

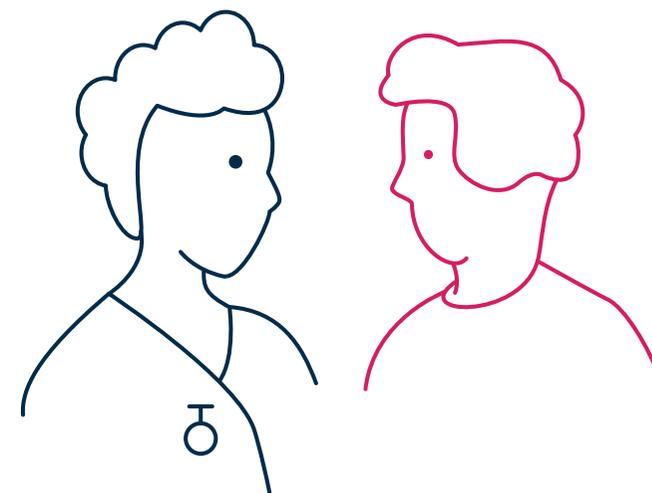
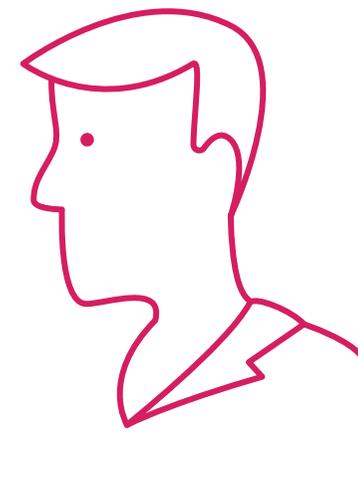
Quality assurance framework for nursing, midwifery and nursing associate education



Revised in August 2020

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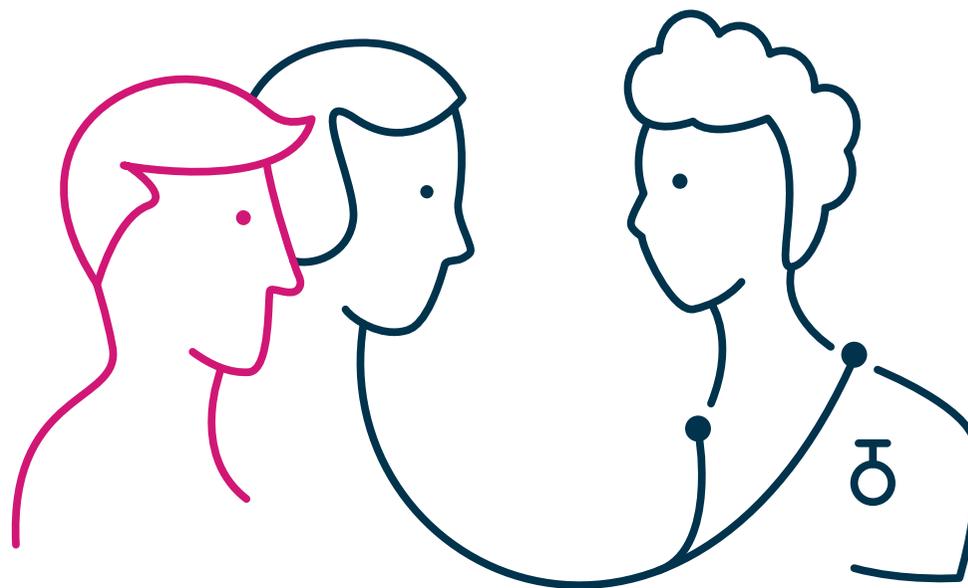
Introduction

To make sure that [people](#) have confidence in the care they receive we must make sure that nursing, midwifery and [nursing associate](#) education and training is high quality and meets our standards.

[Quality assurance \(QA\)](#) of education gives us the confidence that [education institutions](#) are meeting our standards for education and training. This helps us to know that [students](#) who have successfully completed an approved programme are meeting the standards of proficiency that we require before they join our register. It's one of the ways we fulfil our duty to protect the public.

If our QA identifies that an education institution isn't meeting our standards we take action so that the education institution returns to compliance. This ensures that there is public confidence in our role in nursing, midwifery and nursing associate education and encourages the education institution to remain responsible for meeting our standards.

Our QA framework shows how we do this, who we engage with and what we expect of our [approved education institutions \(AEIs\)](#) and practice learning partners that manage and deliver professional education and training.



Our education standards

As part of our ambitious five year programme of change for education we're reviewing all our education standards.

Standards reviewed to date:

- [Standards framework for nursing and midwifery education](#)
- [Standards for student supervision and assessment](#)
- [Standards for pre-registration nursing programmes](#)
- [Future nurse: Standards of proficiency for registered nurses](#)
- [Standards for pre-registration midwifery programmes](#)
- [Future Midwife: Standards of proficiency for midwives](#)
- [Standards for prescribing programmes](#)
- [Standards of proficiency for nurse and midwife prescriber](#)
- [Standards for pre-registration nursing associate programmes](#)
- [Standards of proficiency for nursing associates](#)
- [Standards for return to practice programmes](#)

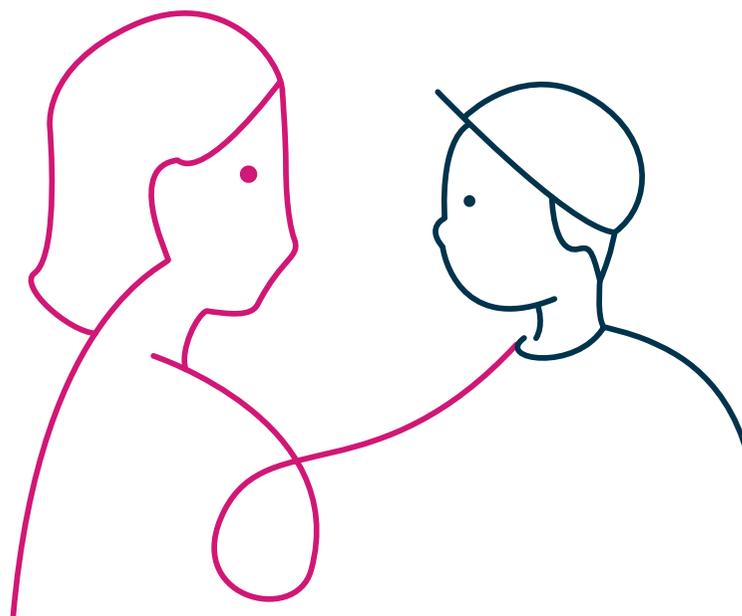
Standards to be reviewed:

