

NMC Independent Oversight Group

Summary of Meeting held on 29 April 2025

1. Welcome

- 1.1 The Chair welcomed members to the group and noted apologies. The Chair welcomed Amanda Partington-Todd as Interim Director of Regulation and Accreditation at the PSA, who is covering for Graham Mockler whilst he is on sabbatical.
- 1.2 The Chair reminded members of the importance of transparency to the work of the group. It was noted that a lack of transparency would mean that the group cannot perform its work effectively.

2. Introduction from the new Chair of the NMC (Ron Barclay-Smith)

- 2.1 The Chair welcomed Ron Barclay-Smith, the new Chair of the NMC, to the group.
- 2.2 The Chair of the NMC confirmed that he was appointed by the Privy Council on 1 April 2025. In his short time at the NMC so far, he has observed a willingness to turn things around and that NMC staff are embracing the journey.
- 2.3 The Chair of the NMC emphasised the regulator's core role of protecting the public, and noted that the NMC needs to work closely with the profession to understand the pressures and issues registrants are facing.
- 2.4 The Chair of the NMC emphasised that transparency is part of the trust gaining mechanism that the NMC must adhere to in delivering for its registrants and the public.
- 2.5 The NMC Interim Chief Executive and Registrar also emphasised the importance of transparency, and acknowledged the NMC's and the group's frustration at the delay to the Ijeoma Omambala KC reports. The NMC Interim Chief Executive and Registrar noted that the reports have been delayed for various reasons, mostly around HR processes, however these have now been resolved and the final outstanding HR report has been submitted to Ijeoma Omambala KC. The NMC is having conversations with Ijeoma Omambala KC to garner an understanding of her estimated timetable for the reports' publication.
- 2.6 The Chair asked that the group be informed as soon as possible when the NMC has an indication of Ijeoma Omambala KC's estimated timetable for the reports' publication.

ACTION: NMC to notify the group as soon as possible when it has an indication of Ijeoma Omambala KC's estimated timetable for the reports' publication.

- 2.7 The NMC Interim Chief Executive and Registrar also noted that Professor Donna O'Boyle has been appointed as Acting Director for Professional Practice. The NMC emphasised the value of registrants in its work, and said that Donna

O'Boyle's experience as a frontline nurse with experience in governance and risk and as part of the Scottish Government will be a valuable asset in this area of work.

3. Safeguarding update (NMC)

- 3.1 The NMC presented an update on its safeguarding work. It noted that the Independent Culture Review (ICR) made a number of recommendations in connection with safeguarding, and in response the NMC undertook a stocktake of its safeguarding responsibilities and activities in January 2025.
- 3.2 The purpose of the stocktake was to provide assurance that the NMC is meeting its safeguarding obligations, while at the same time fulfilling its statutory role to protect the public. The NMC determined that this work would focus on FTP because: this is where its safeguarding risks sit; and to provide assurance that its safeguarding approach aligns with its commitments to progress FTP cases more quickly and improve its culture.
- 3.3 The Chair asked why it took the NMC seven months to commence the stocktake exercise, when the ICR recommended that an urgent review be undertaken in July 2024. Group members agreed that the issue of urgency and pace was important.
- 3.4 The NMC said that its FTP, safeguarding and legal teams were working in a siloed fashion, and prior to the stocktake it identified the need to integrate these teams. It also took time to reflect on its legal responsibilities and how that applies to its regulatory responsibilities and sought external advice on these points.
- 3.5 The NMC held workshops to better understand what its safeguarding responsibilities are: to develop a safeguarding risk management framework; and to consider any gaps and the plan for addressing these.
- 3.6 The NMC stated that its statutory role as a regulator and its legal responsibilities fall into two brackets. First, its core responsibility to protect the public, which includes setting standards and ensuring these are maintained, and through cooperation with safeguarding agencies. And second, ensuring it complies with the Charity Commission's obligations, which includes protecting people who engage with the NMC (for example through its FTP process) and protecting its staff.
- 3.7 The NMC also highlighted its duty to report serious safeguarding incidents and being able to recognise safeguarding concerns that arise as part of whistleblowing disclosures. The NMC said that its safeguarding responsibilities do not extend to the same degree as those offering frontline healthcare services, and its responsibility to cooperate with other authorities, including sharing FTP information, is limited to the extent that it is appropriate and reasonable. The NMC also asserted that sharing information and fulfilling Charity Commission obligations should not divert the NMC from carrying out its own statutory role, for example to investigate and take appropriate action in relation to FTP concerns, but should instead complement it.

