

Future specialist practice qualifications (SPQs): specialist community nursing
Thursday 22 April 2021, 2.30-3.30 pm

Please note: for GDPR purposes we are unable to attribute comments to named individuals however the original chatbox comments and questions that were posed during the webinar remain unchanged. Our responses have been added in green italic font.

Time Asked	Question Asked
02:34:15 PM BST	How do we ask Qs? <i>We will reiterate at the start of the webinar in the housekeeping that questions can be entered into the chat box.</i>
02:35:40 PM BST	are we able to view others messages in the chat box please – <i>We need to make this clear at the start of the webinar in the housekeeping that attendees are unable to view comments of other attendees. This is a feature of the platform being used.</i>
02:39:25 PM BST	1
02:39:25 PM BST	England
02:41:08 PM BST	Heart Failure
02:41:28 PM BST	I am a practice development facilitator (qualified RMN) for Dementia UK <i>Pleased you could attend.</i>
02:42:19 PM BST	why has the review focused on 3 branches of SCPHN yet the 5 SPQs are being reviewed in its entirety , we should have meetings that are SPQ specific – <i>We are having field specific webinars and meetings for SPQ too – you can find the dates here.</i>
02:43:18 PM BST	Question - given this is a consultation and this platform does allow you to share chat and video of participants why aren't you? <i>This platform does not permit this in 'real time' but we have committed to publishing all of the chat comments on the website following each webinar</i>
02:43:20 PM BST	could you ask that question on this webinar – <i>Of course. See above.</i>
02:43:52 PM BST	Can the NMC please share the numbers of SPQ (community) and SCPHN as new qualifications over the last 5 years <i>We will prepare this and share soon as our new state of the register report will be published in May 2021 but can share the data we have that takes us to September 2020.</i>
02:44:55 PM BST	Absolute numbers of SPQ don't show the movement on and off the register - that is a pattern over the last 5 years for example. <i>Agreed and we will collate and share – do also be aware that although the data tells us who has these SPQ qualifications it does not confirm that professionals are actually working in those community roles at this time or in community settings.</i>
02:47:40 PM BST	Are high level standard - those standards which protect the public? This means there is not lots of information that may constrain <i>Regulatory standards are high level by nature. Check out our other standards. Detailed requirements are always at the level of the curriculum. These are then subject to QA by the NMC at programme approval.</i>
02:49:20 PM BST	Can we ask where the skills are - Owen on his slide refers to associated skills - yet you have not provided these as part of the consultation. Where are they? <i>The proficiencies identify what people need to know, and be able to do in practice. There are no separate skills annexes, because the groups we engaged with indicated this was not needed. But we have included a question about this in the consultation. If there are skills you think should be</i>

