

# Towards a Framework for Post-registration Nursing Careers

*consultation response report*

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# Towards a Framework for Post-registration Nursing Careers

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# Foreword

*Modernising Nursing Careers*<sup>1</sup> was published in 2006 in response to the rapidly changing context in which nursing is practised. As professionals we want to be able to deliver high quality care to patients and users. An important part of our work on *Modernising Nursing Careers* was about how careers can be organised in future to be satisfying and rewarding while also helping to retain skilled nurses to deliver high quality care.

Since 2006, we have talked with many nurses and stakeholders at national and regional events to explore what should happen and how careers should be structured in the future. This report presents the findings of that national public consultation.

We were delighted with the range of thoughtful responses we received. These have stimulated our thinking and will lead to further work to take many of the ideas forward. The consultation has also informed *High Quality Care for All*<sup>2</sup>, Lord Darzi's final report of the NHS Next Stage Review.

We are also publishing our equality impact assessment on the post-registration nursing careers proposals at the same time.

There has been widespread support for the idea of a framework which shows how nurses could progress in their careers to suit patient and organisational need, personal circumstances and aptitude. As the ideas put forward represent a radical change for our profession, we wanted to consult widely before initiating action.

I would like to thank all of you who took the time to respond to our consultation and can assure you of our commitment to working with you, so that together, we can do what is best for the professions and for patients now and into the future.

1 *Modernising Nursing Careers: setting the direction*, Department of Health, 2006.

2 *High Quality Care for All: NHS Next Stage Review final report*, Department of Health, 2008.



**Dame Christine Beasley**  
Chief Nursing Officer (England)



# Executive summary

**This paper summarises the results of the consultation held to gauge opinion on proposals to introduce structure and standards into post-registration nursing careers.**

The main proposals were that careers in nursing should:

- be structured within five pathways: children, families and public health; first contact, access and urgent care; long term care; acute and critical care; mental health and psychosocial care
- have clear standards and corresponding levels of education for the newly registered through to advanced practice
- define core competencies for each stage of practice so that nurses could move more flexibly between different clinical areas.

Responses were received from stakeholder organisations and from a cross-section of the profession. Some challenging questions were posed, to which this paper aims to provide answers.

Overall, there was wide support for change, and for standardisation, particularly at advanced levels. There was cautious agreement for structuring careers within patient pathways, though many wanted more work to be undertaken to identify the implications and practicalities, before finally deciding on the appropriateness of this, and the value of one set of pathways over another.

The Next Stage Review now provides a vehicle for taking forward the work that will be needed if radical change is to be made to the way nurses are developed, educated and prepared for a life-long career in nursing.

# Introduction

This report follows the public consultation on proposals for a new framework for post-registration nursing careers which was carried out as part of the Modernising Nursing Careers programme.

The consultation, *Towards a Framework for Post-Registration Nursing Careers*<sup>3</sup> was launched in England by the Rt Hon Alan Johnson MP, Secretary of State for Health on 1 November 2007.

Building on *Modernising Nursing Careers*, and a series of national and regional stakeholder events, it explored a number of questions. These included whether nursing careers should be organised within patient pathways and whether levels of practice should be standardised at thresholds of initial registration and at advanced levels of practice.

Since work on the Modernising Nursing Careers programme began, the government launched the NHS Next Stage Review. The issues raised by stakeholders through the work of Modernising Nursing Careers have informed the Review and are set out in *High Quality Care for All* and the accompanying workforce document, *A High Quality Workforce*<sup>4</sup>, and the primary and community care strategy *Our Vision for Primary and Community Care*<sup>5</sup>.

The implementation of the Next Stage Review offers a platform for taking forward the changes people have said they want to see and will achieve consistency with other healthcare professions for the benefit of patients and the public.

