

NMC response to the NHS National Maternity Review's consultation

- 1 The Nursing and Midwifery Council (NMC) is the professional regulator for nurses and midwives in the UK. We exist to protect the public. We do this by maintaining a register of those qualified and suitable to practise as nurses and midwives, and setting standards for joining and remaining on the register. We investigate concerns about the practice of nurses and midwives and, where necessary, take action to protect the public.
- 2 We welcome the opportunity to respond to the NHS Maternity Review consultation¹. Given the remit of the NMC, not all questions are for us to provide a view on, and we answer from the perspective of the regulator of the midwifery profession.

What do we see as the barriers to providing high quality maternity services?

- 3 The review team is aware that a number of independent reports and reviews have called into question the additional tier of regulation that applies to the midwifery profession. We have called for legislative change to remove that tier from our framework and the government has announced a section 60 order.
- 4 When these changes take effect the NMC will be in direct control of midwifery regulation. This will simplify the landscape for service users wanting to raise issues or ask questions about their care.
- 5 The current framework provides for a model of supervision for midwives that encompasses regulatory activity (investigation and sanction) and the more supportive, developmental aspects more commonly associated with supervision. We commissioned an independent review of midwifery regulation from the King's Fund, who heard from midwives about the importance they attached in particular to these aspects of supervision. The Department of Health is convening a group including the four Chief Nursing Officers to develop proposals for a new, non-statutory model of supervision. The NMC is supportive of this development and suggests that access to high quality support and development for midwives (and others in the maternity pathway) is likely to contribute to high quality maternity services.
- 6 The NMC participates in the regional quality surveillance groups across England. When these important groups began their work, with the exception of instances of serious concern, maternity had a relatively low visibility. Encouragingly, that has changed considerably over the last year. We consider that evidence-based, objective oversight will make a strong contribution to high quality maternity services.

¹ https://www.engage.england.nhs.uk/survey/nhs-maternity-review/consult_view

- 7 We are conscious that the end of the current statutory supervision model leaves a number of matters for the sector's attention that have a bearing on the Review's question about barriers to safe maternity services. It will be important to plan for effective midwifery leadership, at the local, regional and national level, recognising that this has been a contribution made by local supervising authority midwifery officers.
- 8 The reform of our legislation will not change the protected title of midwifery or the offence of attendance on a woman in childbirth by non-specified persons. However, good quality maternity services are often characterised by the effective use of midwives in the ante and post-natal phases of care and effective commissioning of maternity services should have regard to the deployment of midwifery expertise at those critical times, as well as during childbirth.

What do we need to do to make maternity services better?

- 9 We can provide a response to this question from the perspective of the professional regulator of midwives, setting out the relationship between what we do and the quality of services our registrants provide.
- 10 We set standards for entry to the midwifery part of our register and we have recently begun the process of reviewing these. We will ensure that our review takes stock of the learning arising from high profile failings in maternity care. This will involve consideration of whether we need to strengthen aspects such as raising concerns and recognising signs of deterioration in the health of mothers and babies.
- 11 We have recently revised our Code which sets out the professional standards and behaviour expected of all registered nurses and midwives. We have also issued our first joint guidance with the General Medical Council, on the professional duty of candour. The adherence of registered professionals to Codes makes an important contribution to safety and quality in healthcare.
- 12 We are shortly introducing revalidation for nurses and midwives, which will involve registrants demonstrating their continuing fitness to practise, using third party confirmation, evidence of practice hours and continued professional development, and reflection on the Code with feedback from service users and colleagues.
- 13 We have launched a new Employer Link Service which will help us to work with employers to ensure we receive the referrals that require regulatory action, and employers deal effectively with issues of conduct and competence that do not meet that threshold.
- 14 In addition, we would note the important roles of the system regulators, employers and the sector to determine how Registered Midwives as individuals are collectively deployed and what roles they may undertake which makes use of the standards we have set. This includes ensuring that there are appropriate clinical governance and leadership arrangements for midwives and maternity services, and in supporting midwives in meeting their continuing registration requirements.