

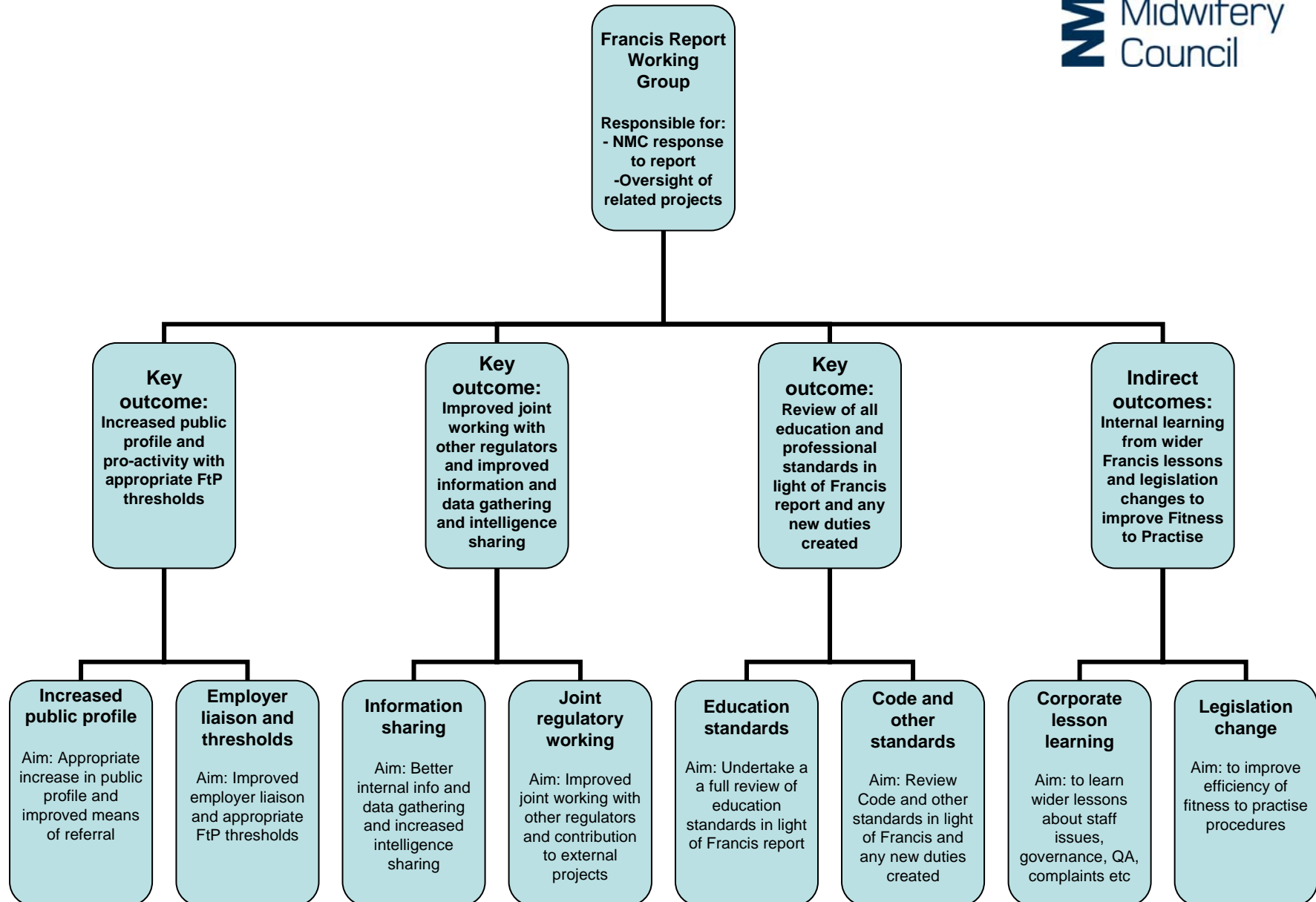
Patient and public
engagement forum,
16 May 2013

Update on new Council

Mark Addison
Chair

Update on our response to the Francis report

Jackie Smith
Chief Executive and Registrar



How we are responding to the issues you raised

Lindsey Mallors
Director of Corporate Governance

Last time we met....