	<i>specified you can tell us what they are for each SPQ.</i>
02:50:17 PM BST	Has the NMC considered using alternative software that allows participants to engage by seeing comments in the chatbox? It would help considerably with the discussion. <i>There are alternative events that will provide more real-time interactions. This platform (GoToWebinar) is not a platform for consultation, but for holding webinars and events to brief people prior to consultation. We are sharing and responding to the comments as you can see. Please be assured that all the comments will be considered.</i>
02:54:24 PM BST	So essentially the NMC are reviewing their platforms and will probably implement something fit for purpose for consultation once this consultation has ended. <i>Our technology team is reviewing the requirements across the NMC. This platform (GoToWebinar) is not a platform for consultation, but for holding webinars and events to help people hear from the NMC.</i>
02:55:06 PM BST	I note public health involvement - was there any public/service user engagement? <i>Yes there was, but due to the pandemic not as many were able to participate as we would have liked. This is why there will be independent focus groups and telephone interviews with members of the public, service users and seldom heard groups to hear their views on what is important in relation to the new standards.</i>
02:56:02 PM BST	what happens to me as an SPQ holder in relation to these revisions? <i>Your recordable qualification remains as an annotation on your PIN.</i>
02:56:18 PM BST	my connection got lost- was their qualified CCNs involved in developing these standards? <i>Yes we had a number of CCNs involved throughout this process.</i>
02:56:52 PM BST	what will this mean to me as a current SPQ holder? what will happen to my current SPQ? <i>Your recordable qualification remains as an annotation on your PIN.</i>
02:57:49 PM BST	What discussions did you have about parity of esteem between the SPQs given people working in healthcare for homeless people have an unnamed award. Also just how many people from social care, services for homeless etc did you have involved in the very small number of round table events you held? <i>We have had numerous conversations with different service organisations and professionals re the potential for a new SPQ that would be of benefit to their sector and will want to understand more throughout the consultation.</i>
02:57:58 PM BST	what do you mean by system leadership? <i>Senior national leaders and leaders of services within provider organisations. This is a good point and we can add a definition to the glossary. Thank you.</i>
02:58:17 PM BST	Can you upload the chat box in its entirety please so we are able to see what Nurses are thinking <i>Of course we have committed to doing that.</i>
02:58:22 PM BST	What assurances and what impact assessments have been completed to ensure that the draft standards do not dilute nursing skill and expertise? <i>It would be good to understand more about what is meant in relation to this point. These draft standards go further than the out of date SPQs we have now, they surpass the requirements of our new pre-registration standards, and current community nurses were involved in shaping these draft standards. We have compared and aligned them with advanced practice standards and the QNI voluntary standards that have been published.</i>
02:59:04 PM BST	SPQDNs already carry out all of the "uplifted" detail. <i>Yes, and it was important that our regulatory standards were updated to reflect that too. But if you think that there are additional elements of knowledge and skill that should be</i>

	<i>included, please let us know what those are through the consultation.</i>
03:01:16 PM BST	Will the SPQ standards reflect the 4 pillars of Advanced Practice? <i>The draft standards are not structured under the four pillars of advanced practice, although there is alignment of content. This is because we have not begun the work to explore regulation of advanced practice and so this would not be appropriate at this point.</i>
03:01:29 PM BST	Where will the new SPQ stand in relation to the emerging Advanced Practitioners <i>Our draft standards aim to provide a bridge to future work we will go onto do in this area.</i>
03:01:49 PM BST	The public can only be protected with regulatory standards rather than each AEI writing their own. By the way you haven't asked a consultation question about bespoke standards. <i>We are not asking the AEIs to write their own standards, instead they are responsible for writing curricula where more detail is necessary for each of the different student journey routes they are seeking approval for (they do this now in relation to the pre-registration qualifications and the existing SPQ qualifications, which contain high level standards). We will then QA programmes for approval. We have asked questions in relation to this in the consultation.</i>
03:01:51 PM BST	Do the consultation questions ask about the skills annexes and bespoke/specialist standards - both as separate areas specifically? <i>Yes</i>
03:02:19 PM BST	What assurance can be given to demonstrate that specialisms are not diluted <i>Please look at the draft programme standards – this will form the basis of the QA approval process and will provide assurance to the NMC and wider. If this does not, then the programme will not be approved.</i>
03:02:21 PM BST	Please can you explain how skills annexes would work for the SPQ which has not annotation? <i>At the moment we are not proposing skills annexes because our stakeholder groups were not convinced these would be helpful– if there is a need then this will be determined after the consultation using co-production approaches.</i>
03:03:47 PM BST	what level of pay for undertaking the qualification ? and after ? <i>This is not something that the NMC has any jurisdiction over.</i>
03:04:17 PM BST	Will the number of participant on today's session be reported? We would have loved to be able to see participants and also make it more engaging <i>This is the start of the consultation engagement where webinars provide a way of bringing large group numbers up to speed on where we are. 60 people attended the live webinar on 22 April. We've shared the recording on the NMC website so others can view the session at a convenient time for them. Other sessions will have more opportunity for seeing audiences and real time interaction.</i>
03:04:17 PM BST	to be fair the set out of the consultation is not easily managed , questions on the survey do not allow for expansion unless you click on a No response , so in order to make your view known you have to put in the wrong Quantitative response scuppering the data collection. <i>if you want to click a yes response AND make a comment, you can always add any comments in the final comments box at the end of the survey, or you can send us a separate letter. But we would like to understand more if you want to get in touch directly, please do that.</i>
03:04:31 PM BST	Please can you share how you have engaged with nurses working in social care? There are none here today. The QNI would be very pleased to facilitate a discussion with the members of the Care Home Nurse network - we have almost 1000 members. <i>Thank you for the offer and our comms lead</i>

