

Reference No: 39/11

Title:	Making a referral to the Nursing and Midwifery Council		
Author(s)	Audrey Dowd: Senior Manager Nursing Additional Authors: Olive MacLeod, Co-Director Nursing Lynn Fee, Senior Manager Nursing		
Ownership:	Brenda Creaney, Executive Director of Nursing Service Directorate: Central Nursing & Midwifery Team; Nursing & User Experience		
Approval by:	Policy Committee Standards and Guidelines	Approval date:	28/07/2011 15/08/2011
Operational Date:	March 2012	Next Review:	March 2014
Version No.	V1	Supersedes	All legacy policies relating to NMC referral
Links to other policies			

Date	Version	Author	Comments
August 2010	V.01	Audrey Dowd	First draft
October 2010	V0.2	Olive Macleod	Amendments
November 2010	V0.3	Audrey Dowd	Amendments
June 2011	V0.4	Olive Macleod	Further comments
June 2011	V0.5	Audrey Dowd	Final amendments
Sept 2011	V0.6	Lynn Fee Audrey Dowd	Further amendments
November 2011	V0.7	Brenda Creaney	Further amendments
December 2011	V0.8	Lynn Fee Audrey Dowd	Senior Nursing Team HR

1.0 INTRODUCTION / PURPOSE OF POLICY

The NMC is the regulatory body for nurses and midwives and its role is to protect the public. This is carried out through setting and maintaining standards of education, training, conduct and performance. Fitness to practice is a registrant's suitability to be on the register without restrictions.

The NMC has established a process to be followed where there are concerns regarding a registrant's fitness to practice.

In all situations the safety of the public must be paramount and this principle underpins any actions taken.

Examples that could be considered for referral are:

- Misconduct;
- Lack of competence;
- A conviction or caution;
- Physical or mental ill health;
- A finding by any other health or social care regulator or licensing body that a registrant's fitness to practise is impaired;
- A fraudulent or incorrect entry in the NMC's register.

Reporting a case of unfitness to practise to the NMC is appropriate only when you believe the conduct, practice or health of a registrant is impaired to the extent that public protection may be comprised.

1.1 Background

There are instances when the Trust as an employer is required to deal with situations concerning the misconduct, lack of competence or poor health of registrants*. Most of these incidents are managed at a local level and do not give rise to wider concerns about public protection.

There are occasions however when the misconduct, lack of competence and health issues are intractable, which requires the Trust to refer the registrant to the Nursing and Midwifery Council (NMC).

This policy sets out the processes to be followed when making a referral to the NMC.

**'Registrant' is the term used for a nurse or midwife registered with the NMC.*

1.2 Purpose

This policy is intended to support nurses, midwives and managers of nurses and midwives (hereafter referred to as managers) in the referral process.

2.0 DEFINITIONS/SCOPE OF THE POLICY

This policy will apply to nurses and midwives and managers in all Trust facilities and healthcare settings.

A role of the NMC is to safeguard the health and wellbeing of the public from registrants whose fitness to practice is impaired and whose situation cannot be managed locally.

In these circumstances, NMC can restrict or remove a registrant's registration.

3.0 ROLES/RESPONSIBILITIES

- It is the responsibility of all registered nurses, midwives and managers to be aware of this policy.
- This policy should be read in conjunction with NMC professional guidance.
- Explicit roles and responsibilities are detailed within the main body of the policy.

4.0 KEY POLICY PRINCIPLES

- 4.1 Reporting a case of unfitness to practise to the NMC is appropriate only when the conduct, practice or health of a registrant is impaired to the extent that public protection may be compromised.
- 4.2 All allegations of impairment of fitness to practise must:
- Identify the registrant concerned;
 - Clearly set out the case against the registrant;
 - Be supported by appropriate information and evidence.
- 4.3 In order to assist with the decision to refer or not to refer a registrant to the NMC, a 'Decision Tree' produced by the NMC is included (Appendix 1).
- 4.4 Where the Associate Director of Nursing/Midwifery deems the registrant a risk to the public or unfit to practice, as a result of the Trust's Capability Procedure or Disciplinary Procedure, a referral to NMC must be made.
- 4.5 The role of the Executive Director of Nursing and User Experience is to:
- Make the final decision regarding an NMC referral, ISA referral and/or CNO Alert for any registrant employed by the Trust;
 - Receive all communications from NMC and forward to Co-Director Governance, Standards & Performance;
 - All correspondence from the NMC will come through Executive Director of Nursing and User Experience;
- 4.6 The role of the Co-Director N&M Governance, Standards and Performance and is to:
- Co-ordinate NMC referrals;
 - Offer guidance to managers in respect of the NMC referral process;

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- Maintain a database of all referrals to NMC;
- Forward updates regarding NMC communications to the Associate Director of Nursing/Midwifery;
- Inform the registrant that a referral to the NMC has been made.