We:

- asked you to help us look at how we could make the NMC website more user friendly for patients and the public.

So how are we doing?

We have:

- written a strategy to explain how we are going to improve our website.
- changed the name of the general public section to 'patients and public'.
- added new images.
- made the 'how to complain' link easier to find.



You said:

- we need to work with Healthwatch.

We have:

- been to the Healthwatch launch on the 11 April and invited Local Healthwatch groups to join our Patient and public engagement forum.



You said:

- we use a lot of jargon and acronyms in our communications which make them confusing to patients and the public.

We are:

- looking at how we can deliver plain English. We have written a report for Directors to approve.

Thank you



Any questions?

Getting involved in Fitness to Practise listening events

Peter Lynn
Head of External Liaison

The gap between patients and the public and regulators' mindsets

Roger Goss
Patient Concern

Engagement commitments and delivery plan

Lindsey Mallors
Director of Corporate Governance

Open and effective relationships

- We will maintain open and effective regulatory relationships with patients and the public, other regulators, employers and the professions that help us positively influence the behaviour of nurses and midwives to make the care of people their first concern, treat them as individuals, and respect their dignity.

Open and effective relationships

- We will develop and maintain constructive and responsive communications so that people are well informed about the standards of care they should expect from nurses and midwives, and the role of the NMC when standards are not met.

Our delivery plan

- We have written a comprehensive plan about who we should engage with, how and when.
- The purpose of the plan is to ensure that people know what we do, and what we don't do.

How we are engaging with patients and the public

- Holding this forum!
- Listening to you, and wherever possible acting on your advice.
- Planning a Patient and public engagement forum in Scotland.
- Working with Healthwatch, Patient Advice and Liaison Service, National Childbirth Trust, National Voices and Action Against Medical Accidents.

How we are engaging with patients and the public

- Working with the Richmond Group of Charities.
- Working with other regulators to find better, more effective ways of reaching patients and the public.
- Making our website more public friendly.

How we are engaging with Health Education England

- The Care Bill includes a duty of cooperation between regulators and Health Education England (HEE).
- We have met with the Director of Education and Quality at HEE.
- The Director of Nursing at HEE has attended our Education Committee.
- We will be meeting Local Education Training Boards, along with other regulators.

Assuring the quality of nursing and midwifery education

Emma Westcott

Assistant Director Education and Standards

Quality assurance (QA) – what?

Programmes leading to entry on the register or a mark on the register:

- Do programmes comply with the relevant education standards?

Local supervising authorities (LSA) for midwifery:

- Does LSAs comply with Midwives Rules and Standards?
- Threshold standards: met/met with conditions /not met.

Quality assurance – what?

- Over 1400 programmes.
- 79 providers UK wide.
- In 2011-12:
 - 369 approval and reapprovals.
 - 54 monitoring visits.
 - 6 reviews of LSA.
 - No extraordinary reviews.

Our role in QA is public protection

- To ensure suitable applicants enter nursing and midwifery programmes.
- To set standards that are clear about threshold knowledge, skills and values/behaviours for nurses and midwives to join the register.
- To check approved programmes support students to meet those standards.

Our role in QA is public protection

- To ensure service users are safe when students are learning through working directly with them – supervision, mentorship, etc.
- To provide the means of raising concerns about training – to users, educators and students.

Other roles in QA

- We are not regulating higher education – every Higher Education Institution has internal Quality Assurance and is scrutinised by Quality Assurance Agency.
- We are not there to judge practice – but we are looking at suitability and safety of practice settings as learning environments.
- We are not explicitly about quality improvement – for others including Higher Education Academy.

Quality assurance – how?

Combination of tools:

- Evidence: self-reporting by providers and other evidence about quality/risk.
- Visits by teams of reviewers testing evidence – are standards met?
- Scheduled and exception reporting to NMC.
- Annual public reporting by NMC.
- Response to settings causing concern.

Quality assurance – what change is needed?

- Demonstrate proportionality and take account of risk.
- Reduce unnecessary burdens on providers of education and LSAs.
- Enhance transparency by improving public-facing policy and widening use of lay reviewers.

Quality assurance – what change is needed?

