regulatory compliance issues which the Council need to be aware of. From September 2020 this report will be organised by our five strategic themes to link key messages within it back to our strategy and our wider strategic communications.

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- b. **Annexe 1 corporate performance report**: This section focuses on progress against our strategy and annual corporate plan and budget and is provided every quarter. It contains progress information about the delivery of our corporate commitments, and quarterly performance against our corporate budget and strategic KPIs.
- c. **Annexe 2 Corporate risk exposure**: This section focuses on our corporate strategic risk exposure and is provided every quarter. It highlights risks which could impact the successful delivery of our strategy or our annual corporate plan.
- d. **Optional annexes:** This section can be used when there are significant information items that the Council needs to be aware of related to our plans.

#### 3 Recommended changes from quarter 2

- 3.1 We have implemented a number of changes over the past 18 months to strengthen how we present our corporate performance information for the Executive Board and the Council. For quarter 2, we will build on the lessons we have learned to further improve the report to become more strategically focused, whilst being easier to navigate.
- 3.2 We propose the following set of principles which will underpin how we report corporate performance within annexes 1 and 2.
  - 3.2.1 Exception reporting within annexe 1: We will report by exception instead of providing detail on everything within every quarterly report. This means that we will state instances in which performance deviates from expectations, either positively or negatively, or where work has been completed within that quarter. Where areas are off track we will highlight the remedial actions we are taking to resolve the performance issue within each report.
  - 3.2.2 This change is intended to reduce duplication within the report whilst ensuring that key messages about performance are easily communicated within a central section of the paper.
  - 3.2.3 We will provide a full year summary at quarter 4 so that we can reflect on our progress across the year.
  - 3.2.4 Data will focus on trends and making comparisons: Data with be presented as trends over time or with comparisons to the previous year (rather than just data for the quarter). We will focus on understanding the drivers behind variances and forecasting the future position.
  - 3.2.5 **Provision of 2 tiers of data reports**: We will provide two tiers of corporate data reports:
    - Tier 1 will focus on strategic data and will be provided to the Council and Executive Board;

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- Tier 2 will provide additional operational detail and directorate breakdowns for Executive Board only.
- 3.2.6 This will assist the Council to remain focused on the delivery of our annual corporate commitments and budget. It also provides the Council assurance that the Executive Board are discussing significant operational performance in addition to strategic issues which can be escalated if performance deviates at tier 1.
- 3.2.7 A detailed discussion of the performance information reported for each tier is provided at part B. This provides a summary of the corporate performance information reported by each directorate.
- 3.2.8 Within tier 2 we will summarise information more intuitively by bringing together common data, for example, putting directorate breakdowns on a single chart.
- 3.3 Improvements to the content:
  - 3.3.1 Monitoring of our regulatory restoration work: We will continue to provide a comprehensive update on progress with our restoration activity, including OCSEs, case work resumption, and our casework pipeline. Once available, we will include the trajectory of our clearing of our FTP caseloads.
  - 3.3.2 **Delegation of some operational KPIs to directorate leadership teams**: the Executive Board have agreed that several KPIs should be considered by directorate leadership teams rather than the Executive or the Council. These can be escalated to Executive Board performance deviates at tier 1 or 2.
  - 3.3.3 Corporate risk register less frequent: We propose that the corporate risk register is provided to the Council in full twice a year at Q2 and Q4 instead of 4 times a year. The Executive report will continue to provide a section discussing our corporate risk exposure every quarter for the Council (no change).
  - 3.3.4 The intention of this change is to reduce the level of detail that the Council are required to engage with every quarter, whilst ensuring that essential corporate risk issues continue to be discussed within the context for strategy and corporate performance monitoring.
  - 3.3.5 The Executive will continue to consider our corporate risk exposure every month, and if our corporate risk exposure significantly changed beyond our risk appetite, the corporate risk register and any relevant action plans would be escalated to the Council at the next meeting.
- 3.4 Improvements to the layout:
  - 3.4.1 **Delivery plan status dashboard**: To supplement exception reporting, we will provide a 1-page dashboard containing a status overview of performance against our corporate plan (delivery plan).