	<i>can get in touch. We have engaged with different stakeholders from social care – both leaders, employers and practitioners and hope to do more during the consultation.</i>
03:04:57 PM BST	after undertaking this complex course and gaining this qualification what band would they be ? there is so much variety and it does not encourage uptake <i>We have no say in what professionals are paid however we hope that employers would recognise the benefits that professionals with this qualification would bring to people and services. Professional and union bodies are active in negotiations about pay.</i>
03:06:16 PM BST	Please can you share how you have engaged with with nurses working in nurse led homeless and inclusion health services? . The QNI would be very pleased to facilitate a discussion with the members of the Homeless and Inclusion Health network - we have 1500 members. <i>Thank you and our comms lead can follow up on this offer.</i>
03:07:15 PM BST	In Scotland many of these SPQs have not been delivered for many years and therefore there would be few PAs to support learning in practice, how would this be managed. <i>This is something we would look at as part of our QA framework processes when approving new programmes in line with future standards. If Scottish leaders and employers want to commission these courses in future, then this is something that they would need to consider.</i>
03:07:30 PM BST	How many current SPQ holders have engaged with the process ? <i>Please look at our reports on pre consultation engagement on our website.</i>
03:07:40 PM BST	SPQ should be at Masters and should be the above other qualifications . the content of the 1 year full time training is so much more advanced than other day released courses <i>This is what we have stated in the draft standards</i>
03:07:53 PM BST	So basically the preparation of these highly regarded, autonomous practitioners will be left to chance. Each HEI will write their own programme and decide what is important putting patients at risk of harm. <i>This is what has always happened. Each AEI already writes their own curriculum for all of our programmes. However this is not left to chance as each new programme will undergo a QA process for programme approval and subsequent ongoing QA monitoring of these programmes will take place. If courses do not have the correct content and outcomes that meets our standards, management and student support then they cannot be approved by the NMC to run.</i>
03:08:28 PM BST	Can the NMC please provide the NMC definition of the annotated fields of practice - that is a Definition of COmmunity CHildren's Nursing etc in order to provide clarity over the expectations of the practice learning and the practice placement. <i>We have drafted programme standards that recognise the different fields of practice. The same approach is in place for pre-registration nursing which leads to registration in one of four fields of practice</i>
03:09:57 PM BST	to gain the masters for the qualification you currently undertake the research in your own time with no support required from your employer- therefore not many have actually not gained this. Can you put some onus on the employer to support students in fulfilling this ? <i>We can use our influence with others but cannot control funding of programmes and courses.</i>
03:12:24 PM BST	Agree we do not require skills annexe <i>thank you</i>
03:12:35 PM BST	Has an equality Impact assessment been done for the project? <i>Yes it has – it is a live document that will continue to inform our developments all the way through to completion of the project.</i>