3 Towards a Framework for Post-Registration Nursing Careers, Department of Health, 2007.

4 A High Quality Workforce: NHS Next Stage Review, Department of Health, 2008.

5 NHS Next Stage Review: Our Vision for Primary and Community Care, Department of Health, 2008.

## NHS Next Stage Review: working groups

### *Eight local clinical pathway groups:*

1. Birth
2. Children
3. Staying healthy
4. Long term conditions
5. Acute episode
6. Planned care
7. Mental health
8. End of life care

### *National working groups:*

1. Quality improvement
2. Innovation
3. Primary and community care strategy
4. Workforce planning, education and training
5. Leadership
6. Informatics
7. Systems and incentives

This report is divided into two main sections:

Section one – The findings of the consultation

Section two – A discussion of the issues raised and what will happen next

# The consultation

The publication of *Modernising Nursing Careers* in 2006 set the scene for a radical review of nursing careers. Never before has a whole-scale review of careers in nursing been considered – from entry into training through the whole of a nurse's working life.

The principles of *Modernising Nursing Careers* were welcomed and supported by the professions, the UK Health Departments, the Nursing and Midwifery Council, the Council of Deans and a wide range of organisations who all contributed ideas for taking the work forward.

Four main priority areas for action were identified:

- Develop a competent, stable and flexible nursing workforce.
- Update career pathways and career choices.
- Prepare nurses to lead in a changed healthcare system.
- Modernise the image of nursing and nursing careers.

These generated a series of actions including:

- Reviewing the content and level of pre-registration education.
- Reviewing career pathways for all nurses and considering specialist and advanced practice and nursing in the community.
- Working with stakeholders to map nursing roles and competencies.
- Reviewing educator roles and career paths spanning service and education.
- Developing fast-track schemes for future nurse leaders.
- Communicating key messages about nursing and nursing careers to the public.

Modernising Nursing Careers is a UK-wide initiative, and we are continuing to work with Northern Ireland<sup>6</sup>, Scotland<sup>7</sup> and Wales<sup>8</sup> on all the actions. However, the Department of Health's career framework consultation which we are reporting on here, is the proposal for England.

In parallel with this consultation, as part of Modernising Nursing Careers, the NMC consulted on a review of pre-registration education<sup>9</sup> and are reporting those findings separately.

6 [www.dhsspsni.gov.uk](http://www.dhsspsni.gov.uk)

7 [www.scotland.gov.uk](http://www.scotland.gov.uk)

8 [www.wales.gov.uk](http://www.wales.gov.uk)

9 Review of Pre-registration Nursing Education, Nursing and Midwifery Council, 2007.

**The NMC consulted on a number of issues that included:**

- Whether the nursing register should be set at degree rather than diploma level.
- Whether the present four branch programmes remain fit for purpose.
- Whether the branch programmes provide the best way of preparing the future nursing workforce.
- What proportion of a pre-registration programme should be spent learning in practice.
- Arrangements for stepping on and off programmes.
- Whether, following initial registration, there should be mandatory consolidation period set by the NMC.

There is, of course, a synergy between changes to pre-registration programmes and subsequent careers. It has therefore been helpful that the two consultations have taken place at the same time and you may want to consider the outcomes of both together.

# 1. What you told us:

## findings from the post-registration careers consultation

In this section we set out the main findings of the consultation. A detailed report of the findings is published as a separate document and can be accessed at [www.cdhpp.leeds.ac.uk](http://www.cdhpp.leeds.ac.uk)

A three-month public consultation was held between November 2007 and February 2008. All responses were handled and analysed independently by the University of Leeds Centre for the Development of Health Care Policy and Practice.

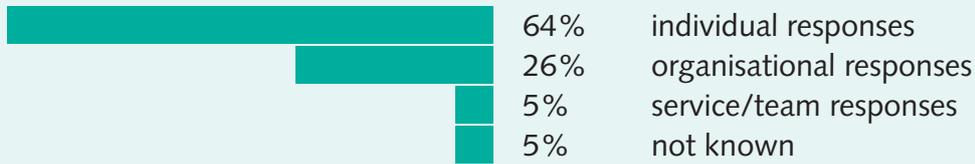
Overall, 589 responses were received to the consultation, of which 31% were on behalf of organisations or groups. Respondents represented both acute and community settings, male and female staff and tended to represent an older, longer-serving part of the overall nursing population.