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- 3.4.3 Organise the report by strategic themes rather than our internal structures: We currently present dashboards by directorates' which reflects our internal structures. We will instead organise the report by strategic themes making it easier to track progress against our strategy.
- 3.5 Alignment with other processes:
  - 3.5.1 Assuring our programme and project status reporting: We are developing a process to strengthen how we quality assure performance updates reported against strategic programme and projects, by working more closely with the portfolio management office (PMO) to verify performance information. This will align two processes to ensure that key messages are consistent.
  - 3.5.2 **Increasing automation:** On our journey towards automated reporting, we will work with our data teams to source the majority of our data from within new systems rather than using separate spreadsheets or systems. This will ensure that we have 'one version of the truth' which is stored centrally and can be accessed in real. By the end of the strategy our intention is to automate the majority of the end to end process for reporting and monitoring.
- 3.6 Next steps are:
  - 3.6.1 A new style Executive Report cover paper from September 2020;
  - 3.6.2 A new look and feel annexe 1 for Council reflecting tier 1 data from quarter 2 (reported in December);
  - 3.6.3 A new tire 2 report within annexe 1 for Executive Board from quarter 2;
  - 3.6.4 Corporate measures reviewed as part of business planning from October 2020; and
  - 3.6.5 Proposals for corporate measures from 2021–2022 for Council by March 2021.

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# Part B: Performance information reported by each directorate for the corporate performance report for 2020-2021

#### **Definitions:**

Corporate plan commitments for 2020-2021: commitments contained within our corporate plan and budget for 2020-2021.

Tier 1 KPIs/data: Strategic performance for the Council and Executive Board.

Tier 2 KPIs/data: Data for Executive Board which contains operational breakdowns or provides supplementary context. These will be provided to the Council if tier 1 measures are off track.

| Directorate             | Performance information reported corporately  |
|-------------------------|---|
| Professional Regulation | Corporate plan commitments for 2020-2021:  Commitment 1: Effective regulation (including temporary registration for Covid-19 and casework restoration including trajectory of our FTP caseloads when available));  Commitment 2: FTP change programme;  Commitment 3: Overseas / test of competence.  KPIs/data (tier 1):  Percentage of UK registration completed with no concern within 1 day  Percentage of UK registration completed within 60 days   |
|                         | <ul> <li>Percentage of Overseas registration assessed within 60 days</li> <li>Percentage of EU applications assessed within 30 days</li> <li>Percentage of Readmission applications completed within 21 days (target due to be reviewed in light of new process)</li> <li>Percentage of call attempts handled within our contact centre</li> <li>Interim orders within 28 days of opening case (rolling)</li> <li>Cases concluded within 15 months of opening (rolling)</li> <li>FTP dashboard</li> <li>KPIs/data (tier 2): None</li> </ul> |

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| Directorate           | Performance information reported corporately   |
|-----------------------|--|
|                       |  |
| Professional Practice | Corporate plan commitments for 2020-2021:  |
| Practice              | <ul> <li>Commitment 1: Temporary education standards for Covid-19;</li> </ul>  |
|                       | <ul> <li>Commitment 1: Implementation of pre-registration nursing<br/>(Future Nurse), prescribing and midwifery (Future Midwife)<br/>standards;</li> </ul>   |
|                       | <ul> <li>Commitment 4: Co-production of a new set of post registration<br/>standards;</li> </ul>   |
|                       | <ul> <li>Commitment 5: New model for developing professional<br/>standards (approach and timetable).</li> </ul>  |
|                       | KPIs/data (tier 1):  |
|                       | <ul> <li>Approval decisions against the new standards of all 83 current<br/>AEIs and their programmes by 2020–2021 (year to date).</li> </ul>  |
|                       | KPIs/data (tier 2): None   |
| Communications        | Corporate plan commitments for 2020-2021:  |
| and<br>Engagement     | <ul><li>Commitment 1: Stakeholder engagement for Covid-19;</li></ul>   |
| Lingagement           | <ul> <li>Commitment 7: Implementing a person-centred approach;</li> </ul>  |
|                       | <ul><li>Commitment 7: Co-production principles;</li></ul>  |
|                       | <ul> <li>Commitment 8: Stakeholder relationships and targeted<br/>stakeholder engagement across the UK including 4 country<br/>engagement.</li> </ul>  |
|                       | KPIs/data (tier 1):  |
|                       | Stakeholder perceptions audit (annual);  |
|                       | <ul> <li>Parliamentary stakeholder auditing (annual): awareness of the<br/>NMC as an organisation working in nursing and midwifery<br/>regulation / perception that NMC is effective in our work.</li> </ul> |
|                       | KPIs/data (tier 2):  |
|                       | <ul> <li>Percentage of media coverage in the quarter achieving positive<br/>sentiment (quarterly);</li> </ul>  |
|                       | <ul> <li>Internal Communications (Peakon Score) (quarterly).</li> </ul>  |
|                       | (Note: Communications and Engagement directorate are currently reviewing their KPIs)   |
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|------------------------|---|--|--|--|--|--|
| Directorate            | Performance information reported corporately  |  |  |  |  |  |
|                        |   |  |  |  |  |  |
| Strategy and           | Corporate plan commitments for 2020-2021:   |  |  |  |  |  |
| Insight                | <ul> <li>Commitment 6: New model for local presence (reviewing our local<br/>employer link service and local engagement);</li> </ul>                          |  |  |  |  |  |
|                        | <ul> <li>Commitment 9: Working with DHSC on regulatory reform;</li> </ul>   |  |  |  |  |  |
|                        | Commitment 10: Improve the way we use and publish data and insight:   |  |  |  |  |  |
|                        | <ul> <li>Monitoring the impact of Covid-19 on our strategy and the<br/>wider sector;</li> </ul>   |  |  |  |  |  |
|                        | <ul> <li>Equality, diversity and inclusion research and action planning;</li> </ul>   |  |  |  |  |  |
|                        | <ul> <li>Supporting future workforce planning;</li> </ul>   |  |  |  |  |  |
|                        | <ul> <li>Planning work towards the state of nursing and midwifery<br/>education and practice in the UK;</li> </ul>  |  |  |  |  |  |
|                        | <ul> <li>Setting up the insight and intelligence programme.</li> </ul>  |  |  |  |  |  |
|                        | KPIs/data (tier 1): None  |  |  |  |  |  |
| Resources and          | Corporate plan commitments for 2020-2021:   |  |  |  |  |  |
| Technology<br>Services | <ul> <li>Commitment 11: we have the right capabilities, processes and<br/>resources to fulfil our ambitions (technology and<br/>accommodation):</li> </ul>    |  |  |  |  |  |
|                        | <ul> <li>Supporting home working for Covid-19 (technology, equipment, safety);</li> </ul>   |  |  |  |  |  |
|                        | <ul> <li>Workplace safety/return to the office following Covid-19<br/>(estates);</li> </ul>   |  |  |  |  |  |
|                        | <ul> <li>Modernising our technology services (MOTS) programme;</li> </ul>   |  |  |  |  |  |
|                        | <ul> <li>Accommodation programme (Edinburgh move and 23 Portland<br/>place refurbishment);</li> </ul>   |  |  |  |  |  |
|                        | <ul> <li>Improving the user experience of digital technologies.</li> </ul>  |  |  |  |  |  |
|                        | <ul> <li>KPIs/data (tier 1):</li> <li>Financial monitoring (income, expenditure, balance sheet, investments);</li> <li>Corporate risk exposure.</li> </ul>    |  |  |  |  |  |
|                        | <ul> <li>KPIs/data (tier 2):</li> <li>Network Security: Threats Blocked;</li> <li>NMC website / NMC online downtime (Working hours/ out of hours).</li> </ul> |  |  |  |  |  |

