

Patient and public engagement forum, 19 November 2013

The Patient and public engagement forum met at 23 Portland Place, London on 19 November 2013.

Update

There have been a number of reviews into healthcare published recently. Our responses to these reports can be found on our website at www.nmc-uk.org/media/Latest-news/

Every year we prepare a report for the Professional Standards Authority (PSA). We are in the process of finishing our report for this year. The PSA also gather evidence from a number of sources, by 5 December, for a final report published by the PSA in June 2014..

Like the General Medical Council (GMC), the NMC has annual hearings with the Health Select Committee. We had our hearing in early November, where we submitted our annual report, gave evidence and others gave evidence about us. In coming months, the committee will publish a report featuring recommendations for us to follow. You can read more at www.nmc-uk.org/media/Latest-news/NMC-in-the-news4

Our consultation on Revalidation will start in January 2014. Third party feedback, including from patients, will be part of the consultation. We will share details when they are available.



How registration protects the public

Alison Sansome, Director of Registration spoke to the forum about how registration protects the public.

There are three different routes onto the register depending on whether a nurse or midwife trained in the UK, EU or overseas. The rules and evidence are different for each route but all are based on the same standards: we need to

be confident that a nurse or midwife is capable of safe and effective practice.

Nurses and midwives need to show they are of good health and good character. We check this through employer or university references. Nurses and midwives must declare any criminal records, cautions or convictions and failure to do so will result in being referred to Fitness to Practise.

We need to have a register because we have no authority over people not on the register. Registered nurse is a protected title, as is midwife. However, neither nurse nor doctor are protected titles. This is because there are a number of areas where these titles are used such as veterinary or nursery nurse and because the title doctor refers to a level of qualification rather than the subject studied. It is a criminal offence to practice

as a registered nurse if you are not on the NMC register. Any member of the public can check our online register to check if a nurse or midwife is registered with us.



Workshop discussion on the future development of the forum

At our meeting on 7 August 2013 we reflected on the work of the forum over the last 15 months. We have covered a lot and want to say a big thank you to everyone who has been involved.

In small groups we discussed what forum members like about the forum and what we can do better in the future.

You told us that you like meeting quarterly and that the timings and venue are suitable. You said that you prefer face-to-face meetings. The diversity of experience in the group is valuable to you, and you like hearing from different staff at the NMC. You also told us that you like hearing from Council members and are pleased that they are interested in the forum. Having your expenses covered is also important to you, and enables you to attend.

You said that there is lots of time for discussions and that everyone has a voice and is listened to. And you thought it was good that we have started this forum, even though there is no statutory duty on us to do it.

In the future you would like to see more diversity in the group and we need to make sure that we are inviting groups who represent a range of patient views. You also said that you would like leaflets about the NMC that you can share with your networks.

Over the last 15 months you said that you have been learning a lot and now feel ready to make the next step and be more actively involved in co-production of projects. You want to better understand what we get out of the forum and you would like the group to be more outcome focused.

You suggested that there should be an open spot at each meeting when any member of the group can speak on a relevant subject. We like this idea and will be starting it at the next meeting.

The NMC has a defined remit and sometimes there are things that we cannot influence. You have told us that if something is not for us, then we need to let you know who is responsible and share what we have learnt from you with them.

You welcomed our efforts in introducing plain English and suggested a jargon buster on our website and in our newsletters would be helpful.

For example you said that not many people are aware that the Criminal Records Bureau (CRB) and the Independent Safeguarding Authority (ISA) have merged to become the Disclosure and Barring Service (DBS).



Shaping the future: Our strategy

Council member Stephen Thornton shared some of the discussions that Council has been having about what is important to do and how we should do it.

Things we know that we will be doing include reviewing the Code; introducing revalidation for nurses and midwives; improving our Fitness to Practise process; and making sure our IT and finances are in order.

We also know that we need to continue to raise our profile with the public and to work better with other regulators. And we need to be efficient and effective, which might mean doing something differently in the future.

There are also some things happening in the outside world that could affect us, such as the Scottish referendum and the UK general election.

Forum members were asked what you think we should be doing and here's what you said:

- The public need to know what the NMC does and how to make a complaint about a nurse or midwife.
- Make sure Fitness to Practise is about learning and improving not punishment. Show more about nurses and midwives doing things right.
- Go out and speak to more grassroots groups.
- Explain better how the NMC fits in with the NHS complaints system.
- Council needs to prioritise the right things and make sure there are resources.
- Be better at telling nurses and midwives why they need to be on the register.
- Explain more about who does what. For example, what does the Royal College of Nursing do and how is that different to what the NMC does.
- Explain the difference between the GMC and NMC models of revalidation.



The next meeting of the Patient and public engagement forum will take place on 5 February 2014 from 13:00 to 16:30 at the Nursing and Midwifery Council, 23 Portland Place, London, W1B 1PZ.

Attendees

Guests	NMC
<ul style="list-style-type: none"> • Bridget Barker, Doula UK • Elizabeth Duff, National Childbirth Trust • Lavinia Fernandes, Parkinson's UK • Roger Goss, Patient Concern • Jan Green, Healthwatch Luton • Sue Harle, Volunteer • Valerie Harrison, POhWER • Andrew Leitch, Scottish Health Council • Michael Osborne, Integritas Advocacy • Francesco Palma • Russell Prestwich, Advocacy for All • Lynn Strother, Greater London Older People's Forum <p>We were also joined by NMC council members Stephen Thornton and Judith Ellis</p>	<ul style="list-style-type: none"> • Katerina Kolyva, Director Continued Practise • Alison Sansome, Director Registration • Gemma Wood, Strategic Relations Manager • Laura Oakley, Events Officer