4.7 The role of the Associate Director of Nursing/Midwifery is to:

- Make a recommendation to the Director of Nursing on behalf of the Directorate regarding NMC referral, ISA referral and/or CNO Alert request;
- Communicate with the Director of Nursing and Co-Director Governance, Standards and Performance;
- Ensure that the Local Supervising Authority (LSA) responsible for the supervision of midwives is informed, where the registrant is a midwife;
- Compile an indexed evidence file and send to the Co-Director Governance Performance and Standards;
- Complete the NMC Referral form (Appendix 2) and forward to Co-Director N&M Governance, Standards and Performance;

The following should be included within the evidence file as standard:

- Job description
- Job application form;
- Capability and/or Disciplinary Hearing records and outcomes;
- A summary of completed induction, mentorship or other educational programmes;
- Any other documentation that is deemed relevant eg:witness statements.

Please note that the evidence listed above is not exhaustive and additional information may be requested from the NMC.

- Review all evidence for accuracy and completeness before sending to Co-Director, Governance, Standards and Performance and;
- Support in conjunction with HR, registrants who have received an interim suspension or have had an interim suspension removed;
- Support in conjunction with HR, registrants who have had conditions of practice imposed

4.8 The role of HR is to:

- Notify the Co-Director Governance, Standards and Performance and the relevant Associate Director of Nursing/Midwifery of the outcomes of all investigations that specify NMC referral;
- Provide the documentation from all investigations to the Associate Director of Nursing/Midwifery;
- Provide advice to the Associate Director of Nursing/Midwifery to support registrants who have received an interim suspension order or who have had an interim suspension order removed;
- Provide advice to the Associate Director of Nursing/Midwifery to support registrants who have had conditions of practice imposed.

- 4.9 The role of the witness is to:
- Provide statements as requested, using their work address;
 - Access support where required from Trade Unions, Staff Support and other nursing and midwifery colleagues.
- 4.10 When the Trust sends a referral to the NMC with supporting evidence, the case is referred to a panel of the Investigating Committee. The NMC will then send the registrant a copy of the allegations and supporting information and invite them to submit a written response for the panel to consider. The NMC panel may request additional information, for example, that solicitors carry out further investigations or that the registrant undergo practice or medical assessment. Statements received from the NMC must be checked for accuracy by the registrant before being signed and returned.
- 4.11 Registrants are advised to seek advice from their Trade Union, Occupational Health, Staff Support and/or the Associate Director of Nursing/Midwifery, if appropriate.
- 4.12 Where a manager considers that public health and well being is at immediate risk through the actions or omissions of a registrant, a request can be made to the NMC by the Director of Nursing for an interim order to be issued or the practice of the Registrant restricted.

5.0 IMPLEMENTATION OF POLICY

This policy will be disseminated to all Trust facilities where nurses and midwives are employed via The Hub.

6.0 MONITORING

Audit of compliance with policy as each referral is made.

7.0 EVIDENCE BASE / REFERENCES

Nursing and Midwifery Council (2004) Reporting Unfitness to Practice: A guide for employers.

Reference, including relevant external guidelines:

Nursing and Midwifery Order (2001) HMSO.

Advice and information for employers of nurses and midwives (NMC 2010).

8.0 CONSULTATION PROCESS

Executive Director of Nursing and User Experience;
Central Nursing and Midwifery Team;
Senior Nursing Team;
Trade Unions;

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Human Resources Department.

9.0 APPENDICES / ATTACHMENTS

Appendix 1: NMC Decision Tree

Appendix 2: Reporting a Registrant to the NMC - BHSCT Internal Referral Form.

10.0 EQUALITY STATEMENT

In line with duties under the equality legislation (Section 75 of the Northern Ireland Act 1998), Targeting Social Need Initiative, Disability discrimination and the Human Rights Act 1998, an initial screening exercise to ascertain if this policy should be subject to a full impact assessment has been carried out.