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| Directorate                                   | Performance information reported corporately  |
|---|---|
| Directorate                                   | Performance information reported corporately  |
| Deeple and                                    | Corporate plan commitments for 2020-2021:   |
| People and<br>Organisational<br>Effectiveness | <ul> <li>Commitment 11: we have the right capabilities, processes and resources to fulfil our ambitions (people):</li> </ul>  |
|   | <ul> <li>Workforce safety/return to work following Covid-19);</li> </ul>  |
|   | <ul> <li>Organisational design programme;</li> </ul>  |
|   | <ul> <li>Values and behaviours implementation;</li> </ul>   |
|   | <ul> <li>People programme (reward, pensions, HR policies).</li> </ul>   |
|   |   |
|   | <ul> <li>KPIs/data (tier 1):         People (monthly):         <ul> <li>Total turnover % (including turnover within 6 months);</li> </ul> </li> <li>Total employee FTE (expressed as a variance between actual and planned and shown over time);</li> <li>Total employee engagement score.</li> </ul>   |
|   | <ul> <li>Enquires and complaints (quarterly):</li> <li>Customer feedback: Number of feedback surveys completed / percentage of customers who rated our service good or very good / number of unhappy customers contacted and issues resolved.</li> </ul>  |
|   | <ul> <li>KPIs/data (tier 2): People (monthly): <ul> <li>Sickness absence - average days;</li> <li>Directorate breakdown of employee FTE;</li> <li>Directorate breakdown of employee engagement;</li> <li>Employee net promoter score.</li> </ul> </li></ul>   |
|   | <ul> <li>Enquires and complaints (dashboard – quarterly):</li> <li>Complaints: Number of corporate complaints / Percentage of complaints responded to in 20 day;</li> <li>Information requests and enquires: Number of information requests / percentage of information requests responded to on time and major themes;</li> <li>MP enquires: percentage of MP enquires responded to in 20 days;</li> <li>Percentage of cross organisational enquires responded to in 20 days.</li> </ul> |

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#### Council

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

**Action:** For information.

**Issue:** Reports action taken by the Chair of the Council since 29 July

2020 under delegated powers in accordance with Standing Orders.

There has been one Chair's action to approve the Annual Returns

2019–2020 to the Charity Commission and the Office of the

Scottish Charity Regulator (OSCR).

