

**The Nursing and Midwifery Council  
(NMC) during the Covid-19  
transition; Information pack.**

**4 September 2020**

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## Introduction

This pack provides the latest information about the work of the Nursing and Midwifery Council (NMC) during the coronavirus pandemic, including our actions as we transition from the emergency towards ongoing management of Covid-19 in health and social care.

As the independent regulator of nurses and midwives across the UK, and nursing associates in England, we have played an active role in expanding and supporting the nursing and midwifery workforce during this challenging time. We made a series of [operational changes](#) in response to the pandemic, in order to prioritise our core regulatory functions and ensure we continue to regulate nurses, midwives and nursing associates effectively.

As we move from the emergency into recovery, and as health and social care transitions towards a new normal, the NMC is gradually introducing changes to support the nursing and midwifery workforce to provide the best and safest care to people. We are now resuming areas of our work that we had been required to pause during the emergency, in accordance with government guidelines. We will continue to work collaboratively to ensure that the people on our register have the knowledge and skills to deliver safe, kind and high quality care to people.

If you have any questions about the detail contained in this pack then please get in touch using the information provided under [contact us](#).

## The temporary register

As you will be aware, the Government introduced emergency legislation that enabled the NMC to create the Covid-19 temporary register. This means we have temporarily registered fit, proper and suitably experienced people, so that they can practise if they want to and feel able to do so during the Covid-19 emergency.

When we opened the temporary register on 27 March, 7,510 nursing and midwifery professionals appeared on it. There are now over 14,000 professionals on the temporary register.

The latest published breakdown of the temporary register (data as of 2 September 2020):

	<i>Country of address</i>					
	<b>England</b>	<b>Northern Ireland</b>	<b>Scotland</b>	<b>Wales</b>	<b>Not given</b>	<b>UK</b>
<b>Midwife</b>	647	14	74	26	-	761
<b>Nurse</b>	11,196	287	1,395	591	41	13,510
<b>Midwife; Nurse</b>	120	4	12	4	1	141
<b>Total</b>	11,963	305	1,481	621	42	14,412

The temporary register will remain open as long as the Secretary of State for Health declares Covid-19 to be an emergency. We continue to work collaboratively with the Department of Health and Social Care and the Devolved Administrations to make any decisions in relation to the temporary register, including the future transition out of the emergency situation. Further information on the temporary register can be found on [our website](#).

## Our regulation

### Plans to safely resume in-person fitness to practise hearings

We have published information on how we will safely and fairly resume in-person fitness to practise hearings from 14 September 2020.

Earlier this year, with strict lockdown measures previously in place and to support nursing and midwifery professionals with the initial impact of the Covid-19 pandemic, we temporarily paused some of our fitness to practise work – only managing cases or hearings where there was an immediate risk to public safety.

But with restrictions easing, we're now moving forward with a gradual resumption of other fitness to practise work, including some physical hearings.

### Physical and virtual hearings

Safety measures have been introduced to ensure the wellbeing of those attending physical hearings in both London and Edinburgh is protected at all times. For example, some of these measures will include staggered start times for hearings, one-way systems throughout the building, screen partitions in hearing rooms, and enhanced cleaning arrangements.

We will consider the views of the hearing participants and the complexity of the case when deciding whether to hold it virtually or in person. We will also consider whether a particular format might prevent a hearing from running smoothly. In some cases, hearings may be held through a mix of both physical and virtual attendance.

### Public access

Hearings will now also be able to accommodate members of the public who wish to observe. There will be a limited number of spots available for physical hearings in order to maintain social distancing, and for virtual hearings because of technical constraints. Observers will be able to access virtual hearings only via an audio link, to maintain security, or via a video link at our hearings centre in Stratford, London.

More information about the resumption of in-person hearings can be found [on our website](#).

## Arrangements for overseas candidates

### Occupational English Test can be taken at home from October

The Occupational English Test (OET) is one of the English language qualifications we accept for entry onto the register via our overseas registration process.

The Covid-19 pandemic has impacted the ability of some overseas candidates to take their OET and progress their application. We have worked with OET to pilot OET@Home software that enables candidates to take the test at home rather than at a test centre. The OET@Home uses proctoring software to replicate the testing environment and ensure tests are taken fairly. Following a successful pilot we will accept tests taken via this route and this option will be available from October.

In addition, from September candidates will be able to take the OET in a test centre venue using a computer. The paper based OET will also be available.

More information and full FAQs about this change can be found [on our website](#).

## Equality, diversity and inclusion

### How our response to Covid-19 has affected diverse groups

In July we published our [equality impact assessment](#) (EqIA) for the action we've taken in response to Covid-19. This covers temporary registration, our emergency education standards, changes to fitness to practise, and all other changes we made in relation to Covid-19 up until the end of June.

We would be grateful for your feedback on this EqIA, particularly in answer two questions:

- Have we missed anything that is in our role to do or influence?
- Looking to the future, are there any particular topics of concern or opportunities that we should focus on?

If you have any feedback on the EqIA please send it to [equality@nmc-uk.org](mailto:equality@nmc-uk.org). We'll update this document regularly, for as long as we're carrying out activity to respond to the pandemic and support the professions.

## Other information

### Reminder of NMC statement on advance care planning\* and DNACPR

Following concerns raised about instances where advance care plans, including those with or without 'do not attempt cardiopulmonary resuscitation' (DNACPR) forms, being applied to groups of people in response to the Covid-19 pandemic, we would like to remind our stakeholders of a statement we published on this issue in April 2020.

The Chief Executives and Registrars of the NMC and the General Medical Council published a joint statement outlining that the need for advance care planning with people and their families is more important than ever during this time where

practitioners are under great pressure to make urgent, clinically complex decisions. We hope this statement will be helpful should you receive queries from professionals in your network about this issue.

The full statement can be found [on our website](#).

*\*We recognise that 'advance care planning' may also be referred to as [anticipatory care planning](#) in Scotland. We therefore intend for this statement to be applicable to care planning of either name.*

## Further information

Previous packs with additional information can be found on our website here;

- [21 August](#)
- [7 August](#)
- [24 July](#)
- [10 July](#)
- [25 June](#)
- [15 June](#)
- [22 May](#)
- [13 May](#)
- [27 April](#)
- [20 April](#)

## Frequently asked questions

We are monitoring the queries we are regularly being asked by registrants and stakeholders and collating a list of responses to frequently asked questions. A full list of our FAQs in relation to Covid-19 can be found on [our website](#).

## Contact us

If people in your networks have any general queries about the NMC, they can contact us at 020 7333 9333. If they have questions about our temporary register they should email [tempreg@nmc-uk.org](mailto:tempreg@nmc-uk.org) or call 020 7637 7181.

As a key stakeholder of the NMC, our stakeholder relations team is also here to support with your queries and any feedback you have on our work. You can contact the team at [stakeholders@nmc-uk.org](mailto:stakeholders@nmc-uk.org).

If you are a parliamentarian, civil servant or elected official, our public affairs team will be able to answer any queries. You can contact the team at [publicaffairs@nmc-uk.org](mailto:publicaffairs@nmc-uk.org).

Our [Employer Link Service](#) run an advice line for employers and relevant stakeholders in health and social care. They are available to support employers with questions or concerns about fitness to practise and the NMC's work more broadly. Call 020 7462 8850 to speak to one of our regulation advisers, or email the team at [employerlinkservice@nmcuk.org](mailto:employerlinkservice@nmcuk.org).