- 3.8 Group members expressed some concern at the limitations in the NMC's approach. The group agreed that the NMC also has a moral obligation to protect people, and noted the need for legal responsibilities to be applied in practice. Some group members noted the need to ensure the NMC articulates its safeguarding approach to registrants, as well as the public.
- 3.9 The NMC said its safeguarding hub will enable it to identify safeguarding concerns, and where these are not for the NMC to act upon, it will take reasonable and appropriate steps to share information with the relevant agencies so the risks can be managed effectively. The safeguarding hub assesses all new FTP referrals through a safeguarding lens, and is supported by clinical and safeguarding advisers.
- 3.10 The NMC holds fortnightly meetings with its safeguarding, operations and legal teams to discuss challenging issues and complex cases.
- 3.11 Aside from the hub, the NMC has established a safeguarding referral form and inbox managed by a safeguarding adviser, as well as a helpline for urgent and emergency concerns. It has also rolled out a communications strategy with clear signposting for its staff.
- 3.12 Throughout the stocktake, the NMC identified the following gaps in FTP in relation to safeguarding: a lack of understanding around safeguarding responsibilities; effective implementation of the safeguarding policy and process; training and knowledge gaps; resourcing; and the process for sharing information.
- 3.13 The NMC has reviewed its risk management framework with support from an external legal firm, and an updated version setting out its vision for safeguarding will be presented to Council in May 2025. It has also developed a safeguarding plan, focusing on the following key areas: risk and governance; policy and processes; safeguarding function; education; learning; management of sensitive data; and stakeholder engagement. Each action has a prioritisation rating according to the level of risk.
- 3.14 The Chair noted that the gaps identified by the NMC, and the safeguarding plan to address these, will be a key priority of the group moving forwards.
- 3.15 Group members enquired as to the timeliness of the safeguarding hub in reviewing referrals, noting the significant backlog of referrals in the NMC's caseload. The NMC said that it reviews referrals one week after they are logged at the screening stage, and that the backlog of cases to be reviewed by the safeguarding hub is reducing.
- 3.16 Group members noted the NMC's concerns around resourcing, particularly in the context of sustained high numbers of referrals, and asked whether this issue will be raised with the NMC Council.
- 3.17 Group members also noted that NMC staff need to be protected when handling sensitive and distressing cases. The NMC said that it has been working with the Samaritans to better understand decompression, and intimated that it plans to embed decompression sessions into staff diaries. This work has been supported by the NMC's mental health practitioner and first aiders.

- 3.18 Group members asked whether the NMC has investigated cases where the registrant has died by suicide. The NMC confirmed that it has reviewed all cases involving suicide, and said that it has identified ways of better recognising vulnerabilities.
- 3.19 Group members enquired as to what risks have been identified since the safeguarding hub was established, and if the NMC has undertaken an evaluation of the impact of the hub so far. The NMC stated that the highest risks identified have been in relation to sexual misconduct, domestic abuse and physical abuse against children. Group members requested sight of the safeguarding hub data so far, which the NMC agreed to share separately with the CNOs on a country-by-country basis. The NMC also confirmed that an evaluation of the safeguarding hub is due to commence soon, and it has already been collecting impacts and outcomes to prepare for this.

4. Fitness to Practise update, including data action (NMC)

- 4.1 The NMC presented an update on its FTP work. The group received a paper setting out the latest data in advance of the meeting. The NMC is holding an awayday with its Council to discuss its work on the oldest cases, and will present an update on these to the group at a future meeting. Group members noted that the oldest cases represent an elevated risk, and that the group has not received any data on these. The group requested detailed data on the oldest cases, and agreed that it will consider this at a future meeting.

ACTION: NMC to present an update, including detailed data, on its oldest FTP cases at a future meeting.