- Standards for specialist community public health nursing
- Standards for specialist education and practice

About the framework

We've produced the QA framework for people who are interested in our work in quality assurance. In particular, it's for people who are involved in managing and delivering nursing, midwifery and nursing associate education. Like our new standards, our QA framework is informed by the ways in which health, care and professional education are changing. It reflects our outcome-focussed approach to setting new standards.

Our approach to QA gives us the flexibility to assure new and flexible models of educational programme delivery, which may involve local partnerships, blended learning and work based approaches. The QA framework enhances our ability to recognise issues early, making use of data from different sources to make sure we can be proactive in focussing on areas where we know there are risks, or where data suggests that we should be focussing our attention.

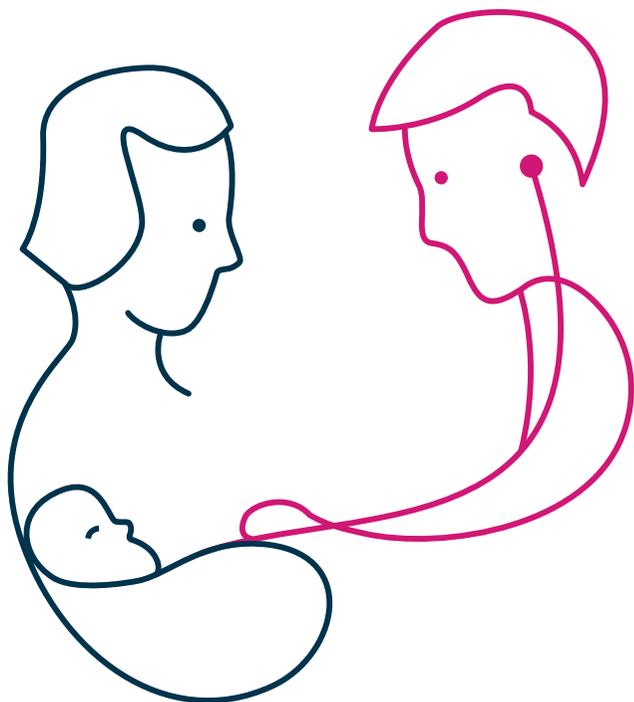


People at the heart of QA

As with all aspects of our work at the NMC, we involve people to ensure that the person-centred approach to our standards follows through to QA of education.

We are committed to make sure that people are at the centre of our work in education and training, that their voices are heard, and that people know how they can take part in QA of education.

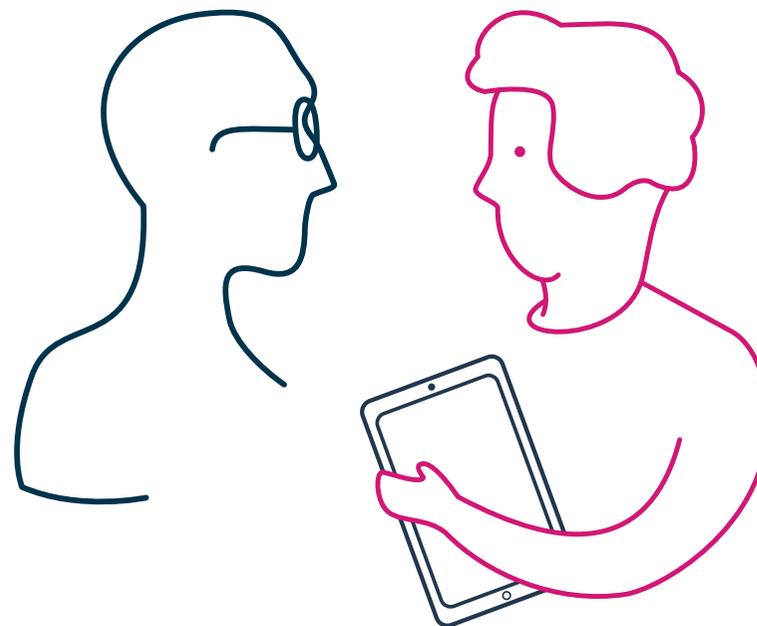
We'll actively listen and we'll act appropriately when we get feedback. We believe this will continue to instil confidence in the way in which nurses, midwives and nursing associates are prepared for professional practice and will demonstrate our commitment to being a person-centred professional regulator.



Our delivery partner

Mott MacDonald are our appointed QA service delivery partner, carrying out approval activity on our behalf.

Mott MacDonald will visit organisations to give us the information we need to make approval decisions about programmes and institutions.



