Nursing &
Midwifery
Council

NMC programme of change for education

Future nurse and education framework consultation

Introduction

Thank you for your interest in the future of nursing and midwifery education. More information about this consultation is available on the NMC's website.

Everyone is welcome and encouraged to respond to all areas of the consultation, but we know that some people will want to respond to specific consultation questions relating to certain areas of our standards. Therefore, the questions are arranged in a way that introduces each of the specific subject areas we are consulting on and will signpost to specific areas that we are consulting on that may be of interest to them.

To help people to answer, references to the supporting information will be embedded into certain questions to provide additional information about the standards.

We encourage everyone to respond electronically to the independent research company, **Why Research Ltd**, which is collecting all the responses and will be undertaking the independent analysis on our behalf. You can save your responses before submitting them electronically by using the **Word document on the NMC's website**.

Alternative ways to respond to Why Research Ltd are also available if you need one. Please contact us on **consultations@nmc-uk.org**.

Draft standards of proficiency for the future registered nurse

Q1.   In developing the draft standards and requirements, we aimed to:

- reflect on what people will need from nurses in the future that can be applied to all fields of nursing practice (adult, children, learning disabilities and mental health)
- provide outcomes that are open to objective assessment
- reflect higher level knowledge and skills that emphasise research and evidence skills
- ensure a focus on compassion and expertise in evidence based fundamental nursing care
- allow for flexible approaches to programme delivery
- provide entrants to nursing with an understanding of mental and physical health and care.
- contain outcomes that prepare nurses for working effectively in multi-professional and interagency teams
- include outcomes that focus on leadership and the nurse's role in managing complex care
- ensure that there is sufficient emphasis on health and wellbeing
- emphasise public health, dementia, frailty and end of life care
- ensure that the new standards of proficiency are sufficiently accessible to the public
- be unambiguous, clear and concise, and
- provide the building blocks for continued professional development and advanced practice across a range of contexts

Q1a. Do you agree that these principles have been met and seek to protect the public? (Use scale for each of the principles)

- Strongly agree
- Agree
- Neither agree nor disagree
- Disagree
- Strongly disagree
- Don't know

Q2. The future nurse will work within a range of settings and therefore we have designed our draft new proficiencies to apply across all four fields of nursing (adult, children, learning disabilities, mental health). Do you feel we have achieved this approach?

- Strongly agree
- Agree
- Neither agree nor disagree
- Disagree
- Strongly disagree
- Don't know

If you answered strongly disagreed or disagreed please provide comments

Q3. Do you agree that the draft standards of proficiency provide the necessary requirements for safe and effective nursing practice at the point of entry to the register?

- Strongly agree
- Agree
- Neither agree nor disagree
- Disagree
- Strongly disagree
- Don't know

Q4. **Do you agree that the draft standards of proficiency underline the importance of person-centred care?**

- Strongly agree

- Agree

- Neither agree nor disagree

- Disagree

- Strongly disagree

- Don't know

Q5. **Do you agree that the draft standards of proficiency confirms the role of the registered nurse in ensuring that people are encouraged and supported to self manage their care?**

- Strongly agree

- Agree

- Neither agree nor disagree

- Disagree

- Strongly disagree

- Don't know

Q6. **Do you agree that the draft proficiencies states the role of the registered nurse in providing opportunities and in enabling people to have control of their own health and lifestyle decisions?**

- Strongly agree

- Agree

- Neither agree nor disagree

- Disagree

- Strongly disagree

- Don't know

Q7. The draft standards of proficiency place an increased emphasis on leadership skills. Do you agree that this will be achieved for the nurse at the point of entry to the register?

- Strongly agree
- Agree
- Neither agree nor disagree
- Disagree
- Strongly disagree
- Don't know

Q8. The draft standards of proficiency place an increased emphasis on working in multidisciplinary teams and coordinating care across multi-agency organisations. Do you agree that this will be achieved for the nurse at the point of entry to the register?

- Strongly agree
- Agree
- Neither agree nor disagree
- Disagree
- Strongly disagree
- Don't know

Q9. The draft standards of proficiency apply across all four fields of nursing practice (adult, children, learning disabilities and mental health nursing) as nurses of the future will work across a variety of settings and encounter people of all ages with varying complex needs across mental, cognitive, behavioural and physical health.

Should the nursing procedures in annexe B be similarly applied across all four fields of nursing practice?

- Strongly agree
- Agree
- Neither agree nor disagree
- Disagree
- Strongly disagree
- Don't know

Q10. **If you responded strongly disagree or disagree should there be more emphasis in the level of nursing procedures that specific to a field of nursing?**

(For example we may include greater emphasis on advanced physical assessment skills in the adult nursing field and greater emphasis in advanced mental health assessment in the mental health nursing field).

