Patient and Public Advisory Group, 4 February 2015
Welcome and introduction

Jackie Smith
Chief Executive and Registrar
• The revised Code
• Exceeding the Fitness to Practise adjudication target
• Midwifery regulation
• Health Committee’s report on complaints and raising concerns
Update

Jon Billings, Director of Strategy
• Revalidation pilots
• House of Commons Health Committee hearing
• Consultation to remove time limits for the completion of education programmes
What we will cover today

• The Code and creating a document for patients and the public
• The Law Commission
• Developing our Education Strategy
• Developing quality standards for the NMC
The new Code: patients and the public
Introduction

- prioritise people
- practise effectively
- preserve safety
- promote professionalism and trust
Introducing the new Code

The updated NMC Code describes the revised professional standards that all nurses and midwives registered in the UK must uphold in their daily working lives.

The Code has been revised to ensure it reflects modern nursing and midwifery practice in the UK and helps patients, their families and the public understand what they can expect from nursing and midwifery care.

The new Code is effective from 31 March 2015.
One Code, four themes

- Prioritise people
- Practise effectively
- Preserve safety
- Promote professionalism and trust

Public protection
The link between the organisation, and the profession with the patient and public at the centre

Organisational priorities

- Personalisation
  - Access
  - Involvement
  - Rights

- Clinical guidelines
  - Learning
  - Innovation
  - Quality control

- Safety systems
  - Safety culture
  - Monitoring

- Transparency
  - Leadership
  - Governance

<table>
<thead>
<tr>
<th>people</th>
</tr>
</thead>
<tbody>
<tr>
<td>Care</td>
</tr>
<tr>
<td>Compassion</td>
</tr>
<tr>
<td>Listening</td>
</tr>
<tr>
<td>Dignity</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>effective</th>
</tr>
</thead>
<tbody>
<tr>
<td>Evidence-based practice</td>
</tr>
<tr>
<td>CPD</td>
</tr>
<tr>
<td>Technical skills</td>
</tr>
<tr>
<td>Experimentation</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>safety</th>
</tr>
</thead>
<tbody>
<tr>
<td>Safety behaviours</td>
</tr>
<tr>
<td>Human factors</td>
</tr>
<tr>
<td>Team orientation</td>
</tr>
<tr>
<td>Reporting</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>trust</th>
</tr>
</thead>
<tbody>
<tr>
<td>Honesty</td>
</tr>
<tr>
<td>Probity</td>
</tr>
<tr>
<td>Professionalism</td>
</tr>
</tbody>
</table>
What’s new in the Code?

**Duty of Candour**
Every healthcare professional must be open and honest with patients when something goes wrong with their treatment or care which causes, or has the potential to cause harm or distress.

**Fundamentals of care**
The Code sets standards of fundamental care and provides examples of what this includes e.g. nutrition, hydration and environmental cleanliness.

**Social media**
The code recognises the changing nature of communications and sets standards for acting responsibly including the use of social media.
What’s new in the Code?

Medicines management and prescribing
Standards that clearly set the context for prescribing, supply, dispensing and administering medications.

Conscientious objection
Nurses and midwives must act in the best interests of people at all times and can only make conscientious objections to a particular procedure in limited circumstances.

End of life care
Specific reference is made to the needs of those in the last days and hours of life.
What changed in the Code?

A greater focus on:

**Compassionate care** – kindness, respect and compassion

**Teamwork** – work co-operatively

**Record keeping** – six clear standards to support all record keeping

**Delegation and accountability** – delegate responsibly, be accountable

**Raising concerns** – this aligns the Code with the re-launched *Raising Concerns Guidance* published in 2013

**Cooperating with investigations and audits** – includes those against individuals or organisations and acting as a witness at hearings.
The Code: For everyone’s protection
A Code for Patients and the Public

- prioritise people
- practise effectively
- preserve safety
- promote professionalism and trust
What do patients and the public need to know?

- The new Code sets out the professional standards which nurses and midwives must uphold in their daily roles.

- The Code is there to provide a touchstone against which to measure the quality of care experienced by patients and/or their loved ones.

- Every nurse and midwife in the UK must demonstrate that they practise their profession according to the Code in order to be registered by the independent regulator, the NMC.