- 4.2 The NMC has seen progress in the number of screening decisions and in terms of its KPI to close cases within 15 months. There has been a reduction in the age profile of the caseload at the screening and case examiners stages, and the number of cases awaiting allocation has reduced significantly; resulting in more cases processing to a decision point or final adjudication.
- 4.3 However, the NMC is facing an increased and sustained number of referrals, around 100 more than was anticipated when the FTP improvement plan was launched. There are more cases at the investigation stage compared to screening for the first time since the pandemic. PwC has provided support on casework at screening, and a business case is being developed for similar casework support in investigations, with a focus on unallocated cases.
- 4.4 The NMC acknowledged that investigations is currently a challenging area, and it has undertaken a diagnostic with PwC from which recommendations are currently being drawn out.
- 4.5 The caseload in adjudications and the length of hearings are increasing. The NMC accepted that this area of the process is currently off-track, with over 80% of cases at this stage over 18 months old. A range of interventions is being considered, with a focus on improving efficiency.
- 4.6 The NMC indicated that the next iteration of the FTP improvement plan will be presented to Council in May, with decisions then to be taken as to next steps

and interventions. Council will make its final approval decision in June, following which the NMC will present its revised FTP improvement plan to the group. This will include a forecast trajectory of caseload and timeliness.

ACTION: NMC to present its revised FTP improvement plan to the group when approved by Council.

- 4.7 Group members discussed the sustained high numbers of referrals, and noted that this is a theme across a number of other regulators. The group suggested that the NMC consider what more can be done to reduce inappropriate referrals. Group members noted that they, in their professional capacity outside the group, have a responsibility to help prevent inappropriate referrals.
- 4.8 Group members noted the differences between NHS and social care, and emphasised the need for a different approach in addressing inappropriate referrals in this sector.
- 4.9 The NMC said that its new guidance on screening thresholds will launch in the week commencing 5 May, and it anticipates that this will have a significant impact on the number of cases reaching the investigations stage. The guidance will enable the NMC to refer cases back to employers if it determines that the case is not appropriate for its FTP process. The NMC said that some concerns have been raised in connection with this, however it is assured that its Employer Link Service will manage this effectively. The NMC emphasised that it does not intend to create barriers to referrals, and indicated that it is engaging with stakeholders to help define what is, and is not, a reasonable referral for the NMC to investigate.
- 4.10 The NMC also acknowledged that the turnover in Professional Practice has stalled a few pieces of work, and Donna O'Boyle will be picking up the issue of where to take clinical advice in the FTP process in her new role.
- 4.11 The NMC noted that its registration fee has been fixed for a number of years, which has resulted in a real terms decrease in income. It said that its work with PwC had led it to consider what further investments may be required to support FTP in the future.

5. Culture update (NMC)

- 5.1 The culture transformation plan was published on 19 March 2025, having been scrutinised by the group on 12 March. The Chair noted that the group had received the plan as part of the papers, and that it reflected the group's comments made at the meeting on 12 March.
- 5.2 The NMC said that feedback on the plan had been helpful, and emphasised the importance of working together. The NMC also noted that it has signed the Unison Anti-Racism Charter on 14 April.
- 5.3 The NMC launched a consultation with its staff on hybrid working to ensure consistency of attendance in the office, which was highlighted in the ICR as a means of developing a strong and effective culture. The NMC is also consulting its staff on its new values.

6. AOB

- 6.1 The Chair noted that the next meeting, on 25 June, will consider the NMC's progress against the ICR's recommendations, with this falling almost a year since its publication.

Annex 1: Attendee list

Organisation/Role	Name
Chief Nurse for Adult Social Care, DHSC	Deborah Sturdy
CNO England	Duncan Burton
CNO Scotland	Anne Armstrong
CNO Wales	Sue Tranka
Deputy CNO NI	Mary Frances McManus (deputising for Maria McIlgorm)
CMidO England	Kate Brintworth
CMidO Wales	Karen Jewell
CMidO NI	Caroline Keown
DHSC	Aisling Fox (deputising for Phil Harper)
Welsh Government	Ian Owen
DoH NI	Peter Barbour
NMC Interim Chief Executive and Registrar	Paul Rees
NMC Chair, Council	Ron Barclay-Smith
NMC Chief of Staff	Matt Hayday
NMC Executive Director of Professional Regulation	Lesley Maslen
NMC Deputy Director, Professional Regulation	Paul Johnson
NMC Acting Executive Director of Strategy and Insight	Emma Westcott
NMC Assistant Director, Culture Transformation	Charlotte Eimer
NMC Employee Forum Co-Chair	Colette Howarth
NMC Safeguarding Clinical Advisor	Nicola Burns-Muir
NMC Deputy General Counsel	Miranda Stotesbury
NMC	Noita Sadler
NMC	Roberta Beaton
PSA Chief Executive	Alan Clamp
PSA Interim Director of Regulation and Accreditation	Amanda Partington-Todd
RCN, Chief Nursing Officer	Lynn Woolsey
Unite	Dave Munday
Unison NMC staff representation	Anne Carvalho
Unison registrants representation	Gail Adams
Expert- NHS England, National Maternity Lead for Equality	Wendy Olayiwola
Expert- Chief Executive, Patient Safety Learning	Helen Hughes