- Strongly agree

- Agree

- Neither agree nor disagree

- Disagree

- Strongly disagree

- Don't know

Q11. **The draft standards of proficiency provide increased clarity about the achievement of competency in nursing procedures and communication and relationship management skills (see annexes A and B). Have we omitted any core skills with this approach?**

- Yes

- No

- Don't know

If you said yes:

Q11a. What nursing procedural skills do you think are missing?

Q12. **Are there any nursing procedural skills stated in annexe B that you think are unnecessary?**

- Yes

- No

- Don't know

Q12a. If you answered yes please list.

Q13. Are there any nursing procedures contained within the annexe B which would be difficult to achieve in practice settings, for example due to a lack of opportunity to be exposed and practice the skill?

- Yes

- No

- Don't know

Q13a. If you answered yes please state which nursing procedures.

Q14. Should competence of certain nursing procedural skills be achieved in simulated practice settings before being assessed in practice settings?

- Yes

- No

- Don't know

Q14a. If you answered yes please state which skills.

Q15. Are there any communication and relationship management skills or nursing procedures contained within the annexes which could be fully achieved in simulation?

- Yes

- No

- Don't know

Q16. Are there any nursing procedures that cannot be fully achieved in simulated practice settings?

- Yes

- No

- Don't know

Q17. **Do the proficiency annexes set out all of the necessary communication and relationship management skills needed for the future nurse to be safe and effective at the point of registration?**

- Yes

- No

- Don't know

If no, please give comments

Q17a. What communication and relationship management skills do you think are missing?

Q18. **Do the proficiency annexes adequately describe the nursing procedural skills, and communication and relationship management required within each of the four fields of nursing (adult, children, learning disabilities, mental health)?**

- Yes

- No

- Don't know

If no, please give comments

Q19. **Should there be some variation in the level of communication and relationship management skills and nursing procedures that is field of nursing specific?**

For example we may include greater emphasis on advanced physical assessment skills in the adult nursing field and greater emphasis in advanced mental health assessment in the mental health nursing field.

- Strongly agree

- Agree

- Neither agree nor disagree

- Disagree

- Strongly disagree

- Don't know

Q20. **In order to demonstrate that students have met the communication and relationship skills stated in annexe A to practice safely and effectively at the end of their programme, should student nurses be required to demonstrate proficiency (please select one option only):**

- Across each of the four fields of nursing practice (adult, children, learning disabilities, mental health nursing)

- In the student's selected field of practice only

- Don't know

Q21. **Nurses will enter the register in one or more of the four fields of nursing practice (adult, children, learning disabilities and mental health nursing). This means that nurses will be expected to achieve all the nursing procedural skills, and communication and relationship management skills stated in the annexes.**

Final sign off of proficiencies, communication and relationship management skills and nursing procedural skills are necessary for safe and effective practice. Should nurses be proficient:

- Across each of the four fields of nursing practice (adult, children, learning disabilities, mental health)

- In the student's selected field of practice only

- Don't know

Q22. **Are there any aspects of nursing practice that you would expect to have seen in the draft standards of proficiencies which are missing?**

- Yes

- No

- Don't know

Q23. **Do you have any other comments about the future nurse standards of proficiency and annexes we are consulting upon?**

Draft education framework: standards for education and training

Q24. **The education framework has requirements for education institutions, practice placement and work placed partners which are increasingly focused on outcome rather than describing processes and inputs.**

Do you agree with this approach to our education and training standards?

- Strongly agree

- Agree

- Neither agree nor disagree

- Disagree

- Strongly disagree

- Don't know

Q25. **The proposed programme of change for education seeks to offer more flexibility to education institutions and their practice placement and work placed partners to deliver nurse and midwifery programmes in creative and innovative ways.**

Is this ambition apparent in our proposals?

- Yes. If yes please can you offer an example in the box below?

- No. If no please can you offer an example where we can go further in the box below?

- Don't know

Q26. When developing the draft education framework standards and requirements, the objectives were:

- situates patient safety at the core of their function

- enhanced outcome, future focused requirements

- being right touch - consistent, clear, proportionate and agile

- evidence based regulatory intervention that promotes inter-professional learning and cross regulatory assurance

- a framework that is applicable to a range of learning environments

- ensuring that the education framework is measurable and assessable

- promoting equality and diversity.

Q26a. Have these objectives have been met? (use scale for each of the principles)

- Yes

- No

- Don't know

Q26b. If you have responded as no please provide additional information for us to consider.

Q27. Do you agree that the education framework can be applied to pre and post registration education and training?