- The Code has been revised with the protection of patients in mind. It focuses on four elements – putting patients at its centre, practising safely, practising effectively, and promoting professionalism and trust. Patients and the public can find out more by reading the NMC code.

- Patients and service users are encouraged to raise concerns if they think a nurse or midwife has not adhered to the professional standards contained within the Code.
Where next for patients and the public?
What did you say?

A leaflet should be produced which is a simple introduction to the Code for patients and families

**It should be:**
- Simple, brief, relevant and engaging
- Plain English
- Accessible with consideration of different formats/mediums
- Supported by collateral such as posters, on TV screens in surgeries etc.

**It should consider**
- What to do if they are unhappy
- Consider specifics such as:
  - 'Conscientious objection'
  - Informed consent
  - Children and young people
  - The changing cultural dynamic of joint decision making
- Rights and responsibilities
Today…

The draft content is a prompt to help us plan:

- How do we engage patients, families and their representatives meaningfully
- What is the call to action - the key message to them?
- When we should do that? May/June?
- How we co-create the approach with yourselves and the patients
- How do we encourage organisations to integrate the Code into existing materials/processes - so it's embedded
- A timeline that makes that achievable and appropriate
- Reinforcing the role of public protection but also the importance of the profession

We sent you a simple narrative as a starter for ten. We would like your feedback and to address the bigger question.
Questions for today

• What did the draft text flag as important or missing for you?

• How do we want patients and families to learn about, and interact with, the Code?

• What does that mean in practice?

• What role would you like to play and how could that work?
Law Commissions’ Bill – why it matters for patients and the public

Jon Billings
Director of Strategy
Background to the Bill

We would like to make significant changes to our processes that would be good for patients, professionals and the wider healthcare system.

However, our current legislative framework makes it impossible for us to change things quickly and efficiently:

- 9 regulators of healthcare professionals in the UK
- Over 200 pieces of legislation governing them
- Making changes takes 1-2 years

We are therefore calling on the next government to introduce a new law into the UK parliament.
The proposed new Bill

The Regulation of Health and Social Care Professions Bill (‘the Law Commissions’ Bill’) was published by the three Law Commissions of the United Kingdom on 2 April 2014. If enacted it would:

• create a single Act of Parliament covering the professional regulators responsible for all the different regulated healthcare professions in the UK.

• introduce more consistency and transparency and enable us to provide better protection for patients, be more responsive, and become a more effective and efficient regulator.
Particular benefits for patients and the public

The new model of regulation in the Bill offers:

- More consistency across the regulators
- More transparency
- More scope for co-operation and joint working
- Greater effectiveness and efficiency
- More flexibility for regulators to develop their regulatory processes in response to changing circumstances.

This new model should be an improvement for patients, the public and the professionals we regulate.
Key points in DH response

- All regulators will have the same powers at the end of the investigation stage and the same sanctions at the final hearing, with the same names and consequences.
- Neither governing Councils nor fitness to practise panels will be allowed to have a registrant majority.
- All decisions (including decisions to agree undertakings or impose a warning) will have to be published.
- New powers to remove registrants automatically if convicted of very serious criminal offences.
A few areas of concern

- Support in the response for a 5 year time limit on fitness to practise allegations, subject to a public interest exception, which we do not support.

- No decision yet reached on key issue of regulators’ powers to make and amend their own procedural rules within the framework set out in the new Act, which is key to our ability to be flexible and effective.

We will therefore continue to work with Department of Health officials, Parliamentarians, patient, public and professional groups and others to refine the draft Bill.
For discussion

We would be interested to hear:

1. Your initial views on the Bill or the government’s response?
2. Any other areas of particular concern?
Education strategic delivery plan 2015-2020

Katerina Kolyva,
Director of Continued Practice
Our primary purpose is to protect patients and the public in the UK through effective and proportionate regulation of nurses and midwives. We set the standards of education and practice, maintain a register of those who meet these standards and take action when a nurse or midwife’s fitness to practice is called into question. By doing this well we promote public confidence in nurses and midwives and regulation...
The pillars of the NMC strategy

Protecting the public

- Effective regulation
- Use of intelligence
- Collaboration and communication

Modern, effective organisation
Aligning the Education Strategic Delivery Plan and NMC strategy