03:12:43 PM BST	How can we be assured this is not a dumbing down of the SPQ in favour for cheaper to manage courses , as SPQ needs back fill etc as nurse attends fulltime for 1 academic year <i>These draft standards aim to clarify why regulation is needed over and above that that takes place at pre-registration level, there is no intent to dumb down the knowledge and skills required to gain a post-registration qualification. However, we want to create requirements that are flexible and cost effective for AElS, because if too expensive, the result may be that AElS chose not to run the courses at all, and that would reduce access to nurses wanting to do them.</i>
03:13:23 PM BST	The question about numbers was actually about the numbers for the last 5 years for those registering or recording the SCPHN and SPQ not the absolute numbers as that does not show the demand for the SCPHN and SPQ. <i>Ok thank you</i>
03:13:24 PM BST	Is there the possibility of people with existing SCP DN being able to update this to masters level <i>This would be something for them to discuss with their employer. Our standards should not prevent that. We support ongoing CPD for professionals on our register.</i>
03:14:17 PM BST	Q - Thank you for a brilliant presentation. Traditionally the NMC dictates the depth of the requirement for the role whether it is basic, expert, advanced; and being prescriptive has helped to develop competency documents to support roles in practice. Do you intend to do this? <i>Thank you. We will be supporting the implementation of new standards in similar ways to that taken with future nurse and future midwife yes. We can also broker conversations regarding the potential for the development of standardised practice assessment documentation – something some areas are already thinking about.</i>
03:14:23 PM BST	How can we be assured that all universities will meet the educational requirements , what will stop them reducing the 1 year course to much shorter , it will loose its value , especially when we have more universities offering SPQDN this year than previously <i>The courses will be approved by the NMC (and the university) would have to demonstrate how the standards will be met through the curricula and programme they have designed. If it cannot do that, we will not approve this NMC programme.</i>
03:14:26 PM BST	Does the NMC think that of there were bespoke/specialist standards that skills annexes would be needed? <i>In relation to the draft standards, the groups working with us on this aspect did not believe they would be useful. This is why there are none in the drafts, but we have asked the question in consultation and depending on the results they may be added, but we need people to be specific about which skills are required.</i>
03:14:31 PM BST	Didn't noticemuch about the teaching and mentorship that is a key skill of these qualifications as there is the need for teaching in practice <i>We believe there is some reference to this but recognise more would be good.</i>
03:14:54 PM BST	Please can the NMC explain how the skills annexes would work for the unannotated SPQ <i>At the moment we are not proposing skills annexes – if there is a need then this will be determined after the consultation using co-production approaches.</i>
03:15:57 PM BST	You can engage with comms directly from NMC
03:17:30 PM BST	How are you assured these proposals will not negatively impact on patients? <i>As part of our consultation we ask people and patients what they think and will take their views into account. There will also be lay QA visitors involved in QA programme approvals.</i>
03:18:30 PM BST	Is this the right time to introduce these changes during a pandemic? <i>We</i>

	<i>understand all the challenges being faced but also know the standards we have now are out of date. As the UK eases out of lockdown we received assurances from our Council and the four CNOs that we should proceed, rather than delay further.</i>
03:19:36 PM BST	Are there variations of banding for SPQs over the UK? We feel the level of skills obtained from completing an SPQ District Nurse course compares to band 7 in the CNOD Paper 3 Transforming Roles paperwork, however, SPQ DNs (in NHSGGC, Scotland) are expected to work at a band 6 which seems below the level of practice we will be practicing at <i>Pay and remuneration is the role and responsibility of national and local leaders, we do not have any mandate or powers in relation to pay. If we receive information relating to this in our consultation responses we will pass onto the relevant organisations and leaders.</i>
03:19:49 PM BST	just also wanted to express my thanks to you for putting on these sessions, increasing understanding and increasing awareness of the consultation beyond the NMC website <i>happy to help and thank you.</i>
03:20:39 PM BST	Does this mean there is no option for nurses to have specialist practice qualification in diabetes, palliative care and emergency care? <i>No, not by us, although there could be opportunities for regulated qualifications that are relevant to other specialties associated with advanced practice, if the decision is taken to regulate advanced practice in the future.</i>
03:20:55 PM BST	are you saying that the standards are more advanced than the previous SPQ standards <i>Yes, much more. Check them out here.</i>
03:21:15 PM BST	Q - The Draft Standards are very silent on Non Medical Prescribing which is key to working in community nursing. Is this intentional? <i>The draft standards include prescribing (see platform 4). This therefore means that the requirements of our prescribing standards we have already published would need to be met. Universities would have to embed those standards too.</i>
03:22:34 PM BST	they have developed their practice by completing academic study as well as using their experiential knowledge to advance community nursing <i>Agreed</i>
03:23:42 PM BST	Thank you <i>You are welcome</i>
03:24:04 PM BST	We do not think generic standards are needed for everyone. A set of Bespoke standards will ensure patient safety in the community. Is there a reason why the standards are generic? <i>The standards are not generic – instead there is a set of standards that can be applied to each field of community nursing practice. This is something we did successfully for future nurse and the four fields of nursing.</i>
03:25:09 PM BST	what did the Equality Impact indicate please? <i>This is a live document and will be published at the end of the process.</i>
03:25:22 PM BST	Q: We do not think generic standards are needed for everyone. A set of Bespoke standards will ensure patient safety in the community. Is there a reason why the standards are generic? <i>The standards are not generic – instead there is a set of standards that can be applied to each field of community nursing practice. This is something we did successfully for future nurse and the four fields of nursing.</i>
03:25:23 PM BST	please tell us what was the outcome of the Equality Impact Assessment - can you expand <i>The EQIA is a live document and will continue throughout the project and be published at the end of this project.</i>