Core regulatory

function:

Supporting functions.

Strategic priority:

Fit for the future organisation.

Decision

required:

None.

**Annexe:** The following annexe is attached to this report:

 Annexe 1: Chair's action 11/2020 – Approval of Annual Returns 2019–2020 to the Charity Commission and the Office of the

Scottish Charity Regulator (OSCR).

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: Fionnuala Gill Phone: 020 7681 5842 fionnuala.gill@nmc-uk.org

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Item 11: **Annexe1** NMC/20/83 23 September 2020



11/2020

#### **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:            | Date:          |
|--------------------------|----------------|
| Secretary to the Council | 13 August 2020 |

## Approval of Annual Returns 2019–2020 to the Charity Commission and the Office of the Scottish Charity Regulator (OSCR)

- 1. As a registered charity with income in excess of £10,000 a year, the NMC is required to submit annual returns to the Charity Commission and OSCR, together with copies of the audited annual report (Trustees' annual report) and accounts. Charity Commission guidance requires that the annual returns be reviewed and approved by a Trustee of the charity. The Audit Committee confirmed in June 2015 that review and approval by the Chair is appropriate.
- 2. The proposed 2019–2020 annual returns are attached for review, along with a supporting paper.
  - 2.1. Annexe 1: Charity Commission
  - 2.2. Annexe 2: OSCR
- 3. The returns have been populated using information already produced in the audited Annual Report and Accounts 2019–2020, which have been laid in Parliament and published. However, information required by the Charity Commission relating to staff remuneration differs from that required in the Annual report (see supporting paper paragraph 6). This information has been supplied by the Executive Director of Resources and Technology Services.
- 4. The Executive Director of Resources and Technology Services has confirmed that he is content with the financial aspects of both annual returns.

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- a. review and approve the annual returns; and
- b. confirm that you are content for your electronic signature to be attached to this Chair's action.
- 6. Once approved, the returns will be submitted by the Head of Governance online by Friday 21 August 2020. This is in line with good practice, which is that annual returns should be submitted within six months of the financial year-end. It is well in advance of the deadlines of 31 December 2020 (OSCR) and 31 January 2021 (Charity Commission).

Chair's permission given to attach electronic signature due to Covid-19 emergency in the UK

Signed Phil

Philip Graf, Chair

Date: 17 August 2020

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#### **Approval of Annual Returns 2019–2020**

**Action:** For decision.

**Issue:** Approval of Annual Returns 2019–2020 for submission to the Charity

Commission and the Office of the Scottish Charity Regulator (OSCR).

Core regulatory function:

Supporting functions.

Strategic priority:

All Strategic Priorities.

Decision required:

The Chair is requested to approve the Annual Returns 2019–2020 for submission to the Charity Commission and the Office of the Scottish Charity

Regulator (OSCR).

**Annexes:** The following Annexes are attached to this paper:

• Annexe 1: Charity Commission draft annual return 2019-2020

• Annexe 2: OSCR draft annual return 2019-2020

Further information:

If you require clarification about any point in the paper or would like further

**information:** information please contact the Assistant Director named below.

Author: Fionnuala Gill Phone: 020 7681 5842 fionnuala.gill@nmc-uk.org

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#### Context:

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As a registered charity with income in excess of £10,000 a year, the NMC is required to submit annual returns to the Charity Commission and OSCR, together with copies of the audited annual report (Trustees' annual report) and accounts. Charity Commission guidance requires that the annual returns be reviewed and approved by a Trustee of the charity. The Audit Committee confirmed in June 2015 that review and approval by the Chair is appropriate.

## Four country 2 factors

- The NMC is a charity registered with the Charity Commission for England and Wales and the Office of the Scottish Charity Regulator (OSCR).
- The Charity Commission for Northern Ireland is currently only registering organisations operating solely in Northern Ireland. This does not include the NMC.

#### **Discussion**

- 4 The returns have been populated using information already published in the audited Annual Report and Accounts 2019–2020, which have been laid in Parliament.
- However, there is one point to note: in relation to higher paid employees the information required by the Charity Commission differs from that published in our annual report.

#### Disclosures relating to higher paid employees

- The annual return to the Charity Commission requires disclosures relating to higher paid employees in bandings of people with remuneration over £60k, based on **salary plus benefits.** This is different from the Charities SORP which requires the bandings to be based on salary only. Revised remuneration information has been supplied by the Executive Director of Resources and Technology Services.
- 7 The Executive Director of Resources and Technology Services has reviewed the financial aspects of both annual returns and has confirmed that these are correct.
- 8 Recommendation: approve the Annual Returns 2019–2020 for submission to the Charity Commission and the OSCR.

# Midwifery implications:

9 None.

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