

## Nursing and Midwifery Council – response to the Home Office consultation ‘*Prevent: duty guidance*’

### About us

- 1 The Nursing and Midwifery Council (NMC) is the regulator for nursing and midwifery in the UK. We exist to safeguard the health and wellbeing of the public. We set standards of education, training, conduct and performance for nurses and midwives, and hold the register of those who have qualified and meet those standards. We have clear and transparent processes to investigate and deal with nurses and midwives who fall short of our standards.

### Our understanding of the consultation

- 2 s.21 of the Counter Terrorism and Security Bill<sup>1</sup> which is currently before parliament proposes to create a statutory duty for specified authorities (in Schedule 3 of the Bill) to, in the exercise of its functions, have due regard to the need to prevent people from being drawn into terrorism. The NMC is not currently listed as a specified authority.
- 3 We understand that the consultation<sup>2</sup> sets out the following common proposals (noting the detail is different for each sector) as guidance for how specified authorities would comply with their statutory duty. The specified authority would:
  - 3.1 Have a risk based approach to identifying vulnerable people at risk of becoming radicalised (including the use of risk assessments);
  - 3.2 Have mechanisms in place to deal with vulnerable people identified as being at risk;
  - 3.3 Train staff so they are aware of the government *Prevent* strategy<sup>3</sup> and *Channel* programme<sup>4</sup> so they can utilise them, including how and when to make referrals to projects and approaches in the channel programme;
  - 3.4 Have a set of visible and publicised policies and processes the organisation will follow in relation to its general duty;
  - 3.5 Maintain records to show how the organisation has gone about performing its general duty;
  - 3.6 Co-operate with the appropriate oversight organisation who will check for compliance with the general duty;
  - 3.7 Participate and report at co-ordination groups with other stakeholders, where advice and support can be given; and,
  - 3.8 Work with other organisations and share information as required to effectively comply with the general duty.

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<sup>1</sup> <http://www.publications.parliament.uk/pa/bills/lbill/2014-2015/0075/15075.pdf>

<sup>2</sup> [https://www.gov.uk/government/uploads/system/uploads/attachment\\_data/file/388934/45584\\_Prevent\\_duty\\_guidance-a\\_consultation\\_Web\\_Accessible.pdf](https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/388934/45584_Prevent_duty_guidance-a_consultation_Web_Accessible.pdf)

<sup>3</sup> [https://www.gov.uk/government/uploads/system/uploads/attachment\\_data/file/97976/prevent-strategy-review.pdf](https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/97976/prevent-strategy-review.pdf)

<sup>4</sup> <https://www.gov.uk/government/publications/channel-guidance>

- 4 As well as the views of the specified authorities, the consultation is seeking the views of stakeholders (such as the NMC) who work with the specified authorities contained within the proposals.

### **Our views on the consultation proposals**

- 5 We recognise the issue of terrorism is quite rightly a priority matter for the government to address. However, given our remit we have little opportunity to gain an insight into registrants' beliefs. Our core function of public protection is delivered through statutory functions to ensure nurses and midwives are safe and effective. The proposed general duty sits somewhat uncomfortably with this. We would therefore not wish to see an expansion of the general duty to apply to us, as may be suggested in other responses to question 19 of the consultation.
- 6 We do not believe that we have the day to day relationship necessary with nurses and midwives to effectively comply with the expectation of the health organisations listed in Schedule 3 of the draft Counter Terrorism and Security Bill, particularly employers. The organisations currently listed would therefore be better placed to effectively perform the general duty than us.
- 7 Currently, if there were concerns a person in the care of, or a colleague of, a nurse or midwife was at risk of radicalisation, we would consider that a matter for referral to the Police. If the concern was about a registered nurse or midwife, this would also be the case; if referred to us, we would disclose it to the Police and would be able to take action in line with our FtP processes against the registrant. The provisions within our legislation<sup>5</sup> and our Code<sup>6</sup> as it stands support this as an approach. We are able to consider convictions and ongoing legal proceedings in determining the suitability of persons to maintain registration with us. This forms part of a good health and good character assessment that we undertake<sup>7</sup>.