The outcome of the Equality screening for this policy is:

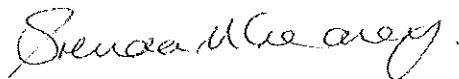
Major impact

Minor impact

No impact

SIGNATORIES

(Policy – Guidance should be signed off by the author of the policy and the identified responsible director).



Name: Brenda Creaney
Title: Executive Director of Nursing

Date: 2nd March 2012

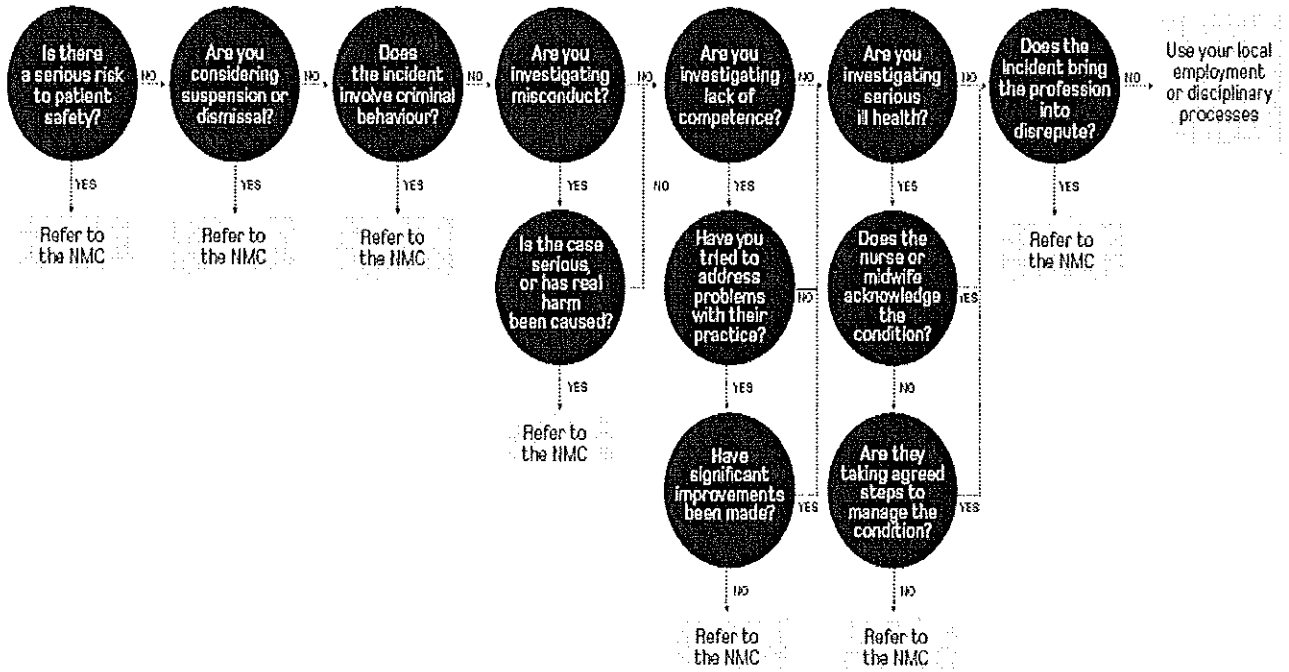


Name: Audrey Dowd
Title: Senior Manager Nursing

Date: 2nd March 2012

APPENDIX 1

NMC Decision Tree



APPENDIX 2

Reporting a Registrant to the NMC**BHSCT Internal Referral Form**

This form must be completed by the Associate Director of Nursing/Midwifery.

Section 1: Referring Manager	
Your name	
Correspondence address	
Your daytime telephone number	
Your email address	
Directorate	
Associate Director of Nursing/Midwifery	
Section 2: Summary of the incident	
Name of registrant to be referred:	
PIN:	
Dates and times:	
Where:	
What happened:	

Section 3: Witnesses	
Please provide details (name, PIN, address and indicate if statement is attached)	

Section 4: Your action	
Complaints?	
Investigation? Disciplinary? Capability?	
Outcomes?	
Recommendations?	
Are you recommending a referral to the NMC?	Y / N
Are you recommending an ISA referral?	Y / N
Are you recommending a CNO Alert be issued?	Y / N
Sent to Director of Nursing:	
Signature:	Date:

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Section 5: Document checklist

Please state in the boxes in the second column how many of the documents you have enclosed	
Evidence that the matter has been investigated locally	
Copies of witness statements	
Copies of relevant medical records	
Other (Please specify):	