

MAPPING AND ASSESSMENT OF DEVELOPMENTS FOR ONE OF THE SECTORAL PROFESSIONS UNDER DIRECTIVE 2005/36/EC – NURSE RESPONSIBLE FOR GENERAL CARE (No 711/PP/GRO/IMA/18/1131/11026)

Survey Questionnaire

Name of the authority/association: The Royal College of Nursing

Name of the person: Charlotte Rogers

Position of the person: International Policy Manager

Country: United Kingdom

Date: 02 July 2019



1. What is the role of you organisation with regard to training and/or exercise of the profession of nurse responsible for general care in your country?

The RCN is a membership organisation of more than 435,000 registered nurses, midwives, health care assistants and nursing students. We are both a professional body, carrying out work on nursing standards, education and practice, and a trade union. Our members work in a range of health care specialties and settings in the NHS and independent sectors. We also have members based overseas, and members who are retired. Around 35,000 nursing students are members. We are governed by an elected Council of 17 members, chaired by Sue Warner, which delegates the running and management of the organisation to our Acting Chief Executive & General Secretary, Donna Kinnair. Our President, Anne Marie Rafferty, is a member of RCN Council. We are a Royal Charter body registered with the Privy Council and, because trade unionism is not our sole activity, we are on a special register of trade unions which means our rules differ slightly to other trade unions.

We represent

We represent the professional interests of nursing staff working in the public, private and voluntary sectors. We are on the NHS Staff Council, which negotiates pay, terms and conditions for NHS staff. We can also bargain for pay, terms and conditions with independent sector organisations. We are represented in social partnership arrangements in England, Scotland, Wales and Northern Ireland. Our stewards, safety reps and learning reps represent members across the UK and are supported and supervised by employment relations officers.

We support

We offer our members free, confidential advice and support on employment matters, career development, immigration, welfare and more.

We support and protect the diversity of the nursing profession by actively promoting inclusion. Our Diversity Champions programme is designed to give members the skills to make sure their organisations are inclusive. We provide accredited reps with the tools to challenge discrimination in the workplace.

We influence

We lobby governments and other bodies across the UK to develop, influence and implement policy that improves the quality of patient care.



Through our campaigns, we encourage health care officials and elected representatives to recognise the importance of nurses, health care assistants and nursing students in improving outcomes for patients.

We provide expert advice to parliamentarians on developing healthcare policies through legislation, select committees, all-party parliamentary groups and parliamentary briefings, and attend all of the major UK party conferences. We have no ties to any political party and we take pride in our political independence.

We develop

We promote and engage in nursing research, recognising that high quality nursing research has the power to transform patient care.

We have one of the largest specialist nursing libraries in Europe with access to over 64,000 books, 1,100 ejournals, 1,500 e-books and key nursing databases.

We maintain

We strive to be a sustainable, member-led organisation with the capacity to deliver our mission effectively, efficiently and in accordance with our values and core objectives.

2. What are the main scientific or technical advancements affecting the profession of nurse responsible for general care in the last 5-10 years?

We have <u>a movement within the UK to look at every nurse becoming an 'e nurse'</u> and supporting the nurses to address the skills deficit around clinical and information technology. The concept of an 'e nurse' can take many forms. It includes involving nursing and midwifery staff in the design and implementation of information technology, increasing access to education and training, and using data to improve care.

Data collection and storage is an area which has become pivotal to the nurses role at the bed side with areas of care delivery being supported by technology. Data collection and storage has become a daily part of the nurses role and the security and confidentiality requires a skilled and aware workforce. Future advancements which need to be addressed are the use and AI and the implications not only for diagnostics, but for the day to day delivery of care. This spans across all areas of health and social care supporting day to day care, diagnostics, data movement and storage, care delivery, patient contact and health promotion.



3. To which extent these advancements have been reflected in the training and practice of the profession in your country?

The countries are addressing the deficit in the above areas and require further investment and expertise support to promote this across the UK.

4. What are the sources of rules governing the professional training of nurses responsible for general care in your country that training institutions must respect? Please include full references of the sources: laws, administrative acts, teaching standards (full title, reference number, relevant provision or section and weblinks if available) and a translation of the title in English.

The regulatory body is the Nursing Midwifery Council. Other individual training bodies and Quality Assurance boards can be gained from University engagement in the study (Council of Deans). Each of the four countries address separate laws and standards.