- Strongly agree

- Agree

- Neither agree nor disagree

- Disagree

- Strongly disagree

- Don't know

Q28. Do you agree that the education framework can be applied to nursing and midwifery education and training?

- Strongly agree
- Agree
- Neither agree nor disagree
- Disagree
- Strongly disagree
- Don't know

Q29. Do you agree that the education framework is likely to ensure effective partnership working and shared responsibilities between education institutions, practice placement and work placed learning providers?

- Strongly agree
- Agree
- Neither agree nor disagree
- Disagree
- Strongly disagree
- Don't know

Q30a. If you have responded as strongly disagree or disagree please provide additional information for us to consider.

Q30. Does the education framework draft standards work equally well for programmes delivered in flexible educational modes: for example full-time and part time university based, and part-time work placed?

- Strongly agree
- Agree
- Neither agree nor disagree
- Disagree
- Strongly disagree

- Don't know

Q31. Do you agree that the education framework promotes inter-professional learning?

- Strongly agree
- Agree
- Neither agree nor disagree
- Disagree
- Strongly disagree
- Don't know

Q32a. Please state any additional requirement we could state to further encourage inter-professional learning.

Q32. Do you agree that the education framework prioritises the safety of people during all education and training that takes place in academic and simulation settings?

- Strongly agree
- Agree
- Neither agree nor disagree
- Disagree
- Strongly disagree
- Don't know

Q33. Do you agree that the education framework prioritises the safety of people and patients during all education and training that takes place in practice placement and work placed settings?

- Strongly agree
- Agree
- Neither agree nor disagree
- Disagree
- Strongly disagree
- Don't know

Q34. Is there any aspect of delivery and management of education and training that you would expect to have seen in the education framework which is missing?

- Yes

- No

- Don't know

Q35. Do you have any more comments on the Draft Education Framework: standards for education and training?

Draft learning and assessment requirements

Q36. **As part of our proposed new requirements for learning and assessment, we propose separating the support and supervision of students from the assessment of students.**

Do you agree with this approach?

- Strongly agree
- Agree
- Neither agree nor disagree
- Disagree
- Strongly disagree
- Don't know

Q37. **Do you agree with our proposal that the practice assessor role should be independent of the practice supervisor role?**

- Strongly agree
- Agree
- Neither agree nor disagree
- Disagree
- Strongly disagree
- Don't know

Q38. Are there any other ways we can ensure independence of the assessment outcomes of student proficiency?

- Yes

- No

- Don't know

Q39. We do not intend to set proficiencies for the new roles which we have proposed. Instead we will encourage locally agreed innovative and creative approaches to supervision and assessment to be in place.

Do you agree with this approach?

- Strongly agree

- Agree

- Neither agree nor disagree

- Disagree

- Strongly disagree

- Don't know

Q40. We will no longer require those supporting, supervising and assessing students to complete a programme that the NMC approves. This will enable local innovation, creative and inter professional approaches to take place.

Do you agree with this approach?

- Strongly agree

- Agree

- Neither agree nor disagree

- Disagree

- Strongly disagree

- Don't know

Q40a. Please state any risks that you perceive in relation to this proposal.

Q41. **The proposed model allows that practice supervisors can be any registered health and social care professional who is suitably prepared and does not have to be an NMC registrant. This will enable educators to decide locally the individuals and / or groups that are best placed to supervise learners.**

Do you agree with this approach?

- Strongly agree

- Agree

- Neither agree nor disagree

- Disagree

- Strongly disagree

- Don't know

Q41a. Please state any risks that you perceive in relation to this approach.

Q42. **The proposed model states that, while a range of academic and practice based educators will contribute to assessing a student, there will be two nominated assessors – a practice assessor and an academic assessor – who will be responsible for the assessment of a student for each part of the programme.**

(For example for the first year of a three year programme or semester one of a post registration programme.)

Do you agree with this approach?

- Strongly agree

- Agree

- Neither agree nor disagree

- Disagree

- Strongly disagree

- Don't know

Q42a. Please state any risks that you perceive in relation to this approach.

Q43. In the future it may not be necessary for a student nurse to be assessed by a nurse from the same field of practice. Educators from academic and practice settings would decide locally who is best placed to assess the student.

Do you agree with this approach?

- Strongly agree
- Agree
- Neither agree nor disagree
- Disagree
- Strongly disagree
- Don't know

Q44. Do you have any more comments on the Draft requirements for learning and assessment?

Draft pre-registration nursing programme requirements

Q45. **Our new programme requirements allows approved education institutions (AEIs) and their practice placement partners to set entry criteria for literacy, numeracy and digital literacy. We will not set requirements in this area.**

Do you agree with this approach?