Individual responses came from a good cross-section of the profession with trends reflecting the general distribution of staff across the NHS. Many of the respondents were very experienced nurses with a good educational background and efforts were made throughout the consultation to increase the diversity of responses.

The demographic information gathered by the consultation, such as ethnicity, age, qualification and gender, is only applicable to, and has only been reported against, the individual responses.

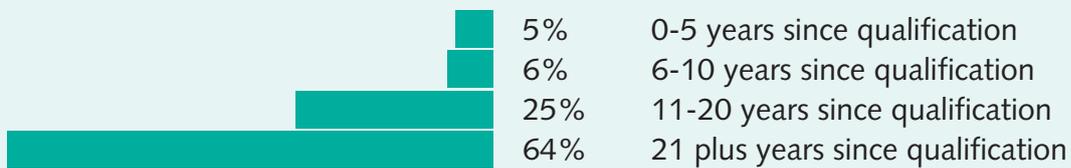
## Summary of responses

589 total number of responses

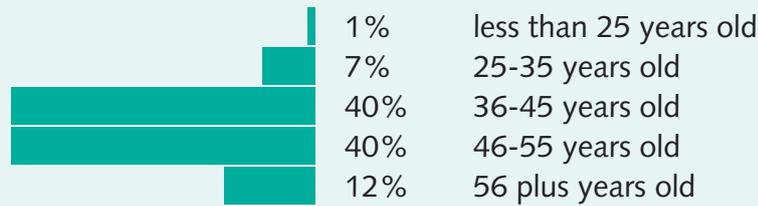


## Profile of respondents

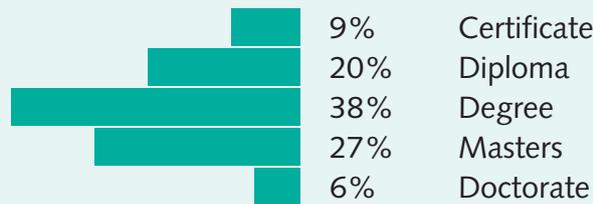
Time since qualification



Age profile of respondents



Highest qualification held by respondents



The percentages shown have been rounded up for convenience

In summary, respondents gave some strong messages:

1. Change is needed
2. A career pathways approach was broadly supported
3. People wanted careers to have a clearer structure
4. Nurses would need support during the transition to a new system
5. Job titles, responsibility and educational attainment should be aligned.

There was a strong consensus around the need for a change in the structure of post-registration nursing careers (Question 2.1). Respondents said that the current way of organising careers lacked structure and consistency and had not changed substantially for many years. Respondents said that it was not clear how to progress in their career.

The majority of respondents thought that the proposed framework offered a positive form and appropriate focus for nurses' career structures (Question 2.2), which would benefit patients and make careers easier to navigate and understand. However, some children's, mental health, learning disabilities and occupational health nurses were less clear how this framework would specifically help them and their patients and clients. There were concerns about whether new silos would be created and whether pathways would be too generalised to meet the needs of an ageing population and of community care.

Some respondents commented on the need for more detailed information on the proposals. For example, it was suggested that more could be done through the careers framework to improve public confidence in the profession (Question 2.5), but that this would depend on the detail of the proposals. Respondents felt that patients and the public are especially concerned with standards of care and professionalism.