How we quality assure

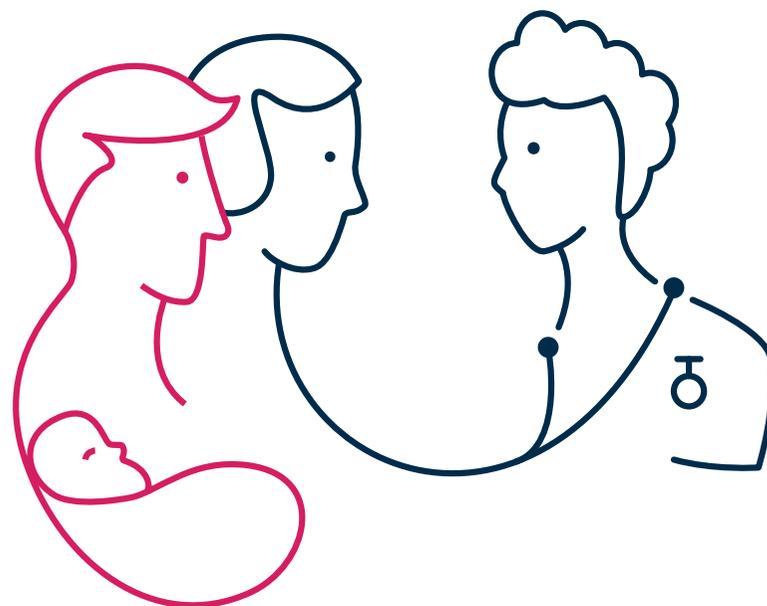
Part of our role¹ is to set standards for education and training that enable students to achieve our standards of proficiency before joining the register². We also have to satisfy ourselves that AEs and practice learning partners are meeting the standards and requirements we set³.

This QA framework and our QA handbook set out the evidence education institutions need to demonstrate to satisfy us that they meet our standards when we decide to give approval.⁴

Our regulator, the [Professional Standards Authority \(PSA\)](#), defines right touch regulation as being proportionate, consistent, targeted, transparent, accountable and agile. We've aligned our QA framework to these principles.

We believe that it's best to realise the professionalism of those joining our register through education and training that's underpinned by effective partnerships between education institutions and their placement learning partners at all levels. Our QA approach focuses on how effective those partnerships are.

We've set the standards for nursing and midwifery education as degree level entry professions and nursing associate education as a foundation degree level entry profession. So education institutions seeking approval of programmes and AEs delivering programmes must have the relevant degree awarding powers (or have formally agreed access to those powers through another degree-awarding institution).



¹ Article 15(1) of the [Nursing and Midwifery Order 2001](#) (the 'Order')

² Article 5(2) of the Order

³ Article 15(2) (b) of the Order

⁴ Article 15(8) of the Order

Our standards for education and training apply to all AEs and their practice learning partners that are running NMC approved programmes.

They aim to provide AEs and practice learning partners with the flexibility to develop innovative approaches to professional education while being accountable for local delivery and management in line with our standards.

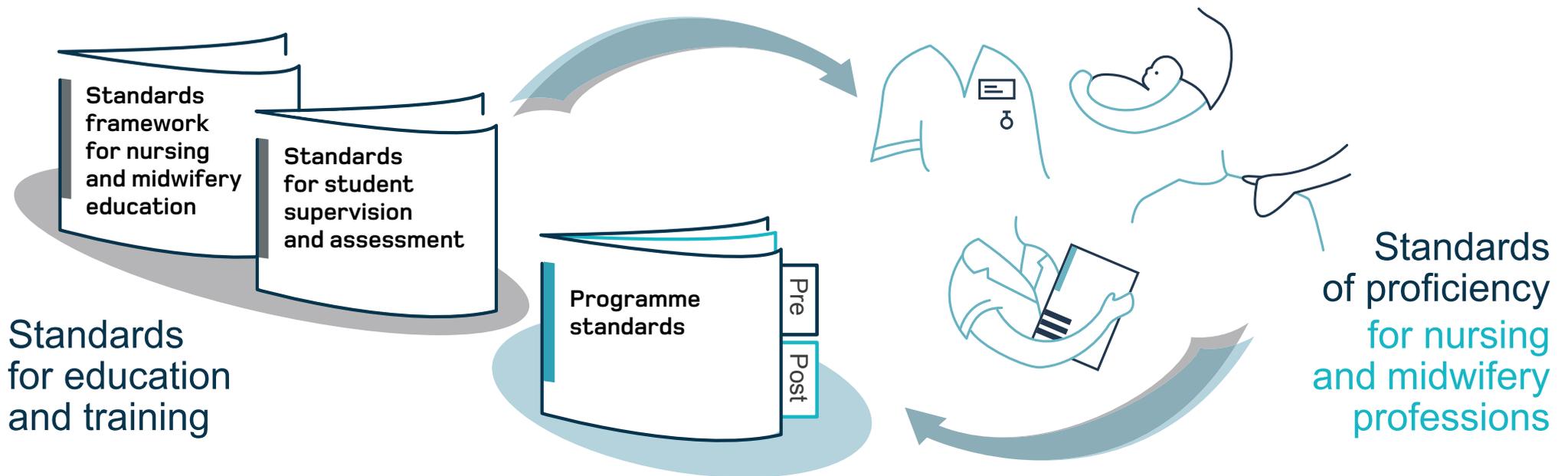
The standards for education and training are in three parts:

Part 1: *Standards framework for nursing⁵ and midwifery education*

Part 2: *Standards for student supervision and assessment*

Part 3: *Programme standards*

These standards help students achieve proficiencies and programme outcomes.



⁵ We've used the phrase 'nursing' in this document to apply to the work of nurses and nursing associates. Nursing associates are a distinct profession with their own part of our register, but they are part of the nursing team.