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<sup>5</sup> <http://www.nmc-uk.org/About-us/legislation/Our-Orders-and-Rules/>

<sup>6</sup> 'The Code: Standards of conduct, performance and ethics for nurses and midwives' places a duty on registrants to act and report to leadership any concerns they have that an individual may be putting another individual at risk – Page 5, 'Managing Risks' section <http://www.nmc-uk.org/Documents/Standards/The-code-A4-20100406.pdf>. To note, as of 31<sup>st</sup> March 2015 a revised Code will take effect. Section 16 of the revised Code contains equivalent provisions - <http://www.nmc-uk.org/Documents/NMC-Publications/NMC-Code-A5-FINAL.pdf>

<sup>7</sup> The Nursing and Midwifery Order 2001 (as amended) – Articles 5(2)(b) and 15(1)(b); The Nursing and Midwifery Council (Education, Registration and Registration Appeals) Rules 2004 (as amended) – Rules 5(1)(a), 6 and 13 - <http://www.nmc-uk.org/About-us/legislation/Our-Orders-and-Rules/>

## Annex A: NMC responses to consultation questions

### Consultation Section C: A risk based duty to the *Prevent* duty

1. *Are there other general points that should be addressed in this guidance?*

We have no comment to make.

### Consultation Section D: Monitoring and enforcement

2. *Are there further areas of activity that should be considered as part of the central monitoring arrangements?*

We have no comment to make.

3. *Which inspection bodies are best placed to monitor compliance with this duty?*

We have no comment to make.

### Consultation Section E: Sector specific guidance (local authorities)

4. *Are there additional local authorities that should be subject to the duty?*

We have no comment to make.

5. *Are there other areas of activity, or examples of good practice, that should be covered in this guidance?*

We have no comment to make.

6. *What other partners should local authorities be working with?*

We have no comment to make.

7. *Do you think these monitoring and enforcement arrangements are sufficient? If not, what arrangements would you like to see?*

We have no comment to make.

### Consultation Section E: Sector specific guidance (higher education)

8. *Are there other institutions, not listed here, which ought to be covered by the duty? Please explain why.*

We have no comment to make except that this proposal would cover the approved education institutions who deliver the majority of the approved qualifications required in order to gain registration with the NMC.

9. *Are there other areas of activity, or examples of good practice, that should be covered in this guidance?*

We have no comment to make.

10. *Do you agree that the Higher Education Funding Council for England is the appropriate body to monitor compliance with this duty?*

We have no comment to make.

11. *Are there other higher education regulatory bodies that should be involved in monitoring*

<i>compliance?</i>
We have no comment to make.

**Consultation Section E: Sector specific guidance (further education)**

<b>12.</b> <i>Are there other institutions, not listed here, which ought to be covered by the duty? Please explain why.</i>
We have no comment to make.
<b>13.</b> <i>Are there other areas of activity, or examples of good practice, that should be covered in this guidance?</i>
We have no comment to make.
<b>14.</b> <i>Do you agree that Ofsted should monitor compliance with this duty as part of their existing remit to inspect publically-funded further education colleges and independent training providers?</i>
We have no comment to make.
<b>15.</b> <i>Are there other bodies that should be involved in monitoring compliance with this duty?</i>
We have no comment to make.
<b>16.</b> <i>For those institutions not in receipt of public funding, which body do you think would be best placed to carry out this role?</i>
We have no comment to make.

**Consultation Section E: Sector specific guidance (schools – excluding higher and further education)**

<b>17.</b> <i>Are there other areas of activity, or examples of good practice, that should be covered in this guidance?</i>
We have no comment to make.
<b>18.</b> <i>Are there other areas of activity, or examples of good practice, that should be covered in this guidance?</i>
We have no comment to make.

**Consultation Section E: Sector specific guidance (the health sector)**

<b>19.</b> <i>Are there other institutions, not listed here, which ought to be covered by the duty? Please explain why.</i>
Please see our covering letter. We would not wish to see an expansion of the general duty to apply to us.
<b>20.</b> <i>Are there other areas of activity, or examples of good practice, that should be covered in this guidance?</i>
We have no comment to make.
<b>21.</b> <i>How could the existing healthcare and regulatory bodies monitor compliance with this duty?</i>

We have no comment to make, other than observing that the CQC currently carry out a comprehensive inspection programme in England covering health and care settings.

### **Consultation Section E: Sector specific guidance (prisons and probation)**

**22.** *Are there other institutions, not listed here, which ought to be covered by the duty? Please explain why.*

We have no comment to make.

**23.** *Are there other areas of activity, or examples of good practice, that should be covered for prisons and probation providers?*

We have no comment to make.

**24.** *How could existing inspectorates best monitor compliance with this duty?*

We have no comment to make.

### **Consultation Section E: Sector specific guidance (the Police)**

**25.** *Are there other areas of activity, or examples of good practice, that should be included for the police?*

We have no comment to make.