Nursing & Midwifery Council

NMC Midwifery Regulation Strategy 2026–2030

Improving safety, equity, confidence, and accountability in midwifery regulation across the four countries of the UK

OUR VISION

Everyone can have confidence that midwifery regulation is helping to support safe, inclusive, equitable, anti-racist and high-quality care for women, babies and families across the four countries of the UK.

OUR MISSION

Protect the public through strong standards, evidence-led regulation and transparent learning supporting accountability, improvement and a rights-based approach to maternity care.

INTENDED CONTRIBUTION BY 2030

Safer, more equitable, anti-racist and trusted midwifery regulation, with demonstrable learning, accountability and improvement.

Executive summary

This strategy explains how the Nursing and Midwifery Council's midwifery function will contribute to public protection from September 2026 to March 2030. It sets a clear line from the NMC Corporate Strategy to five midwifery regulatory priorities which will inform the development and operationalisation of a phased implementation plan and governance framework.

The NMC Midwifery Regulation Strategy is deliberately focused on the regulatory levers the NMC owns, shares with partners or can credibly influence. It does not claim that regulation alone controls wider maternity outcomes. Its intended contribution is safer, more equitable, anti-racist and trusted midwifery regulation, with demonstrable learning, accountability and improvement.

Five strategic priorities



Learn from national reviews and strengthen standards, education and practice.



Ensure fair, informed and effective midwifery regulation.



Listen, learn and advance equity and anti-racism.



Strengthen UK-wide midwifery regulatory leadership and accountability.



Use intelligence to identify risks and drive regulatory action.

Quality and equity run through all five priorities. Delivery is enabled by strong governance, quality data and technology, UK-wide partnerships, skilled people, human rights and informed choice.

The NMC Midwifery Regulation Strategy

The enduring direction: why the strategy is needed, what the NMC can contribute, and the five priorities that will guide choices through 2030.

Why this strategy, and why now

National maternity and neonatal reviews, investigations and inquiries across the four countries of the UK have repeatedly highlighted the importance of clear standards, effective escalation, strong leadership, listening and learning cultures, equitable care, good education and earlier recognition of risk. The NMC's response must be visible and time-bound, while remaining clear about its regulatory remit and where responsibility sits elsewhere in the system.

The dedicated workstream responding to national maternity and neonatal reviews, investigations and inquiries across the four countries of the UK will be completed within six months. It will identify and agree the actions required of the NMC; accepted actions will then be mapped across all five priorities, with clear ownership, milestones and measures, and tracked through implementation and evaluation.

This makes the response prominent without allowing a time-limited workstream to displace the strategy's enduring framework.

The strategy also responds to persistent inequalities, variability in practice learning, challenges in transition and preceptorship, the need to learn systematically from Fitness to Practise, and the need for more integrated regulatory intelligence. It provides a framework for prioritising the NMC's contribution without duplicating the responsibilities of employers, commissioners, service regulators, governments or professional bodies.

Evidence informing the strategy

- The NMC Corporate Strategy 2025–2027
- Relevant national maternity and neonatal reviews, investigations, inquiries and recommendations across the four countries of the UK
- NMC standards, education quality assurance, registration, revalidation, Fitness to Practise, equality and workforce insight
- The experiences of women, families, healthcare leaders, medical colleagues, midwives, students, educators and employers
- Intelligence shared by governments, systems regulators, other health regulators, professional bodies and other partners.

Our regulatory role and boundaries

Clear boundaries are essential to a credible strategy. The NMC will distinguish between what it owns, what it shares with partners and what it seeks to influence.

What the NMC owns

- Standards and education requirements
- Registration and revalidation requirements
- Fitness to Practise processes and learning within the NMC's remit
- Regulatory data, assurance and public reporting.

What the NMC does with partners

- Share intelligence and learning
- Coordinate with regulators and system leaders
- Support implementation of relevant recommendations where responsibility is shared.

What the NMC seeks to influence

- Psychological safety, speaking up and anti-racist practice
- The quality and consistency of education and practice learning
- Employer referral behaviour and fairness
- Recognition of and response to emerging risk.

BOUNDARY STATEMENT

The NMC is transparent about what it owns, shares and influences. It does not claim direct control over wider maternity outcomes or use regulation to duplicate the responsibilities of service delivery bodies.

Cross-cutting commitments and enablers

Every priority will be delivered through a common set of commitments and enabling capabilities. These are not separate workstreams; they are the conditions for credible delivery.

- Public protection first: prioritise activity according to risk, regulatory remit and potential contribution to public protection
- Quality and equity by design: consider quality, equity, anti-racism, bias awareness, cultural curiosity, safety, respect and human rights throughout policy, delivery and evaluation
- Evidence-led and proportionate: distinguish an implementation gap from a standards or policy gap before proposing reform
- Four-country approach: maintain a coherent regulatory approach while recognising different policy and service contexts.
- Listen, learn and act: show how the experiences of women, families and professionals change decisions
- Transparent accountability: report progress, risks, decisions and learning through clear governance routes.