A gateway approach to approval

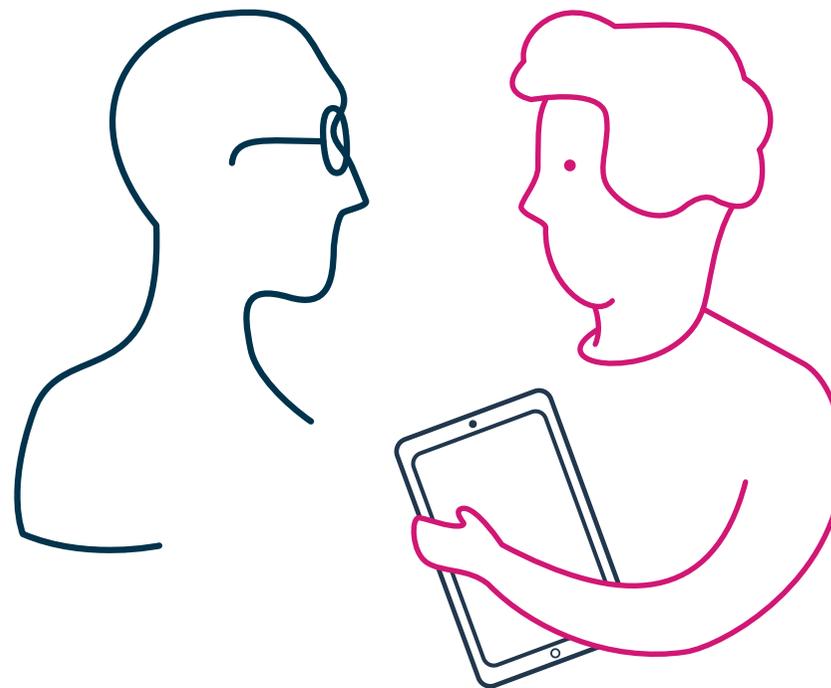
Our QA framework aligns the structure of our standards to how we approve education institutions and new programmes.

Using a gateway model enables us to take a proportionate yet robust approach to QA for organisations that want to implement our standards. Through this model, we can differentiate the approval process between education institutions depending on whether or not the institution is already running approved programmes.

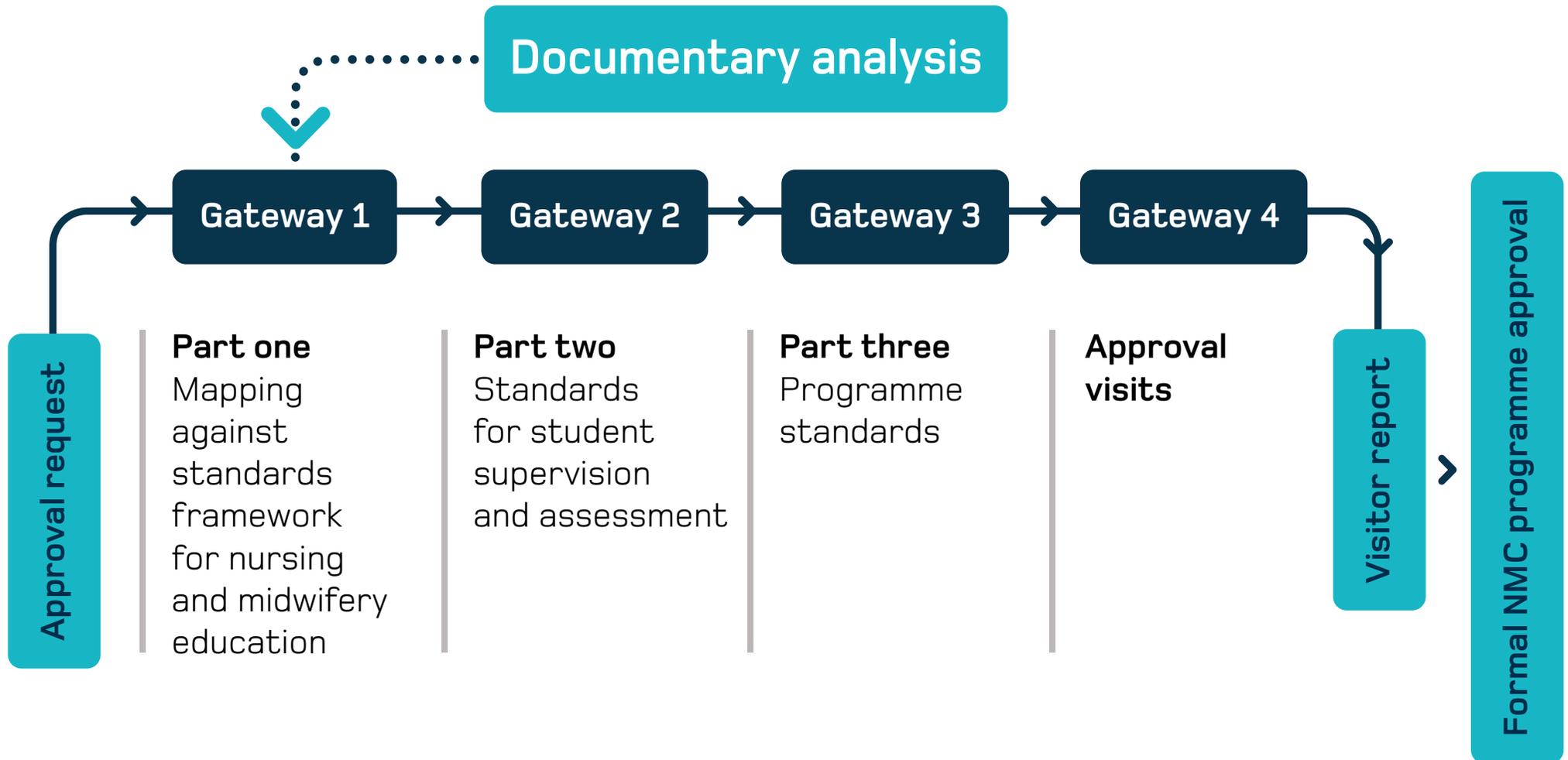
An education institution that's either new to nursing and midwifery education (or is wishing to return to nursing and midwifery education) and is seeking approval must submit their initial proposal via the [QA Link](#). Once we've had assurances about the education institution's proposal we'll begin our preliminary checks. We'll share this information with our QA delivery partner, Mott MacDonald, which will conduct the QA through the gateways on our behalf.

Under our QA framework we'll approve programmes indefinitely, so programmes will not need to seek re-approval. However, we will proactively monitor institutions to ensure that our standards continue to be met.

Find out more about our QA processes in the [QA handbook](#).



