[Date]

Post-Registration Standards Consultation

Professional Practice Directorate

Nursing and Midwifery Council

23 Portland Place

London

W1B 1PZ

Via email to consultations@nmc-org.uk

Dear Colleagues,

**NMC Proposed Post-Registration Standards for Specialist Practitioner Qualifications**

Thank you for the opportunity to contribute to the Post-Registration Standards consultation with a letter in addition to the online survey.

I am [detail here your role, whether you manage other nursing and healthcare professionals and the challenges you face day-to-day].

I am writing to express my concerns that there are proposed to be no field-specific (‘bespoke’) standards of proficiency for individual specialist areas of nursing, including the field in which I work.

My principal concern is that there is an assumption that all nursing roles in the community, primary and social care are very similar in the knowledge and skills required and that the specific nature and scope of the work we undertake is simply limited to a development of the competencies for initial registration.

Community Specialist Practitioners are autonomous practitioners working at an advanced level, providing care for people with complex health needs and each role requires a unique set of knowledge and skills. In addition, nurses leading and managing other well-established nurse-led community services, such as my field of Inclusion Health Nursing/ Care Home Nursing [delete as appropriate] require field-specific standards to support their education and practice too: this would ensure both parity of esteem and clarity for all community nursing Specialist Practitioner Qualifications.

The Queen’s Nursing Institute, RCN and other groups have articulated some of the specific standards required for the five existing specialist roles and raised concerns about the lack of annotation – and field-specific standards of proficiency – for Inclusion Health Nursing/Care Home Nursing [delete as appropriate]. I completely agree with this position and as an experienced practitioner working in this area, I know that this is a missed opportunity to demonstrate the distinctive knowledge and skills required for this leadership role.

Furthermore, I am seriously concerned that:

a. Without specific standards of proficiency there will be greater variation in practice and specialist practitioners will not be adequately prepared for their roles as leaders of specific nurse-led services.

b. NHS services will be less able to deliver on national policy requirements, such as the NHS Long Term Plan in England, which all community nurses contribute to, whatever their specialism.

c. Widespread variation in courses offered by different Approved Educational Institutions (AEIs) will introduce unwarranted variation in care provision, as there will be no field-specific standards of proficiency against which to judge their appropriateness to the qualification awarded. The purpose of national professional standards of proficiency is to ensure standardised provision, from which healthcare in our country currently benefits.

I urge the Nursing and Midwifery Council to reconsider its position regarding field-specific standards of proficiency and annotations for Care Home Nursing/Inclusion Health Nursing [delete as appropriate] and work with the professionals in our fields of practice, to ensure that the standards accurately reflect the work as it is done. In this way, the care of people in the community and their families will be given the most secure regulatory foundations.

Yours faithfully,

**[Print Name]**

**[Designation]**