Foundation enablers

- Strong governance and accountability
- Quality data and appropriate technology
- Partnerships across the four countries of the UK and with the right stakeholders
- Skilled, supported and empowered people
- Human rights, dignity, respect and informed choice
- Quality and equity embedded across the work.

Five strategic priorities at a glance

NMC Midwifery Regulation Strategy 2026-2030



Quality and equity run through all five priorities

PRIORITY 1

Learn from national reviews and strengthen standards, education and practice



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Aim

Translate learning from relevant maternity and neonatal reviews across the four countries of the UK, alongside other evidence, into clear, current standards, effective education assurance and stronger practice learning and transition support.

Strategic commitments

- Complete and publish the NMC's response to relevant maternity and neonatal reviews across the four countries of the UK by March 2027, distinguishing actions within the NMC's remit from those owned elsewhere
- Map accepted actions across all five strategic priorities, with clear owners, milestones, measures and an audit trail through implementation and evaluation
- Evaluate how current standards and education requirements are being implemented, including practice learning, preceptorship and transition into registration
- Strengthen guidance, education assurance or professional development where evidence identifies an implementation gap
- Consider formal standards change only where evidence demonstrates a regulatory gap and after the appropriate consultation and approval route
- Support clarity in advanced practice and the development needs of internationally educated midwives where these fall within the NMC's remit.

Principal regulatory levers:

Standards and guidance; education requirements and quality assurance; registration and revalidation; professional engagement.



PRIORITY 2

Ensure fair, informed and effective midwifery regulation



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Aim

Ensure that regulatory pathways and decisions are fair, equitable, consistent, timely and informed by relevant midwifery expertise.

Strategic commitments

- Integrate midwifery expertise into relevant Fitness to Practise policy, insight, decision-making and learning routes
- Take an anti-racist and anti-discriminatory approach to analysing employer referral patterns, outcomes and demographic data to identify potential racial bias, discrimination or differential treatment
- Strengthen feedback loops so that Fitness to Practise, safeguarding and referral learning informs standards, education and regulatory guidance
- Be transparent about disparities, actions taken and the limits of the available data.

Principal regulatory levers:

Fitness to Practise; safeguarding; regulatory policy; human rights recognition; equality insight; employer engagement.



PRIORITY 3

Listen, learn and advance equity and anti-racism



PRIORITY 3

Listen, learn and advance equity and anti-racism

Aim

Make lived experience, fairness, inclusion and cultural safety central to how midwifery regulation is designed, delivered and evaluated.

Strategic commitments

- Help tackle the Black maternal health crisis by promoting both the NMC's Principles to support anti-racism in midwifery and nursing education and practice and future NMC standards, which will seek to embed anti-racism, bias awareness, cultural curiosity, safety and respect
- Embed equity and human rights considerations across standards, policy, education and assurance
- Ensure regulatory standards, guidance and education challenge racist stereotypes and racist tropes, such as the false beliefs that '*Black women don't feel pain*' or '*have a higher pain threshold*', which can lead to delays in assessment, treatment and escalation of care
- Use learning from lived experiences, inquiries and resources such as short films to strengthen understanding of racism, inequity, listening, advocacy, trauma-informed care and culturally safe maternity practice
- Address inequities experienced by Black, Asian and minority ethnic midwives and students by promoting awareness of differential attainment, tackling racism, discrimination and microaggressions within education and practice settings
- Establish meaningful and accessible routes for women, families, midwives, students and other professionals to inform regulatory priorities
- Use equity and human rights impact assessment throughout the lifecycle of midwifery work
- Publish proportionate '*you said, we did*' updates that show where insight changed decisions and where the NMC could not act.

Principal regulatory levers:

Promotion of the NMC's Principles to support anti-racism in midwifery and nursing education and practice; public engagement; co-production; equity and human rights assessment; standards, education and communications.



PRIORITY 4

Strengthen UK-wide midwifery regulatory leadership and accountability



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Aim

Provide visible, credible and accountable midwifery regulatory leadership across the four countries of the UK while remaining clear about the NMC's remit.

Strategic commitments

- Maintain structured engagement with Chief Midwifery Officers, governments, regulators, educators, professional bodies and service-user organisations across the four countries of the UK
- Formalise the Midwifery Strategic Advisory Group as an advisory and challenge partner within the NMC's governance arrangements
- Clarify ownership, escalation and accountability for midwifery risks and actions across the NMC
- Report transparently to the Executive Board and Council on progress, risk, equity and learning
- Invite the Chair of the Midwifery Strategic Advisory Group to attend meetings of the Council where midwifery matters are being discussed.

Principal regulatory levers:

Governance; assurance; strong relationships across the four countries of the UK; strategic communication; partnership and influence.



PRIORITY 5

Use intelligence to identify risk and drive regulatory action



PRIORITY 5

Use intelligence to identify risk and drive regulatory action

Aim

Bring together data, concerns, feedback and learning to recognise emerging risk earlier, act where regulation can make a difference and explain what has changed.