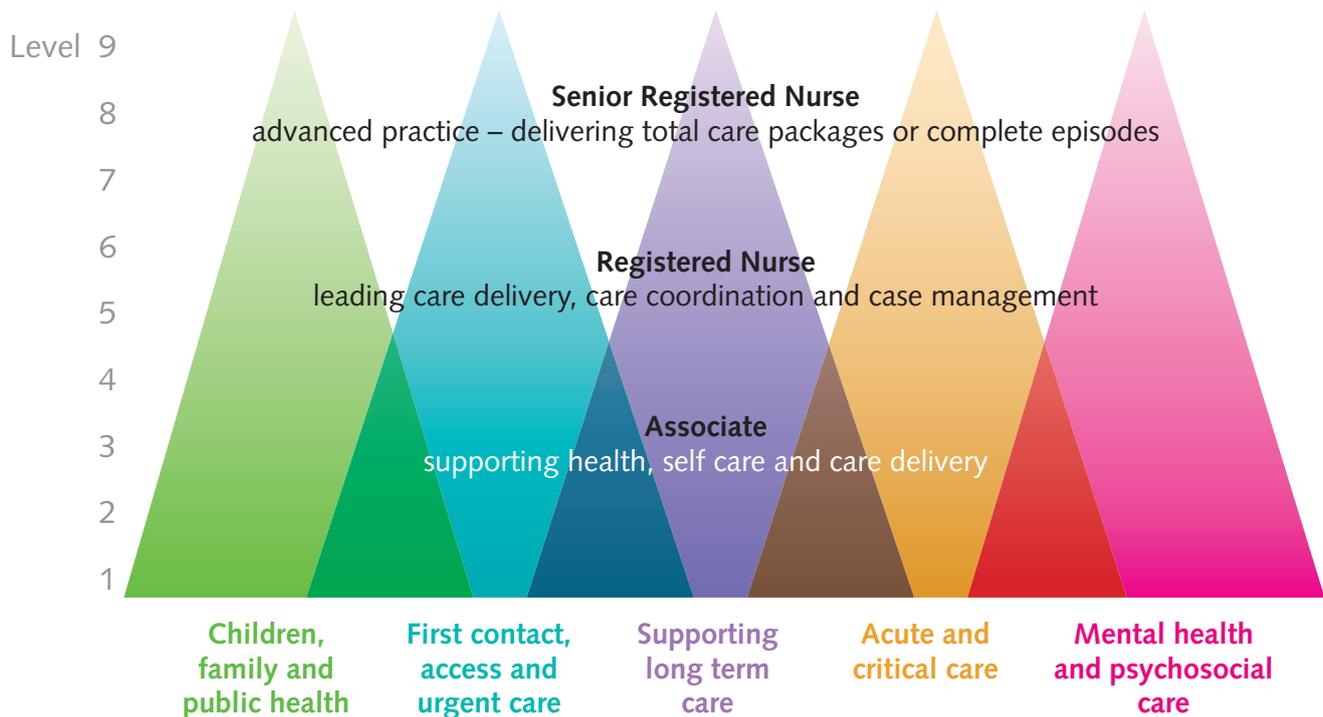
The great majority of respondents (80%) said that it would be helpful to link job title, level of practice and educational attainment (Question 3.3). They thought that this would improve the public's confidence in the profession, provide clarity, reduce variation in the quality of care and multiple job titles, and help recruitment into the profession.

## 2. A discussion of issues raised

This section expands on the proposals which gained widespread support but which respondents said needed more detail before a true assessment could be made.

We appreciate many of the issues raised are extremely complex and will require further discussions with stakeholders. We hope people will find it helpful to have an insight into the thinking so far.

### Five proposed pathways



We identified six key questions people said needed more explanation and discussion, as set out below.

## 1. What is meant by the term pathway?

A 'pathway' is a term in frequent use in healthcare that carries different meanings according to the setting and the intention of the user.

For the purposes of the career development framework, pathways describe:

- groups of patients who have similar care needs owing to the characteristics of their condition
- what nursing interventions will be required
- the continuum of patient need independent of provider organisation and care setting.

## 2. What would the main benefits be?

A pathway approach means we could:

- Identify the skills, knowledge and competence at discrete levels of practice from the newly registered to experienced, then to advanced practitioner, so that individual nurses know what is expected of them as they move along the pathway, and what additional competencies they must acquire to progress up the career ladder in their chosen field.
- Help nurses align pathway competencies with the Knowledge and Skills Framework (KSF) so they can make a better assessment of how their career could progress.
- Match patient need to numbers of nurses at differing levels. For example, how many nurses are needed to practise at advanced level and how many, at stages along the way.
- Help commissioners of services, and of education, understand the education and training requirements of the nursing workforce by aligning patient need with numbers of nurses and competencies they will require. This could ensure appropriate investment is made in education.
- Clarify what it is nurses are doing for patients and the public and what skills, knowledge and competence they are applying.
- Provide a basis for developing nursing metrics to identify their contribution to patient outcomes and experience.

