Regulation of a New Profession - Nursing Associates

Summary of Marie Curie response to the Nursing and Midwifery Council Consultation on Nursing Associates – Regulation of a New Profession

Background
The Nursing and Midwifery Council (NMC) was consulting on how they will regulate the new nursing associate role, which was created to bridge the skills gap between health and care assistants and registered nurses as well as to adapt to the fluctuating needs of patients and the public in health care. The regulation of nursing associates is similar to the one applying to registered nurses and midwives. In January 2017 began the first nursing associates programmes and the first cohort is expected to qualify at the beginning of 2019.

The consultation is about the standards and processes that will be used to regulate nursing associates. It includes: standards of proficiency, the Code, education requirements, routes to the register, revalidation and fitness to practise.

The proposed legislation focuses more precisely on¹:

- Registering qualified and competent nursing associates and identifying them as a distinct profession;
- Setting the Standards of proficiency and Standards for nursing associate programmes and approving nursing associate education providers;
- Creating routes to allow individuals with NMC approved nursing associate qualifications to apply to join their register;
- Introducing a route to registration for individuals who have started on or completed a HEE pilot programme or apprenticeship by 26 July 2019;
- Applying the fitness to practise procedures to nursing associates to deal with any concerns should a nursing associate fall short of standards;
- Protecting the public by creating offences in England relating to ‘nursing associate’ title, falsely claiming to be on the nursing associate part of the register and falsely claiming to have nursing associate qualifications.

Standards of proficiency for nursing associates
Marie Curie suggested that the knowledge and skills expected of a nursing associate are clearly differentiated from registered nurses. The responsibilities have to be in line with the nursing associates’ education requirements, which are different from the education requirements of registered nurses.

Regarding communication and relationship management skills, Marie Curie recommended recognising the challenges of human behaviour as there is no mention in the communication section on how to handle and manage stressful situations. Some key communication and relationship management skills relating to the behaviour of the nursing associate triggering a negative behaviour in an individual (this could be a patient or relative) should be expected of all nursing associates at the point of registration.

In the Standards of proficiency for nursing associates, it is written that nursing associates “provide and monitor care to patients”. However, under the section on safe medicines management, it is stated that nursing associates “continually assess people receiving care”. The wording is not the same and this needs to be clarified on what is expected of the nursing associates; assessment or monitoring of patients' needs? If assessment is required, then this standard is missing in the document.

In principle, Marie Curie thinks nursing associates should be able to assess and monitor patients, however the level of assessment required will be different than registered nurses.

The Code: professional standards of practice and behaviour

Marie Curie agreed that only one Code should regulate the three professions; registered nurses, midwives and nursing associates. While the level of knowledge and skill will be different for registered nurses and nursing associates, the Code is a set of standards providing reassurance to the public by ensuring registered nurses, midwives and nursing associates behave professionally, practice safely and continue to learn and develop.

Education and training

Marie Curie approved that nursing associates should be able to contribute to student learning and supervise and assess students. However, the education programmes need to ensure that nursing associates only supervise students within the role boundary and are competent in this. Nonetheless, nursing associates should get further preparation and additional support to become academic or practice assessor.

Standards for pre-registration to nursing associate programmes

The NMC suggested to recognise up to 50 per cent of the programme prior learning for individuals willing to join the nursing associate programmes.

Marie Curie’s answer was that this 50% cap is unclear. It should not only be about percentage but also about the applicant’s ability and assessment skills to complete the nursing associate programme. In addition, a question regarding equity applies; how would the 50% cap be assessed and how to decide which prior learning is included in this 50% cap?

Marie Curie also suggested that to prepare the students for the nursing associate’s role, they should, the last 6 months of training, have developed competencies to take additional practical responsibilities in a range of clinical skills and should be able to demonstrate these in practice.

Finally, Marie Curie recommended that the NMC recognises nursing associate's profession in its own rights. Nursing associates are equally important to patients as registered nurses and should not be considered under registered nurses.

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