

Royal College of General Practitioners response to Nursing and Midwifery Council consultation on Post-Registration Standards

August 2021

The Royal College of General Practitioners (RCGP) welcomes the opportunity to contribute to this review of post-registration nursing standards.

The RCGP is the largest membership organisation in the UK solely for GPs. Founded in 1952, it has over 54,000 members who are committed to improving patient care, developing their own skills, and promoting general practice as a discipline. The RCGP is an independent professional body with expertise in patient-centred generalist clinical care.

GPs and their teams regularly collaborate closely with nurses who work across community and public health roles, in order to support patients outside hospital. Such out of hospital care has changed dramatically over the last ten years and will continue to evolve over the lifecycle of these standards. It is therefore appropriate that standards are updated to reflect current professional practice, whilst ensuring sufficient flexibility to respond to future changes.

Community and primary care settings have always been high risk for nursing and are very different to the acute hospital setting. This is due to the fact that nurses often work alone or in isolation and manage and co-ordinate care for complex patients often involving multiple other organisations.

Post-registration nurses working in these areas therefore require high levels of professional and clinical judgement, in order to be able to plan and manage care for patients and their families in the context of an aging population. They also need to be able to lead, train, supervise and manage other regulated and unregulated staff within a team. As healthcare develops, nurses will continue to embrace more technical and innovative care covering much wider areas including many hard to reach or vulnerable groups.

The draft standards recognise that there are common themes across the different fields of community nursing such advanced communications, complex decision making, collaborative working, leadership, prescribing, public health and safeguarding. Importantly, they recognise the need to maintain separate regulation for Specialist Community Public Health nurses (SCPHNs) which include health visitors, school nurses, occupational health nurses, family health nurses or public health nurses. They also aim to maintain the recordable Specialist Practice Qualification (SPQ).

All fields of community and primary care nursing are becoming increasingly complex, delivering nursing interventions which a few years ago would have been undertaken in hospital. This shift of care to the community requires that each nursing field of practice has clearly defined standards so that appropriate training can be commissioned and delivered by universities.

The Specialist Practice Qualification (SPQ) for each community field of practice includes community children's nursing, community learning disabilities nursing, community mental health nursing, district nursing and general practice nursing.

However, the SPQs do not go into specific detail on the standards of proficiency for each field of practice, instead referring only to applying generic standards of proficiency. Additionally, programme lengths are not specified. It is hard to imagine how a generic set of post-registration training standards could encompass such a wide range of knowledge and skills.

Additionally, the proposed approach means that universities will be left to define specific standards of proficiency, which will likely lead to unwarranted variation in educational programmes, and potentially risks leaving nurses unequipped to be able to deliver safe and effective care in their field of practice. There is a risk that if the specific fields of practice covered by the SPQ are not set out clearly enough by the NMC many university courses may not be fit for purpose and become unviable. Community and primary care nurses will then not get the appropriate training to deliver safe care in each unique area of practice.

Given that considerable time and effort has been put into standardising education and training for many of the new roles now being introduced into primary care, and that the need for standardised training programmes for medical training has long been recognised it is important that community and primary care nursing is given the same attention to ensure patient safety. These training programmes should be externally validated across the UK, to ensure consistency and transferability.

Updated standards are likely to be an important factor to workforce planning as they may help raise the profile of community nurses in each field of practice. They will also help universities to plan and deliver the right training for the next generation of community nurses.

Recommendations

- NMC to lay out the required standards of proficiency for each field of practice.
- NMC to standardise the course requirements for each field of practice.
- NMC to standardise the course length and placement requirements
- NMC to detail the required learning outcomes for each field of practice