- Strongly agree
- Agree
- Neither agree nor disagree
- Disagree
- Strongly disagree
- Don't know

Q46. **Within the existing pre-registration nursing entry criteria AEIs must have processes in place to allow recognition of prior learning to a maximum of 50 percent of the programme provided all the requirements are met in full. (This can be either academic and practice learning or both).**

Do you agree that we should continue to set a maximum limit for recognition of prior learning?

- Strongly agree
- Agree
- Neither agree nor disagree
- Disagree
- Strongly disagree
- Don't know

Q46a. If you answered strongly agree or agree what percentage of the programme should be the maximum available for recognition of prior learning?

Q47. In recognition of the importance of theory and practice to student learning and proficiency, we propose that we continue to require an equal amount of education to be delivered in practice and theory. Do you support this position?

- Strongly agree
- Agree
- Neither agree nor disagree
- Disagree
- Strongly disagree
- Don't know

Q47a. If you strongly disagree or disagree, should we leave decisions about the proportion of practice and theory to individual education institutions and their practice placement partners?

- Strongly agree
- Agree
- Neither agree nor disagree
- Disagree
- Strongly disagree
- Don't know

Q48. There is currently a cap that limits 300 hours of practice learning to be achieved in simulated practice learning environments.

We are proposing that practice learning provided through simulation can be increased but should not exceed the number of hours spent in actual practice placement settings.

This means students may spend more time in simulated practice learning environments than they do now.

Do you agree with this approach?

- Strongly agree

- Agree

- Neither agree nor disagree

- Disagree

- Strongly disagree

- Don't know

Q48a. If you answered strongly disagree or disagree do you think there should continue to be a limited number of hours that states the cap for simulation hours used for practice hours.

- Yes

- No

- Don't know

Q48b. If yes, how many hours should the cap limit be set at? Please state the maximum number of hours to be used as simulation for practice.

Q49. The draft pre-registration nursing programme requirements allow education institutions to decide what is required from a student at each progression point of their programme.

Do you support this approach?

- Strongly agree

- Agree

- Neither agree nor disagree

- Disagree

- Strongly disagree

- Don't know

Q50. Throughout our pre-consultation engagement, the introduction of a UK wide national standardised practice assessment document has been frequently proposed to improve consistency of outcome judgments on student proficiency.

Do you agree with this proposal?

- Strongly agree

- Agree

- Neither agree nor disagree

- Disagree

- Strongly disagree

- Don't know

Q51a. If you agreed or strongly agreed with the previous question, should the NMC work with others to support the development of a standardised practice assessment document?

- Strongly agree

- Agree

- Neither agree nor disagree

- Disagree

- Strongly disagree

- Don't know

Q51. Do you have any more comments on the Draft programme requirements for pre-registration nursing?

Programme of change for education – equality and diversity and inclusion questions

Q1. **Are you responding as an individual or on behalf of an organisation?**

- As an individual. *If yes go to Q2*
- On behalf of an organisation. *If yes go to Q14*

Responding as an individual

Q2. **Please tick which one of the following best applies to you:**

- I am a member of the public. *If yes go to Q6*
- I am a nurse or a midwife. *If yes go to Q3*
- I am a student nurse or a student midwife. *If yes go to Q5*

Nurses and midwives only

Q3. **Which of the following categories best describes your current practice?**

Tick one or more areas that best describe the area you practise in

- Direct patient care
- Management
- Education
- Policy
- Research
- Other *(please give details)*

Q4. Please tick one or more box(es) which best describes the type of organisation you work for:

- Government department or public body
- Regulatory body
- Professional organisation or trade union
- NHS employer of doctors, nurses or midwives
- Independent sector employer of nurses and midwives,
- Agency for nurses or midwives
- Education provider
- Consumer or patient organisation
- Other *(please give details)*

Q5. Please tick the box(es) below that most closely reflect(s) your role?

- Adult nurse
- Mental health nurse
- Learning disabilities nurse
- Children's nurse
- Specialist community public health nurse
- Health visitor
- Occupational health nurse
- School nurse
- Family health nurse
- Specialist practice nurse
- District nurse
- General practice nurse
- Midwife
- Student nurse
- Student midwife
- Other *(please give details)*

All individuals

To help make sure that our consultations reflect the views of the diverse UK population, we aim to monitor the types of responses we receive to each consultation and over a series of consultations. Although we will use this information in the analysis of the consultation response, it will not be linked to your response in the reporting process.

Q6.   What is your country of residence?