In summary, a pathway approach could help us to:

- identify demand and match the nursing resource
- align individual careers with health and service need
- personalise the KSF to individuals' own careers
- act as an instrument for workforce planning
- articulate the value of the nursing contribution.

### 3. Are the five proposed pathways the best ones?

While the pathway model was popular with most respondents there were different views about whether the five proposed pathways provided the best fit.

Some thought the pathways should be aligned with the care groups represented by the current pre-registration branch programmes, perhaps with the addition of care of older people. They suggested it was easier to see where nursing children and those with mental health problems fitted in, whereas others felt these were perhaps more relevant to medicine than nursing.

We know that the SHA groups used eight clinical pathways for their work on the Next Stage Review.

Therefore, the proposed five post-registration pathways need to be examined in more detail in the light of the comments we have received, to test which would deliver the benefits people want.

What is clear is that pathways must not be too restrictive or otherwise flexibility will not be maximised and could limit career opportunities. Neither should pathways be so loose as to be unrepresentative of groups with similar needs. Pathways must also depict need along a care continuum, rather than being related to a specific condition, organisation or employer.

Patients themselves would not, of course, be restricted to one pathway. For example, it is possible for someone with diabetes or asthma to be within the long term conditions pathway, while at the same time, require urgent care for a totally unrelated condition. However, their different sets of needs would be met by the nurse with the most appropriate skills, seeking intervention from others as necessary.

In summary, the five proposed pathways illustrate how the needs of patients and the service could be classified. Whether these particular pathways are the best way of stratifying the nursing workforce is for more detailed appraisal with stakeholders, especially those representing children's, mental health and learning disability nursing. However, most people did agree that this way of thinking about future careers could help nurses assess the opportunities before

them, making choices that not only suit their aspirations, but would also reflect patient need, an appropriate skills and knowledge set and therefore offer long term employment stability.

#### 4. What about moving up the pathway and transferring to others?

Respondents wanted more information both about how nurses would progress their careers and also about how people would move between pathways. This requires competencies to be clarified and levels of practice standardised. *Modernising Nursing Careers* proposed the development of a career passport. Discussions are currently underway with key stakeholders on a UK-wide basis to clarify the purpose of a career passport and options for its development. A set of core competencies could be defined for each pathway and at different levels along that pathway. A number of competencies would be common across all pathways. Nurses who transferred across pathways would carry such competencies with them and an education and development programme could be planned to meet the new competences required.

#### 5. What about standardising levels of practice?

The consultation showed there was widespread support for standardising levels of practice and aligning roles and responsibilities with skills, knowledge and competence. Many cited the lack of consistency inherent in the current plethora of titles. People also said standardising levels of practice would demonstrate the numbers of nurses needed at each level and would help nurses recognise job opportunities, requirements for progression, and prospects for advancement and promotion.

Further work will be needed to describe the skills, knowledge and competency required at different levels of practice, as well as to indicate the benchmarks that must be attained to progress to higher levels of expertise and more senior roles.

Respondents supported regulation of advanced practice believing this to be a necessary step in enforcing compliance and investment in education in order to ensure the safety of the public. It was also pointed out that plurality of provision could lead to variation in practice and that commissioners would need firm yardsticks to inform demand and assess the quality of nursing care provision.

The Nursing and Midwifery Council will decide whether public protection requires advanced or other level practice to be regulated. They are considering this with other regulators, as part of the *Trust, Assurance and Safety*<sup>10</sup> white paper working group, charged with reviewing higher levels of practice across all professions.

<sup>10</sup> The White Paper: Trust, Assurance and Safety: The regulation of health professionals, Department of Health, 2007.

## 6. Specialist practitioner qualifications?

In the consultation we asked about specialist practitioner qualifications, in relation to nursing in the community. Respondents felt that the framework could open up community-based nursing careers and this will benefit patients. What is vital is that we educate nurses and health visitors to undertake key roles in public health, health promotion and in nursing in the home and in community settings. There is a need for an informed debate about how the present educational models for nurses and health visitors should be adapted in the future.