5. Regarding the training of nurses responsible for general care, are there differences from one training institution to another across your country in relation to:

		YES	NO	DON'T KNOW	
•	Admission to training English and Maths remain at a standard grade	⊠			Differ between University and AEI providers.
•	Total number of years of study	\boxtimes			Course dependant
•	Duration of the theoretical training	\boxtimes			Course dependant
•	Duration of the clinical training hours.				For registered nurses the NMC guidance of 2300
•	Training subjects included in the curriculum this is QA'S by the NMC				Curriculum is formed from individual institutions but
•	Knowledge, skills and competences	\boxtimes			NMC regulated
•	Places where the clinical training optimise experience can be followed				NMC approved and led by clinical placements to



6. Subjects included in the national curricula:

The minimum training subjects harmonized on EU level for the profession of nurse responsible for general care are listed under point 5.2.1 of Annex V to Directive 2005/36/EC, as amended. EU/EFTA countries are bound to reflect them in their national curricula (while one or more of these subjects may be taught in the context of the other disciplines or in conjunction therewith). EU/EFTA countries may add additional subjects to the national training programmes going beyond this minimum.

6.1. In your view, what subjects going beyond the EU level minimum that are part of training programmes in your country have been introduced as a result of the scientific and technical progress affecting the nursing profession? Please justify your answer.

Information gained form HEI's and NMC. We do train and support the advanced and enhanced practitioners with CPD. https://www.rcn.org.uk/professional-development/advanced-practice-standards

6.2. Are there subjects that you would recommend adding to the national training programmes with a view to adapting them to the scientific and technical progress affecting the nursing profession?

The NMC standards have changed recently to adopt a new approach and no data on fitness for practice can be seen as yet as the commencement of courses are Sept 2019. https://www.nmc.org.uk/standards/standards-for-nurses/

7. Knowledge and skills required from nurse graduates in the majority EU/EFTA countries:

The minimum knowledge and skills harmonized on EU/EFTA level that nurse graduates should acquire during their training are listed in Article 31(6) of Directive 2005/36/EC, as amended. EU/EFTA countries are bound to reflect them in their national curricula and may add additional knowledge and skills to the national training programmes going beyond this minimum.

7.1. In your view, what knowledge and skills going beyond the EU level minimum that are part of training programmes in your country have been introduced as a result of the scientific and technical progress affecting the nursing profession? Please justify your answer.

New NMC standards and advanced practice as above



7.2. Is there any knowledge and/or skill that you would recommend adding to the national training programmes with a view to adapting them to the scientific and technical progress affecting the nursing profession?

As above

8. In your view, does the minimum list of subjects (training programme) harmonized on EU level as currently listed under point 5.2.1 of Annex V to Directive 2005/36/EC, as amended, provide sufficient assurance that each of the knowledge and skills listed under Article 31(6) as well as each of the competences listed under Article 31(7) of the Directive can be acquired in an adequate fashion? If no, please provide a justification and suggest how the minimum list of training subjects listed in point 5.2.1 of Annex V to the Directive could be improved to cater for the minimum knowledge, skills and competences required under the Directive.

Knowledge, skills and competences (Art.31(6)-(7) of Directive 2005/36/EC)	List of training subjects (Annex V to Directive 2005/36/EC)	Your answer			
Knowledge and skills: (a) comprehensive knowledge of the sciences on which general nursing is based, including sufficient understanding of the structure, physiological functions and behaviour of healthy and sick persons, and of the relationship between the state of health and the physical and social environment of the human	Does the minimum list of training subjects adequately cater for each of the minimum harmonized skills, knowledge and competences under Directive 2005/36/EC? Please provide an answer for each of the training subjects mentioned below. If the answer is "no", please provide a justification and suggest any necessary improvements.				
	THEORETICAL TRAINING				
being;	Nursing:				
(b) knowledge of the nature and ethics of the profession and of the general principles of health and nursing;	Nature and ethics of the profession	Yes ⊠ No□ Don't Know□ If "no", please provide a justification and suggest any necessary improvements.			
(c) adequate clinical experience; such experience, which should be selected for its training value, should be gained under the supervision of qualified nursing staff and in places where the number of qualified staff	General principles of health and nursing	Yes X No□ Don't Know□ If "no", please provide a justification and suggest any necessary improvements.			
and equipment are appropriate for the nursing care of the patient;	Nursing principles in relation to general and specialist medicine	Yes ⊠ No□ Don't Know□			