- England
- Northern Ireland
- Scotland
- Wales
- Other – European Economic Area
- Other – rest of the world *(please say where)*

Q7.   What is your age (years)? (please tick only one box)

- Under 25
- 25–34
- 35–44
- 45–54
- 55–64
- 65 or over
- Prefer not to say

Q8.   Are you:

- Female
- Male
- Prefer not to say

Q9.   Please select one option to indicate whether your gender identity completely matches the sex you were registered at birth:

- Yes
- No
- Prefer not to say

Q10. Please indicate your sexual orientation (please tick only one box)

- Bisexual
- Gay man
- Gay woman or lesbian
- Heterosexual or straight
- Prefer not to say

Q11. What is your ethnic origin? (please tick one)

White

- White
- British, English, Northern Irish, Scottish or Welsh
- Irish
- Gypsy or Irish traveller
- Any other white background *(please specify)*

Mixed or multiple ethnic groups

- White and Black Caribbean
- White and Black African
- White and Asian
- Any other mixed or multiple ethnic group *(please specify)*

Asian or Asian British

- Indian
- Pakistani
- Bangladeshi
- Chinese
- Any other Asian background *(please specify)*

Black, African, Caribbean or black British

- Caribbean
- African
- Any other black, African, or Caribbean background *(please specify)*

Other ethnic group

- Arab
- Prefer not to say
- Any other ethnic group *(please specify)*

Q12. Would you describe yourself as having a disability*? (please tick only one box)

*Disability in this context means a physical or mental impairment which has a substantial and long-term adverse effect on a person's ability to carry out normal day-to-day activities.

- Yes
- No
- Prefer not to say

Q13. Please indicate your religion (please tick only one box)

- No religion
- Buddhist
- Christian
- Hindu
- Jewish
- Muslim
- Sikh
- Prefer not to say
- Any other religion *(please specify)*

Responding as an organisation

Q14. Which one of the following categories best describes your organisation?

- Government department or public body
- Regulatory body
- Professional organisation or trade union
- NHS employer of doctors, nurses or midwives
- Independent sector employer of nurses and midwives,
- Agency for nurses or midwives
- Education provider
- Consumer or patient organisation
- Other *(please give details)*

Q15. Does your organisation represent the views of nurses or midwives and/or the public that share the following characteristics? (select all that apply)

- Older
- Younger
- Disabled
- Ethnic groups
- Women/men
- Lesbian, gay and bisexual
- Transgender
- Pregnancy/maternity

Q16. In which country is your organisation based?

- UK wide
- England
- Scotland
- Northern Ireland
- Wales
- Other – European Economic Area
- Other – rest of the world *(please say where)*

Q17. Please give the name of your organisation

Q18. Would you be happy for your comments in this consultation to be identified and attributed to your organisation in the reporting, or would you prefer that your response remains anonymous?

- Happy for comments to be attributed to my organisation
- Please keep my responses anonymous

Q19. Please state your name

Q20. Please state your job title

Programme of change for education – Impact Assessment

The proposed new standards of proficiency, and standards of education and training, should not create unlawful barriers or create disadvantage for diverse groups on the basis of: race, gender, disability, religion and belief, sexual orientation, age, gender reassignment, pregnancy/maternity, political belief or being in a marriage/civil-partnership. Will any of our proposals have a particular impact on these groups across the following categories?

IMQ1. Race:

- Yes – largely positive impact anticipated
- Yes – largely negative impact anticipated
- No
- Don't know

IMQ2. Gender:

- Yes – largely positive impact anticipated
- Yes – largely negative impact anticipated
- No
- Don't know

IMQ3. Disability:

- Yes – largely positive impact anticipated
- Yes – largely negative impact anticipated
- No
- Don't know

IMQ4. Religion and belief:

- Yes – largely positive impact anticipated
- Yes – largely negative impact anticipated
- No
- Don't know

IMQ5. Sexuality orientation:

- Yes – largely positive impact anticipated
- Yes – largely negative impact anticipated
- No
- Don't know

IMQ6. Age:

- Yes – largely positive impact anticipated
- Yes – largely negative impact anticipated
- No
- Don't know

IMQ7. Gender reassignment:

- Yes – largely positive impact anticipated
- Yes – largely negative impact anticipated
- No
- Don't know

IMQ8. Pregnancy / maternity:

- Yes – largely positive impact anticipated
- Yes – largely negative impact anticipated
- No
- Don't know

IMQ9. Political belief:

- Yes – largely positive impact anticipated
- Yes – largely negative impact anticipated
- No
- Don't know

IMQ10. Being in a marriage or civil partnership:

- Yes – largely positive impact anticipated
- Yes – largely negative impact anticipated
- No
- Don't know