- Develop how we capture and report on the intelligence from QA for our own regulatory purposes and other audiences.
- Widen understanding of nursing and midwifery education and our role.
- Have clearer rules, uphold them confidently, and be clear about sanctions.
- Take stock of Francis recommendations and responses.

Next steps

- Publish and promote QA framework.
- Develop information material for service users and carers.
- Plan for and implement new framework by 1 September 2013.
- Evaluate and adjust as required over the three years.
- Plan for post 2016.

Material for service users and carers

- How nurses and midwives train – extent of practice based element.
- Benefits of involved healthcare providers and users in training – tests compassion and competence in practice.
- How patient safety is supported when students are working with them – mentoring, supervision, student fitness to practise, educational audit of practice placements.

Material for service users and carers

- NMC role in education and the roles of others.
- Raising concerns and providing feedback.
- Getting involved in nursing and midwifery education.

Midwifery supervision

- We already have a leaflet for service users which may benefit from review.

Patient and public involvement in the NMC's quality assurance of education

Emma Westcott
Assistant Director Education and Standards

Statutory duties of NMC

To protect the public by:

- Maintaining a register of nurses and midwives capable of safe and effective practice.
- Setting and assuring standards for professional entry and practice.
- Assuring the supervision of midwives.
- Handling cases where registrants are alleged to have fallen short of standards expected.

Patient and public involvement in our wider work

- Council comprised of lay and professional members, and patient and public consultative forum.
- Fitness to Practise panels comprised of lay and professional members.
- LSA reviews involve lay and professional reviewers – and involve feedback of service users.
- Register can be consulted by patients and public.

Value added by patient and public involvement

Patients/service users:

- A source of expertise in nursing and midwifery.
- Unique perspectives on care, and what good looks like.

Public/lay:

- The value of being ‘disinterested’ – good for scrutiny and accountability.
- As a public body we regulate on public’s behalf and account giving ought to be clear to public.

Quality assurance of education

- We do not currently have direct patient and public involvement in education review teams.
- Introducing lay reviewers from September 2013 – starting with monitoring visits and then if effective rolling out to approvals.
- We do require evidence of patient and public involvement from our providers as part of Quality Assurance.

Patient and public involvement in QA of education

Pre-reg nurse education standards (NMC 2010)

- Standards are measured and graded at approval or reapproval.

Providers must:

- make the needs of service users their first priority (R1.2).
- clearly show how users and carers contribute to programme design and delivery (R5.1).
- ensure that the selection process includes representatives from practice learning providers (R3.7).

Patient and public involvement in QA of education

Expectations on providers at approval (QA Handbook, 2011)

- The programme development team would normally be expected to comprise both academic staff and practitioners, including mentors and where appropriate other stakeholders e.g. students, users and carers.
- Providers are recommended to include users/carers on approval panels to speak to whether the user/carer perspective has been addressed throughout the programme and across all fields of practice.

Patient and public involvement in QA of education

Monitoring

Practice learning

- Scrutiny of how providers elicit the views of service users and carers about the care provided by students, their level of awareness of the role of students and their education.
- Determination of the contribution of practitioners and service users to programme development, delivery, assessment and evaluation.

Admission and progression

- Looks at involvement by practitioners, service users and carers.

Engagement with users/carers

Monitoring

Meeting with service users/carers involved in programmes to ascertain:

- Extent to which they felt able to contribute to the programme.
- Extent to which they felt their contribution was valued and included.
- Relevance of the learning outcomes to the needs of patients and carers.
- Methods of providing feedback on experiences of care provided by students.

Next steps

Lindsey Mallors
Director of Corporate Governance

Next steps

1. Ask for your input into our revalidation work at a workshop event on 4 June.
2. Invite you to our joint event with GMC and The Richmond Group of Charities.
3. Invite you to visit Old Bailey and learn about how hearings work at our next forum event on 7 August.

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!
- Lindsey.Mallors@nmc-uk.org

Next meetings

- Revalidation workshop on **Tuesday 4 June 2013** at 23 Portland Place, London, W1B 1PZ
- Next forum meeting on **Wednesday 7 August 2013** at 20 Old Bailey, London, EC4M 7LN

Thank you