Expert- Strategic Director, Llais

Ben Eaton

Annex 2: Action Log

On track (including not started) Delayed (or medium risk of delay for projects) Overdue (or high risk of delay for projects) Complete

Mtg. Date	Item No.	Action point	Owner	Date required	Action progress	Status
9 September 2024	2.9	Circulate new version of Terms of Reference to the Group for agreement	PSA Secretariat	13 September 2024	Complete (13 September 2024).	
9 September 2024	3.2	Members to send suggestions for experts to the PSA	All members	16 September 2024	Complete (16 September 2024).	
9 September 2024	3.2	Experts: compile list of suggestions and seek expressions of interest	PSA Secretariat	19 September 2024	Complete (20 September 2024).	
9 September 2024	4.1	NMC to share a version of the action plan with the Group	NMC	As soon as possible (date TBC)	Complete (20 September 2024). The NMC made the action plan materials going to Council available in parallel with the publication of Council papers, making clear that Council would be approving the plan in principle but that the document would be liable to further adjustment and refinement in	

					the light of the Group's comments and wider discussion	
2 October 2024	2.2	NMC to share the detailed version of the fitness to practise improvement plan with the group in advance of the meeting on 18 October 2024	NMC	TBC	Complete (16 October 2024)	
2 October 2024	2.14	PSA secretariat to include an agenda item on the NMC's governance structure and assurance framework at the IOG meeting in November	PSA secretariat	1 week in advance of the IOG meeting in November (date TBC)	Complete (20 November 2024)	
2 October 2024	3.1	PSA secretariat to share a list of experts who have expressed an interest in joining the group	PSA secretariat	3 October 2024	Complete (3 October 2024)	
2 October 2024	3.1	PSA secretariat to review expressions of interest from experts and make a recommendation to the group	PSA secretariat	11 October 2024	Complete (9 October 2024)	
18 October 2024	3.1	PSA secretariat to arrange the next meeting as soon as possible.	PSA secretariat	TBC (November)	Complete (25 October 2024)	
28 November 2024	2.23	PSA secretariat to include an agenda item on the NMC's fitness to practise performance at the next meeting	PSA secretariat	31 January 2025	Complete (31 January 2025)	
28 November 2024	2.23	NMC to provide EDI data on the FTP caseload at the next meeting	NMC	31 January 2025	Complete (31 January 2025)	
28 November 2024	3.1	PSA secretariat to arrange the group's next meeting in the week ending 24 January or 31 January	PSA secretariat	31 January 2025	Complete – meeting scheduled	

					for 31 January 2025	
31 January 2025	3.8	PSA secretariat to include an agenda item for an update on the Ijeoma Omambala KC reports at the next meeting	PSA secretariat	12 March 2025	Complete (12 March 2025)	
31 January 2025	4.10	NMC to provide the group with insights from its data cleansing work at a future meeting	NMC	12 March 2025	Complete (12 March 2025)	
31 January 2025	4.10	NMC to provide the group with FTP scorecard data at future meetings	NMC	12 March 2025	Complete (12 March 2025)	
12 March 2025	2.5	PSA secretariat to include an item on the FTP dashboard data at the next meeting covering FTP as a substantive item	PSA secretariat	TBC		
12 March 2025	3.7	NMC to share its paper on safeguarding with the group	NMC	29 April 2025	Complete (29 April 2025)	
12 March 2025	5.5	NMC to notify the group when it receives the Omambala reports	NMC	TBC		
12 March 2025	8.5	PSA secretariat to include an item on frequency of meetings at the June meeting	PSA secretariat	25 June 2025		
29 April 2025	2.6	NMC to notify the group as soon as possible when it has an indication of Ijeoma Omambala KC's estimated timetable for the reports' publication	NMC	TBC		
29 April 2025	4.1	NMC to present an update, including detailed data, on its oldest FTP cases at a future meeting	NMC	TBC		
29 April 2025	4.6	NMC to present its revised FTP improvement plan to the group when approved by Council	NMC	TBC		