Process of programme approval



Process of programme approval

| | Part one Standards framework for nursing and midwifery education | Part two Standards for student supervision and assessment | Part three Programme standards | Approval visits |
|--|--|---|--|------------------------|
| 1st programme approval New education institution | ✓ | ✓ | ✓ | ✓ |
| 1st programme approval Existing AEs | Right touch | ✓ | ✓ | ✓ |
| Subsequent approvals | N/A | Right touch | ✓ | ✓ |

Gateway 1: Standards framework for nursing and midwifery education

After we've screened their initial proposal, **new education institutions** must give us the necessary evidence for seeking approval of a programme for the first time. QA visitors will review the evidence to ensure compliance.

Gateway 2: Standards for student supervision and assessment

All **existing AEs, new education institutions** and their practice learning partners will give us the evidence to tell us how they will meet our standards. QA visitors will analyse the documents.

Gateway 3: Programme standards

All **existing AEs, new education institutions** and their practice learning partners will submit evidence to show how they will meet our standards.

Gateway 4: Approval visit

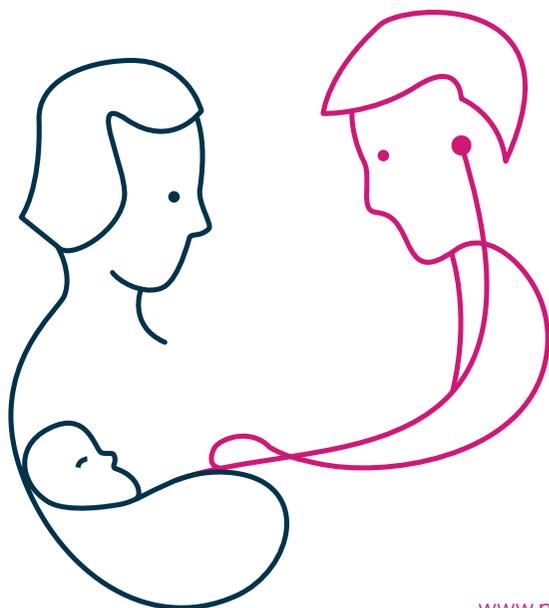
Representatives from **existing AEs** and **new education institutions** and their practice learning partners will come together for the approval visit. We also expect people and existing students (where applicable) to attend.

We aim to minimise the burden on AEs and their partners by taking part in conjoint approval visits with AEs and/or other regulators where possible, but we do so with clarity about our respective roles. QA visitors will engage with the presenting panel and representatives from the AE and its practice learning partners. They'll make recommendations to us in a report about whether our standards are met. We'll then decide whether to approve the programme.

How we'll QA pre-registration nursing programmes

As we have updated [Standards of proficiency for registered nurses](#) and [Standards for pre-registration nursing programmes](#), all existing AEs that are approved to deliver a [pre-registration nursing programme](#) are required to seek approval to deliver the programme against the new standards by September 2021. This means the gateway approach to pre-registration nursing programme approval applies to all AEs. AEs and practice learning partners will identify the routes within their pre-registration nursing programme they're seeking to approve. This may include undergraduate, postgraduate, work based or apprenticeship routes.

Existing AEs and their practice learning partners may want to transfer current student nurses onto the new programme. If so, they'll need to give us the evidence to support this proposed transfer at Gateway 3. QA visitors will look at the evidence to make sure it confirms how all standards will be met through the transfer. We also expect transferring students to engage with QA visitors during Gateway 4: Approval visit.



How we'll QA pre-registration midwifery programmes

Since January 2020, we have been able to approve programmes against the new 'Future Midwife' standards. Existing AEs and practice learning partners were able to adopt the [Standards for student supervision and assessment](#) before 2020.

As we have updated [Standards of proficiency for midwives](#) and [Standards for pre-registration midwifery programmes](#), all existing AEs that are approved to deliver a [pre-registration midwifery programme](#) are required to seek approval to deliver the programme against the new standards by September 2022. This means the gateway approach to pre-registration midwifery programme approval applies to all AEs. AEs and practice learning partners will identify the routes within their pre-registration midwifery programme they're seeking to approve. This may include undergraduate, postgraduate, work based or apprenticeship routes.

Existing AEs and their practice learning partners may want to transfer current student midwives onto the new programme. If so, they'll need to give us the evidence to support this proposed transfer at Gateway 3. QA visitors will look at the evidence to make sure it confirms how all standards will be met through the transfer. We also expect transferring students to engage with QA visitors during Gateway 4: Approval visit.

How we'll QA post registration programmes

Prescribing programmes

As we have new standards of proficiency for nurse and midwife prescribers and new [programme standards](#), all existing AEs and practice learning partners that are approved to deliver prescribing programmes are required to seek programme approval against the new standards before September 2021.

This means that the new gateway approach to prescribing programme approval (V100, V150 and V300) will apply to all AEs.

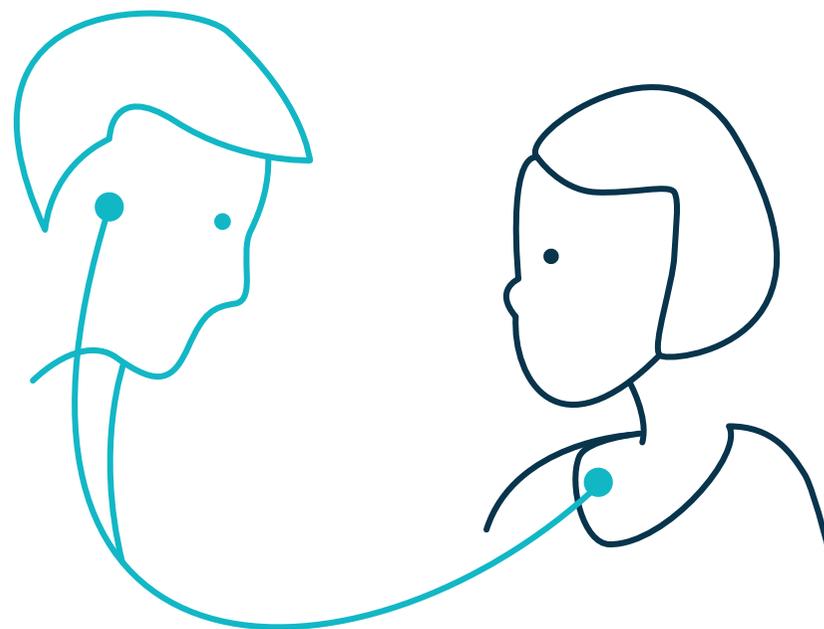
Specialist practice qualification programmes and specialist community public health nursing programmes

An independent organisation evaluated all our other post registration standards. The evaluation findings have led us to create an expert steering group who will review how post-registration education and development continues to evolve. However existing AEs and practice learning partners can choose to move to the [Standards for student supervision and assessment](#) for these programmes with full adoption by September 2021.