03:25:38 PM BST	Q: Q - The Draft Standards are very silent on Non Medical Prescribing which is key to working in community nursing. Is this intentional? <i>The draft standards include prescribing (see platform 4). This therefore means that the requirements of our prescribing standards we have already published would need to be met. Universities would have to embed those standards too.</i>
03:25:56 PM BST	Q: Is this the right time to introduce these changes during a pandemic? <i>We understand professionals are incredibly busy and this is why the consultation is running for 16 weeks to give people more time than is customary. We also know these standards are out of date.</i>
03:26:00 PM BST	Q: Q - Thank you for a brilliant presentation. Traditionally the NMC dictates the depth of the requirement for the role whether it is basic, expert, advanced; and being prescriptive has helped to develop competency documents to support roles in practice. Do you intend to do this? <i>Thank you. We will be supporting the implementation of new standards in similar ways to that taken with future nurse and future midwife yes and supporting discussion on standardising practice assessment documentation can be part of this.</i>
03:26:55 PM BST	it is set up so we cant add <i>Not sure what is meant here.</i>
03:27:24 PM BST	if you will do a common community SPQ and then at university branch to DN etc what will you registered with the NMC as or is this recorded only <i>This depends on the route that people take as their learning and practice will be tailored to their chosen route that the NMC would have approved in advance of students commencing any new programme.</i>
03:28:22 PM BST	our community nurses are rushing about supporting people post covid , saying it should have been done 10 years ago does not answer the question , you are taking opportunity away from an exhausted workforce <i>We understand professionals are incredibly busy and this is why the consultation is running for 16 weeks to give people more time than is customary.</i>
03:28:26 PM BST	Thanks for this meeting
03:28:40 PM BST	and we are expecting a 3rd wave <i>We will monitor the pandemic and restrictions very carefully throughout the 16 week consultation.</i>
03:28:56 PM BST	How on earth can you invite people to a consultation event and then tell them what they tell you in this event will not be included in the consultation responses. Unbelievable - look forward to the PSA's opinion on your approach <i>This is engagement to encourage people to participate in the consultation independently. This approach has been used for many years by us and other regulators to ensure that people can be confident that they can respond via the independent research organisation who is running the consultation survey on our behalf.</i>
03:30:02 PM BST	Thank you for this discussion.. I feel there has been real honesty and genuine sharing of thoughts. It is a contentious area - we know that - but I feel today has been really helpful in making this a constructive conversation <i>thank you</i>
03:30:07 PM BST	I know it's not the remit of the NMC to decide on AfC bandings but what in your opinions should the SPQ banding be – we hope that employers will recognise the benefits of these professionals and what they bring to care of people and service delivery. <i>This is not our role but we will emphasise the value of professionals with this qualification bring to care of people and service delivery.</i>
03:33:06 PM BST	a good time is when our community nurses are not on their knees
03:33:49 PM BST	Thank you

03:33:51 PM BST	The QNI is supporting and encouraging as many nurses in the community as possible to complete the consultation <i>great thank you</i>
03:33:54 PM BST	Thank you all