		If "a" places provide a justification and suggest any		
d) the ability to participate in the practical training of nealth personnel and experience of working with such personnel;		If "no", please provide a justification and suggest any necessary improvements.		
	Nursing principles in relation to general and specialist surgery	Yes ⊠ No□ Don't Know□		
(e) experience of working together with members of other professions in the health sector.		If "no", please provide a justification and suggest any necessary improvements.		
Competences:	Nursing principles in relation to child	Yes ⊠ No□ Don't Know□		
a) competence to independently diagnose the nursing care required using current theoretical and clinical knowledge and to plan, organise and	care and paediatrics	If "no", please provide a justification and suggest any necessary improvements.		
implement nursing care when treating patients on the	Nursing principles in relation to	Yes ⊠ No□ Don't Know□		
basis of the knowledge and skills acquired in accordance with points (a), (b) and (c) of paragraph 6 in order to improve professional practice; (b) competence to work together effectively with other actors in the health sector, including participation in the practical training of health personnel on the basis of the knowledge and skills acquired in accordance with points (d) and (e) of paragraph 6;	maternity care	If "no", please provide a justification and suggest any necessary improvements.		
	Nursing principles in relation to mental	Yes ⊠ No□ Don't Know□		
	health and psychiatry	If "no", please provide a justification and suggest any necessary improvements.		
	Nursing principles in relation to care of	Yes ⊠ No□ Don't Know□		
	the old and geriatrics	If "no", please provide a justification and suggest any necessary improvements.		
(c) competence to empower individuals, families and	Basic sciences:			
groups towards healthy lifestyles and self-care on the basis of the knowledge and skills acquired in accordance with points (a) and (b) of paragraph 6;	Anatomy and physiology	Yes ⊠ No□ Don't Know□		
		If "no", please provide a justification and suggest any necessary improvements.		
(d) competence to independently initiate life- preserving immediate measures and to carry out	Pathology	Yes ⊠ No□ Don't Know□		
easures in crises and disaster situations; competence to independently give advice to,		If "no", please provide a justification and suggest any necessary improvements.		
instruct and support persons needing care and their	Bacteriology, virology and parasitology	Yes ⊠ No□ Don't Know□		
attachment figures;		If "no", please provide a justification and suggest any necessary improvements.		



f) competence to independently assure the quality of, and to evaluate, nursing care; g) competence to comprehensively communicate professionally and to cooperate with members of other professions in the health sector; h) competence to analyse the care quality to improve his own professional practice as a nurse responsible for general care.	Biophysics, biochemistry and radiology	Yes ⊠ No□ Don't Know□ If "no", please provide a justification and suggest any necessary improvements.		
	Dietetics	Yes ⊠ No□ Don't Know□ If "no", please provide a justification and suggest any necessary improvements.		
	Hygiene preventive medicine	Yes ☑ No□ Don't Know□ If "no", please provide a justification and suggest any necessary improvements.		
	Hygiene health education	Yes ⊠ No□ Don't Know□ If "no", please provide a justification and suggest any necessary improvements.		
	Pharmacology	Yes ⊠ No□ Don't Know□ If "no", please provide a justification and suggest any necessary improvements.		
	Social sciences:			
	Sociology	Yes ⊠ No□ Don't Know□ If "no", please provide a justification and suggest any necessary improvements.		
	Psychology	Yes ⊠ No□ Don't Know□ If "no", please provide a justification and suggest any necessary improvements.		
	Principles of administration	Yes ⊠ No□ Don't Know□ If "no", please provide a justification and suggest any necessary improvements.		
	Principles of teaching	Yes ⊠ No□ Don't Know□		



	If "no", please provide a justification and suggest any necessary improvements.
Social and health legislation	Yes ⊠ No□ Don't Know□ If "no", please provide a justification and suggest any necessary improvements.
Legal aspects of nursing	Yes ⊠ No□ Don't Know□ If "no", please provide a justification and suggest any necessary improvements.
CLINICAL TRAINING	
Nursing in relation to:	
General and specialist medicine	Yes ⊠ No□ Don't Know□ If "no", please provide a justification and suggest any necessary improvements.
General and specialist surgery	Yes ⊠ No□ Don't Know□ If "no", please provide a justification and suggest any necessary improvements.
Child care and paediatrics	Yes ⊠ No□ Don't Know□ If "no", please provide a justification and suggest any necessary improvements.
Maternity care	Yes ⊠ No□ Don't Know□ If "no", please provide a justification and suggest any necessary improvements.
Mental health and psychiatry	Yes ⊠ No□ Don't Know□ If "no", please provide a justification and suggest any necessary improvements.
Care of the old and geriatrics	Yes ⊠ No□ Don't Know□



	If "no", please provide a justification and suggest any necessary improvements.		
Home nursing	Yes ⊠	No□	Don't Know□
	-	ease provide improveme	a justification and suggest any nts.

9. In order to take account of generally acknowledged scientific and technical progress, would you suggest updates to the minimum knowledge, skills and/or the list of minimum training subjects harmonized on EU level (Directive 2005/36/EC), and if yes, to what extent?

Yes, there should be updates every 3-5 years in line with usual education standards.

10. Please add other comments about the current state of education and training for general nursing students in your country. In particular, if any important changes to the teaching standards and other rules governing the training for nurses responsible for general care are currently under discussion.

As stated we have new NMC standards and the courses are commencing September 2019. We will need to review. The two main areas of concern are the lack of nurses in the profession and the removal of CPD funding leaving the workforce without supportive time or resources to maintain lifelong learning and professional development.