Return to practice programmes

We published our latest [Return to practice standards](#) in May 2019. Our Registration and revalidation standards set out the minimum number of practice hours that a nurse, midwife or nursing associate must undertake to remain on, or re-join, our register. People unable to meet these practice hours requirements who wish to remain on, or re-join, our register must successfully complete an NMC approved return to practice programme, or pass the NMC test of competence.

AEIs that are delivering Return to Practice programmes will need to transfer by September 2021.



How we'll QA pre-registration nursing associate programmes

We became the regulator for nursing associates in England on 12 July 2018. Northern Ireland, Scotland and Wales don't plan to use the new role at this time so our legislation reflects that we're regulating nursing associates only in England. One consequence is that we have powers in respect of nursing associate education in England only – we can't approve nursing associate programmes in other parts of the UK.

We have published our [Standards of proficiency for nursing associates](#) and [Standards for pre-registration nursing associate programmes](#). [The Standards framework for nursing and midwifery education](#) and the [Standards for student supervision and assessment](#) also apply for nursing associate programmes.

Nursing associate programmes have been piloted through partnerships involving several [stakeholders](#). We're happy to receive applications for the approval of programmes delivered through such partnerships, as long as the AEI awarding the qualification is prepared to be accountable for delivery.

Since 26 July 2019, students in England must join an NMC approved programmes to be eligible to join the nursing associate part of our register.

Programme modification

AEIs may submit requests for major modification to approved programmes. How we manage these depends on the extent of change as detailed in the QA handbook.

AEIs will manage and record minor modifications in case we need to review their decisions and their impact on our approval of the programme. We expect AEIs to report every year on their minor modification decisions as part of the annual self-reporting process.

Programme endorsement

AEIs may choose to deliver parts of approved programmes outside the UK which we call [endorsement](#)⁶. The UK-based AEI is accountable for this local delivery as part of their overall assurance to us.

We need robust evidence of how the programme meets our standards in all non-UK settings. This must include, but is not limited to, evidence of strategic and operational partnerships with practice learning partners, resources, risks and controls. The requirements for endorsement are in the QA handbook.

Refusal of approval

Education institutions and AEIs seeking approval of programmes must give us (and those who work on our behalf) the information and assistance that we may reasonably need⁷. If an education institution or AEI seeking approval refuses a reasonable request for information we may refuse approval⁸. Institutions and programmes must meet all of our standards for us to grant approval. We'll assess this at each of the gateways. If our standards are not being met then we may refuse approval.

⁶ Article 15(7) of the Order

⁷ Article 17(4) of the Order

⁸ Article 18 of the Order

Withdrawing approval

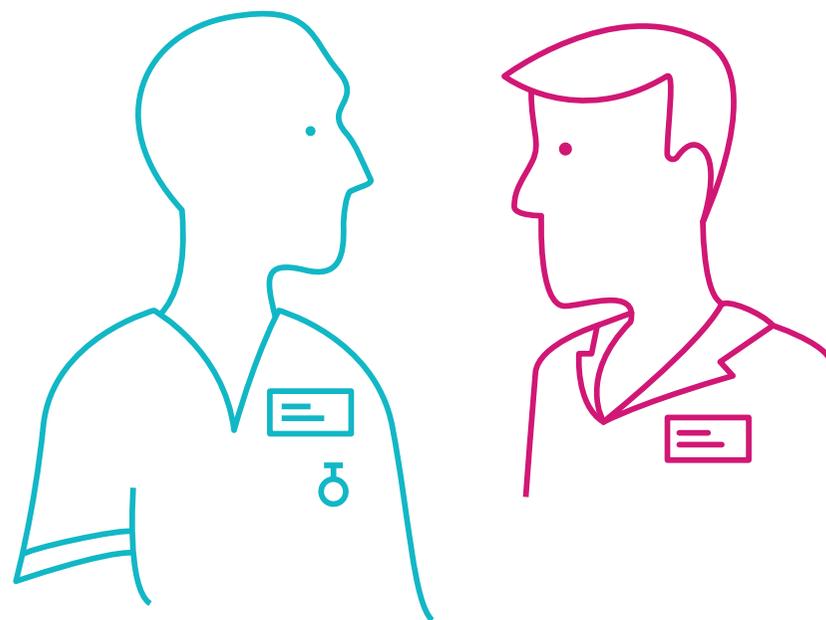
If an AEI or its practice learning partners aren't meeting (or won't meet) our standards or requirements, we may seek to withdraw the programme approval or AEI status⁹. We may also seek to withdraw approval after we get a QA visitor's report.

Process

If we find that an AEI or its practice learning partners aren't meeting (or won't meet) our standards or requirements, we'll initially look for the AEI to put steps in place to address the concern. However, if a concern remains, we'll tell the AEI that we plan to withdraw their approval, specifying the extent of the withdrawal. We'll explain the reasons for withdrawing approval in writing. We'll give the AEI a month from the day we tell them of our plans to make any observations and objections¹⁰.

We'll take no further action until the deadline, or until the AEI submits any observations or objections. We'll acknowledge any correspondence we get within five working days.

If the AEI can't assure us that it's mitigating and managing the risks, we'll write to the AEI, specifying the date that we're withdrawing approval.