Strategic commitments

- Triangulate education, Fitness to Practise, complaints, equity, workforce, service-user and other relevant intelligence
- Maintain structured horizon scanning of reviews, investigations, inquiries, policy developments and emerging risks
- Track relevant external recommendations from consideration through to acceptance, implementation, embedding and evaluation
- Develop accessible internal and public reporting where data quality, information governance and interpretation support it.

Principal regulatory levers:

Data and analytics; regulatory insight; horizon scanning; recommendation tracking; assurance and public reporting.



Strategy delivery

Strategy delivery is via a live delivery framework: phased activity, accountable ownership, explicit decision gates, measures, governance and risk management.

The implementation plan translates the NMC Midwifery Regulation Strategy into sequenced action. It is intentionally adaptable to remain agile to the changes that may occur within the healthcare landscape during the delivery timeframe. The strategy will be reviewed annually and may be refreshed as evidence, dependencies and corporate priorities develop, provided changes remain consistent with the approved strategic direction.

Phased delivery of the NMC Midwifery Regulation Strategy

PHASE 1
Respond to reviews and build foundations

September 2026-March 2027

- Confirm governance, ownership and boundaries
- Publish the NMC response to maternity and neonatal reviews and map actions
- Complete gap analyses and baselines
- Set up intelligence and recommendation tracking
- Agree the approach to listening, equity and public involvement
- Prepare evidence for decision gates.

PHASE 2
Put improvements into practice

April 2027-March 2028

- Implement approved regulatory changes
- Strengthen Fitness to Practise learning and referral equity
- Embed four-country engagement and governance
- Publish assurance and insight
- Consult where evidence supports reform.

PHASE 3
Demonstrate impact and refresh

April 2028-March 2030

- Evaluate implementation and outcomes
- Show how intelligence and lived experience changed decisions
- Demonstrate impact of accepted review actions and later learning
- Report on equity, accountability and confidence
- Refresh priorities for the next strategy period.

DELIVERY RULE – Actions proceed when committed; decision gates remain subject to evidence, consultation, legislation, resources or later approval.

Governance and accountability

NMC Midwifery Regulation Strategy: governance and accountability

Existing corporate governance remains authoritative



Assurance cycle

Quarterly delivery and risk reporting	Triangulated regulatory and external-review intelligence	Annual strategy review and corporate alignment	Equity and human rights review at key points	Transparent reporting and corrective action

The NMC Midwifery Regulation Strategy can only be amended through the appropriate strategic approval route. The implementation plan may be refreshed through agreed delegated governance when sequencing, ownership, measures or dependencies change, provided the update remains consistent with the approved mission, priorities and regulatory boundaries. Material changes will be escalated to the Executive Board and then to Council as required.

Strategic risks and mitigations

Risk	Potential consequence	Mitigation
Role confusion or scope creep	The NMC is held accountable for outcomes beyond its statutory remit or duplicates partners.	Use the own/share/influence boundary consistently; agree ownership and escalation routes; communicate limitations transparently.
Unapproved activity is interpreted as a commitment	Loss of trust, premature expectations or inappropriate resource commitments.	Use explicit decision gates and separate approval for policy, consultation or legislative choices.
Insufficient or fragmented data	Measures are misleading or emerging risk is not recognised.	Apply data-quality thresholds, triangulate sources, state caveats and invest proportionately in data maturity.
Resource and delivery capacity	Activity is delayed or spread too thinly to make a credible contribution.	Prioritise phased delivery, identify dependencies early and escalate choices through governance.
Stakeholder confidence and reputational challenge	Partners or the public do not understand the NMC role or do not see evidence of action.	Use meaningful engagement, transparent reporting and clear 'you said, we did' evidence.
Different policy contexts across the UK	A uniform approach fails to recognise nation-specific priorities or creates inconsistency.	Maintain UK-wide principles with nation-sensitive engagement, analysis and implementation.
Corporate strategy or policy changes	The midwifery strategy becomes misaligned before 2030.	Review alignment annually and after material corporate or legislative change.
NMC's Principles to support anti-racism in midwifery and nursing education and practice do not become embedded	Anti-racism, bias awareness, cultural curiosity, safety and respect are not sustained in midwifery practice.	Continuous programme to embed the NMC's Principles to support anti-racism in midwifery and nursing education and practice; work closely with those systems regulators who wish to use the principles to help inform their inspection regimes.

Conclusion

By 2030, the NMC will be clearer, more visible and more transparent about how midwifery regulation protects the public. This strategy sets out how the NMC will learn from national reviews and strengthen standards, education and practice; make regulation fairer; listen, learn and advance equity and anti-racism; provide accountable UK-wide leadership; and use intelligence to recognise risk and drive action.

OUR INTENDED CONTRIBUTION

Safer, more equitable, anti-racist and trusted midwifery regulation, with demonstrable learning, accountability and improvement.



nmc Nursing & Midwifery Council

23 Portland Place,
London W1B 1PZ

+44 20 7637 7181

www.nmc.org.uk

@nmcuk

@nmcnews

The Nursing and Midwifery Council

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Registered charity in England and Wales (1091434) and in Scotland (SC038362)