Protecting the public

Effective regulation:
Outcome based standards
QA framework

Use of intelligence:
QA data
Risk data
Research & evaluation of data

Collaboration and communication:
Proactive Engagement education stakeholders and partnership working

Providing a contemporary and confident interface between education, practice policy and people
Overarching success measures

1. Ensure public protection
2. Maintaining the integrity of the register now and in the future
3. Enhance public confidence
# How will we ensure success

## 1. Ensuring public protection

1.1 Prioritising work on the basis of risk maximising the impact of our resources on public protection

1.2 Ensuring education is understood by NMC and it’s stakeholders as a powerful preventative tool of public protection

1.3 Greater assurance through more robust Revalidation standards, third party confirmation and risk-based audit to take action regarding those who should no longer be on register

## 2. Maintaining the integrity of the register

2.1 Competency test

2.2 Statutory requirements – commitment following Francis

2.3 Building in-house risk analysis skills to provide a targeted and proportionate auditing and action plan

## 3. Enhance public confidence

3.1 Stakeholder feedback will be primary source of evidence

3.2 Improve quality of key relationships

3.3 Ongoing stakeholder engagement
5 elements of Education strategic delivery Plan

Education Strategic Delivery Plan

- Pre registration
- Post registration
- Resources
- Engagement
- Quality assurance
Elements of Education strategic delivery plan

**Pre registration**
- Standards will align with legislative requirements
- National assessment strategy
- Annual feedback of nursing and midwifery experience
- Survey of newly qualified registrants entering the register
- Plain English standards

**Post registration**
- Standards align with legislative requirements
- Development of standards is informed by regulatory evidence and research
- Return to Practise standards
- Coordinated approach to maintaining registration
- Shape of register alignment
- Evaluation of test of competence
- Plain English standards

**Quality assurance**
- Evaluation of pre registration standards
- Quality assurance proactively addresses risks and highlight good practice
- Delivery of quality assurance operations and enhancing QA of education
- Further enhancement of QA of education
- Risk is measured and addressed accordingly

**Engagement**
- Strategic engagement reflects our understanding of education and practice across the UK through collaborative partnership
- Student engagement forums
- Education is well understood
- Annual feedback of nursing and midwifery experience
- Nurses and midwifes meet standards and are able to revalidate

**Resources**
- Collaborative resource model incorporating finance, IT and staff
- Policy development across four countries
- Establish network for working relationships
Developing quality standards for the NMC

Mike Andrews
Assistant Director Quality Assurance and Risk Audit
Quality and performance management framework
NMC Quality Standards

Public Protection

1. We will protect the public through regulatory decisions and outcomes that:

- are efficient, effective and timely;
- address risk;
- are fair and accountable;
- are proportionate and evidence-based;
- support equality and diversity; and
- we will ensure that these decisions and outcomes are accurately and clearly communicated to affected customers and stakeholders.
2. Our work will comply with relevant legislation, financial regulations, policy and guidance and this will be reflected in our processes and KPI targets.
NMC Quality Standards
Communication and Engagement

3. Communication is essential and our communications and published information will be accurately and clearly expressed. We will engage with customers and stakeholders appropriately, including:

- keeping them informed;
- supporting them;
- listening to them; and
- treating them with respect and courtesy.
Using Information Properly

4. Information is a vital asset and will be securely retained and will be published and disclosed where appropriate.
NMC Quality Standards

Questions

1. Do the standards cover the key things we have to do?
2. Is there anything missing?
3. Is there anything in the standards you disagree with?
Next steps

Jon Billings,
Director of Strategy
Next steps

• Circulate the summary notes from today and ask those not able to attend to contribute.

• We circulate the summary to our executive team and share with all staff.

• We publish the summary on our website.
Keeping in touch

• Read and circulate notes of this meeting.
• Sign up to our public newsletter.
• Follow us on Twitter – @nmcnews.
• Just call or email us!
• Laura Oakley – laura.oakley@nmc-uk.org
Dates for your diary

Future meetings of the Patient and Public Advisory Group are on:

• Thursday 7 May 2015.
• Wednesday 16 September 2015.
Thank you