⁹ Article 18 of the Order
¹⁰ Article 18(4) of the Order

Programme monitoring

Monitoring review visits

At present, we are focusing on programme approval so we won't do any routine monitoring visits. We think this is proportionate as we know that organisations and teams have been gearing up for new approvals and making plans to introduce our ambitious standards. We will, however, continue to respond to known or emerging risks to patient safety or compliance against our standards.

Annual self reporting

We expect all AEs and practice learning partners to continue to submit an annual self-assessment report and confirm that they continue to meet our standards across all approved programmes.

Thematic review reporting

Over the next few academic years, we plan to continue to build on our current approach to thematic reviews. This will add to our assurance about the implementation of our standards. Thematic reviews will focus on particular aspects of nursing and midwifery education and training. They enable us to gain a deeper understanding of issues and areas of good practice that we can disseminate when we engage and report on our QA activity.

New programme monitoring

This applies to new AEs and AEs delivering new pre-registration programmes that have not been run by that institution before.

We'll apply new programme monitoring from approval of the programme until the first group of students register with us. This is because new providers who are unknown to us present a degree of additional risk. As part of [new programme monitoring](#), we'll ask for regular updates that tell us how the new programmes are progressing. We'll follow up on these updates. This information will inform our future approach to risk based monitoring. If concerns arise we'll take action in line with our published processes and might proceed to an extraordinary review.

Enhanced scrutiny

When we have a concern regarding an AE or a programme we may apply [enhanced scrutiny](#). As part of this enhanced scrutiny, we'll ask for regular updates that tell us how the AE is addressing the issues we have raised with them. We'll follow up on these updates. This information will inform our future approach to risk based monitoring. If further concerns or complaints arise we'll take action in line with our published processes and might proceed to an [extraordinary review](#).

Extraordinary review

We carry out additional quality assurance work when we believe nursing and midwifery education providers are not meeting our standards. It might be necessary for us to carry out an extraordinary review of an education provider which may also include their practice placements in certain circumstances.

For example, when there is an adverse incident that presents a risk to public protection, or if an approved education institution (AEI) is seen to be either unaware of the incident or not to have effectively managed the risks. We would organise an unplanned monitoring review visit, usually at short notice. The focus of the extraordinary review is stated to the AEI. The review team will have a specific plan for their quality assurance activity for both AEIs and practice learning partners.

Delivery of QA of education

Our role includes:

- setting the strategic direction and policy for QA of education, ensuring that people are at the centre of QA, and developing the QA handbook and QA link
- commissioning and overseeing effective and proportionate QA operational delivery
- approving, monitoring and withdrawing approval of programmes
- effectively using data and intelligence from wide ranging sources to inform QA that protects the public
- sharing intelligence from QA activity appropriately with others both within and outside the NMC
- using our evidence from QA activity to influence the strategic context for education to enhance public protection and strengthen stakeholder relations.

Our operational delivery partner's role includes:

- recruiting, training and managing the performance of our QA visitors
- scheduling and organising QA processes and visits
- sharing and updating the information and documentation that govern QA processes, including the QA handbook inclusions and their website
- seeking the views of people – including the public, patients, service users, carers, families and students
- supplying and maintaining data relating to AEIs and practice learning partners and reporting to us.

How we use data

We may collect information about individuals if they work for an AEI or practice learning partner, or take part in our education QA processes. We'll collect the individual's name and contact information. If they're taking part in one of our QA visits we'll also collect details of their professional experience.

During QA reviews, education institutions and practice learning partners may give the visitors a significant amount of supporting documentation. This documentation sometimes contains personal information like the CVs of academic staff or minutes of meetings. The only people who'll read this personal information are those who need to see it as part of our QA activity. We occasionally share personal information with third parties.

Normally, we process personal information because we have a legal obligation to do so or because it is necessary for the exercise of our statutory functions or any other functions in the public interest.

- Read our [privacy notice](#)
- Read the [education and standards information handling guidance](#).

How we report on QA

We publish a [list of approved programmes](#). We also publish monitoring reports, and we share an annual report on QA with our Council. We'll publish our QA approval outcome summaries as part of our commitment to transparency and information sharing.



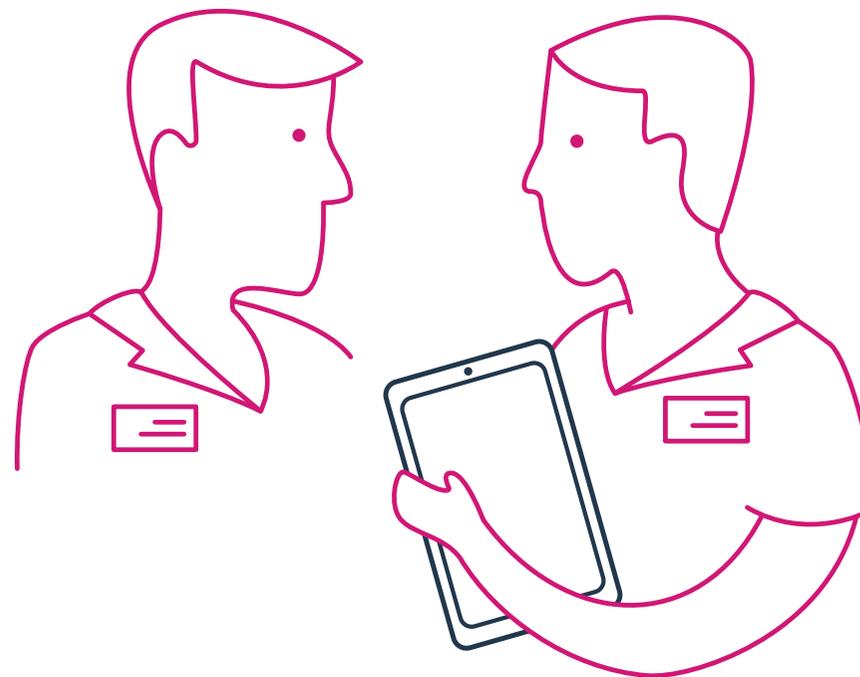
Responding to concerns in nursing and midwifery education

One aim for the QA of education is to make sure that people are protected when students care for them as part of their education and training. To protect the public, we act on concerns when someone raises them to us.

