

Annexe: NMC observations on the draft QNI Field Specific Standards 2023

Please find some points of feedback for helpful consideration:

Presentation of the standards

1. Frequent reference is made to working at an advanced practice level, this may be confusing when there is no agreed definition of advanced practice. Is there a framework or definition you are referring to? If yes will this be included in the final document? To note the NMC does not regulate advanced practice but has begun its work to explore whether the regulation of advanced practice is needed.
2. Recognition of the changing nature of the health and social care landscape and a need to future proof standards and language used.
3. Some standards have several sub-standards for some fields of practice whilst others have none, is there a reason for this? For example, Adult Social Care Nursing (ASCN) 1.2 has 1.2.1, but Community Children's Nursing (CCN) 1.2 does not have a sub-standard.
4. It is unclear why some themes don't align under similar domain sections, for example risk stratification is mentioned in Domain 1 Clinical Care for ASCN, District Nursing (DN) and Inclusion Health Nursing (IHN), but in Domain 2 Leadership and management for General Practice Nursing (GPN) field specific standards.

Equality, diversity and inclusion

5. It appears that Equality, diversity and inclusion is not consistently embedded in all the field specific standards. For example, equality and diversity is specifically mentioned in IHN 1.3 but this is not mentioned in the other SPQ field areas.
6. The understanding of health inequalities and its impact on health outcomes is evident throughout the field specific standards, but is not in the GPN field specific standards, is there a reason for this?
7. The potential impact of stigma and bias on health outcomes is mentioned in the field specific standards for CCN 2.2, Community Mental Health Nursing (CMHN) 4.5 and IHN 3.7, but this is not mentioned in the other specific field SPQ standards, is there a reason for this?

Consistency and distinctions noted across the field specific standards

8. There may be further clarity needed to ensure areas of focus in a specific field have parity across the other field specific SPQ standards where appropriate, for example:
 - a. all apart from CCN and CMHN mentions about 'support high quality person-centred care' at 1.1. Does the need for person-centred care need to apply to each field?
 - b. the independent nurse prescriber role is not mentioned under CMHN field standards but psychopharmacology is only mentioned in the CMHN field specific standards yet prescribing is mentioned in GPN and CCN field specific standards, but not mentioned in the other field specific standards – are these distinctions intentional?
 - c. leading and undertaking case management are only mentioned in ASCN and DN field specific standards – is this intentional?
 - d. Understanding the effects of social media on people who use services is only mentioned in the CCN field standards, but should this be mentioned in a tailored way for the other specific SPQ fields too?
 - e. the use of eHealth and technology is only mentioned in the ASCN and DN standards and not in the other field specific standards, is there a reason for this?
 - f. in the CMHN standards 1.12 demonstrate critical understanding of the complex interplay between psychological, biological social, spiritual, and cultural factors that affect health, activity, and wellness, but not mentioned under the other fields, is there a reason for this?
 - g. ASCN and DN standards referring to advocating and contributing to public health initiatives e.g. 2.1, but not mentioned under in the other field specific standards, is there a reason for this?
 - h. ASCN and DN standards mention 3.1.1 use creative problem-solving to develop a positive teaching/learning environment, but this is not mentioned under the other fields, is this intentional?
 - i. ASCN and DN standards 3.3 demonstrate the values of high quality, compassionate nursing, but this is not mentioned under the other fields, is this intentional?
 - j. throughout Domain Two it refers to fostering a culture of openness and recognition of duty of candour is mentioned, but this is not well aligned across the fields e.g. CCN field specific standards there is no mention of candour, is there a reason for this?

- k. project management is not consistently mentioned throughout the field specific standards e.g. mentioned in ASCN, DN and IHN, but not in the other specific field standards, is there a reason for this?

Additional requirements

- 10. It may be helpful to provide clarity about the additional requirements that adopting QNI field specific standards means for education providers for future students and their supervisors and assessors that are beyond the NMC's role and responsibilities or provide a link to the relevant NMC webpages.
- 11. The expectation to complete a Community Practice Teaching level 7 or HEI equivalent award/programme appears a number of times in the field specific standards. Again clarity is needed to indicate that this is not a regulatory requirement. As you are aware the Standards to support learning and assessment in practice (2008) that included the NMC Practice Teacher qualification has now been replaced by the new supervision and assessment roles as stated in our [Standards for student supervision and assessment](#).