In this context a concern could be:

- an incident that may affect patient safety
- a notification that an AEI or practice learning partner that delivers approved nursing and midwifery programmes is not meeting our standards
- whistleblowing, or
- a complaint.

The need to protect the public guides how we respond to concerns. We assess the nature of possible risks, and combine that with the assurance we receive from AEIs and practice learning partners about how they manage risks when they arise. Our response to concerns ensures that there are measures in place to protect the public when issues affect nursing or midwifery education.



How we respond to concerns

Exceptional reporting by AEs and practice learning partners

When risks emerge AEs and their practice learning partners must respond swiftly to manage and control risks appropriately.

AEs should email exceptional reports to us. We'll take action when these risks are not being effectively managed and controlled locally. We expect approved education institutions (AEs) to tell us any concerns about an approved programme, in particular an issue which might affect the student [learning environment](#) or where there may be a patient safety concern. If there's the potential that our standards are not being met then this should be raised with us via our [exceptional reporting form](#).

Whistleblowing

If a third party raises a concern about the safe and effective delivery of an approved programme, we'll tell the AE concerned within five working days so it can manage the risk locally where possible. We'll also contact the third party to make sure we understand the risk and information correctly. Where appropriate, we'll redirect any concerns about systems or practice to system regulators, our fitness to practise teams, or other professional regulators. Our duties around managing and acting on information provided through whistleblowing are set out in the Public Interest Disclosure Act 1998.

Responding to concerns and handling complaints about AEs

We'll investigate and, if necessary, act on concerns raised about AEs. We deal with concerns and complaints fairly and consistently.

Responding to concerns and handling complaints about our QA delivery partner, Mott MacDonald

We'll investigate and, where appropriate, act upon concerns raised about our QA delivery partner. We'll make sure that we deal with concerns and complaints fairly and consistently. We won't consider complaints regarding the judgment of QA visitors delivering QA activity.

Glossary

Approved education institutions (AEIs): the status awarded to an institution, part of an institution, or a combination of institutions that work in partnership with practice learning providers after we've approved a programme. AEIs will have assured us that they're accountable and capable of delivering approved education programmes.

Education institutions: institutions seeking our approval of a programme.

Educators: in the context of our standards for education and training, educators are those who deliver, support, supervise and assess theory or practice learning.

Employer link service (ELS): Our ELS liaises with employers, listens to feedback, takes part in local health sector forums, advises on making referrals, and offers inductions for directors of nursing on fitness to practise and other core functions.

Enhanced scrutiny: A process to allow the AEI to demonstrate how they have addressed issues raised with them or their programme and how they continue to meet the standards and requirements.

Endorsement: This is the process of approving the delivery of part of an already approved programme outside the UK.

Extraordinary reviews: Reviews conducted to identify if the AEI and practice placements continue to meet our standards, if concerns or intelligence suggest that an AEI or a programme is no longer meeting our standards and requirements.

Learning environments: Includes any physical location where learning takes place as well as the system of shared values, beliefs and behaviours in these places.

New programme monitoring: A process to allow the AEI to demonstrate how they and their programmes meet the standards and requirements. New institutions and new preregistration programmes will undergo new programme monitoring from approval through to the first group of students completing the programme.

Nurse and midwife prescribing programmes: The programme that a registered nurse or midwife in the UK completes to acquire the proficiencies needed to meet our criteria for an annotation on our register.

Nursing associate: A nursing associate is a new member of the nursing team who will care for, and support people. This role is being used and regulated in England and it's intended to address a skills gap between health and care assistants and registered nurses.

Nursing associate is a standalone role in its own right and will provide a progression route into graduate level nursing

Nursing degree apprenticeship: The nursing degree apprenticeship will enable people to train to become a graduate registered nurse through an apprentice route. Apprentices will be released by their employer to study part-time in an AEI and will train in a range of practice learning settings. They will be expected to achieve the same standards as other student nurses.

People: individuals or groups who receive services from nurses, midwives, or nursing associates, healthy and sick people, parents, children, families, carers, representatives, also including educators and students and other within and outside the learning environment.

Pre-registration nursing programme: The programme that a midwifery student in the UK completes to acquire the proficiencies needed to meet our criteria for registration.

Pre-registration nursing associate programme: The programme that a nursing associate student in the UK completes to acquire the proficiencies needed to meet our criteria for registration.

Pre-registration midwifery programme: The programme that a midwifery student in the UK completes to acquire the proficiencies needed to meet our criteria for registration.

Programme standards:

The standards we set for all nursing, midwifery and nursing associate programmes

Professional Standards**Authority (PSA):**

The independent body that helps to protect the public through their work with organisations that register and regulate people working in health and social care. They regulate the NMC along with other health and social care regulators.

Quality assurance (QA):

Our processes for making sure all AEs and their practice learning partners comply with our standards.

QA Link: The online portal that AEs will access to submit documentation i.e. during the approval gateway process.

Regulatory intelligence unit

(RIU): Our RIU is responsible for identifying and assessing regulatory risk. It makes decisions on escalating this within the NMC and to external stakeholders where required.

Stakeholders: Any person, group or organisation that has an interest or concern in the situation in question, and may affect or be affected by its actions, objectives or policies. In the context of our standards for education and training this includes students, educators, partner organisations, patients, families, carers, employers, other professionals, other regulators and education commissioners.

Students: Anyone enrolled onto an approved education programme.

The Nursing and Midwifery Order 2001 (the Order):

Legislation that establishes us and sets out our primary purpose of protecting the public, our structure, and our functions and activities.

The role of the Nursing and Midwifery Council

What we do

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.

These standards were approved by Council at their meeting on 2 July 2020.
This document was revised in August 2020.