The review of health visiting, *Facing the Future*<sup>11, 12</sup>, published in 2007, indicates a potential way forward. It describes a future role for health visitors that would see them as clinical leaders responsible for taking forward the child and family health agenda. They may develop public health programmes across a given community, or use high levels of expert skill and knowledge when working with individual families who are most at risk of adverse health outcomes. This approach would be compatible with a child, family and public health career pathway. Similarly community nurses within district nursing could focus on leading skill-mixed teams, co-ordinate and manage a wide range of general long term care needs, or take a case management approach to people with highly complex needs as do community matrons.

11 Facing the Future: A review of the role of health visitors, Department of Health, 2007.

12 The Government Response to Facing the Future: a review of the role of health visitors, Department of Health, 2007.

## 7. Equality and diversity

The consultation asked about the impact of the framework on equality and diversity. There was agreement that through implementation we should strive to ensure the framework had a positive impact on equality and diversity in all areas but particularly with regard to age, disability and ethnicity. A full equality impact assessment has been undertaken and is published at the same time as this document.

### Next steps

In taking this work forward we will also incorporate the policy set out in the NHS Next Stage Review and of the Nursing and Midwifery Council's review of pre-registration nursing education. Together, these will provide us with the framework for the modernisation of nursing careers and education.

Areas of further work include:

1. Developing the pathway approach and the specific pathways through further work with Skills for Health and key stakeholders.
2. Work will also progress towards standardising levels of advanced practice. This will be done in partnership with the Nursing and Midwifery Council.
3. We will work with key stakeholders to review funding arrangements as part of the implementation of the Next Stage Review.
4. We will work with stakeholders to ensure ongoing monitoring of the impact on equalities.
5. We will share this work with the devolved administrations.

This document sets out a direction of travel for the professions. We welcome comments on the ideas that we have set out here, and we would like to engage further with stakeholders to take the work forward, including considering the priorities and the resources and other implications of any future work. We will do this through the professional networks that already exist, and other stakeholders.

## Conclusion

The purpose of this consultation was to test the relevance and usefulness of a pathway model to aligning nursing careers with patient and service need and improving the quality of care. It also looked for a steer on nurses' roles and on regulation.

Responses suggest there is overall support for the main proposals, particularly the need for clear, academic and experiential benchmarks to be standardised at thresholds of practice, and provide a mandate to continue the work.

The NHS Next Stage Review gives an additional impetus to these issues and will enable us to progress the ambitions of Modernising Nursing Careers through the implementation of the Next Stage Review.

# Annex A

We asked these questions in the consultation document *Towards a Framework for Post-Registration Nursing Careers*.

## Part 1 – Demographic Questions

- 1.1 Have you replied to this consultation document?
- 1.2 How long have you been qualified as a nurse?
- 1.3 What age group are you in?
- 1.4 Ethnic origin
- 1.5 Gender
- 1.6 Do you have a disability?
- 1.7 What level is your role on The NHS Careers Framework (or equivalent)?
- 1.8 In what setting do you work?
- 1.9 On what part(s) of the NMC register are you registered?
- 1.10 What is your highest nursing qualification?
- 1.11 Had you heard of Modernising Nursing Careers (MNC) prior to this consultation?
- 1.12 If yes, where did you hear about MNC?

## Part 2 – The Need for Change

- 2.1 Do you think that there is a need for change in post-registration career structure?
- 2.2 Do you think the framework in Section Two of this document helps to describe a positive way forward for nursing careers?

- 2.3 Is the framework flexible enough to accommodate changes you see happening to nursing careers in the future?
- 2.4 If this framework was adopted could it have a positive effect on other professions?
- 2.5 In the long term would the adoption of a new careers framework improve public confidence in the profession?
- 2.6 Will the framework encourage nursing careers that start in a community setting?
- 2.7 What might be the equalities and diversities impact of the framework concerning.

### Part 3 - Framework Detail

- 3.1 On considering the detail of the framework do you think the pathways proposed are the right pathways?
- 3.2 Should there be any other pathways?
- 3.3 On considering the levels of responsibility described in the framework would it be helpful to clearly link job title, level of practice and educational attainment?
- 3.4 If the proposal in question 3.3 above was adopted (a clear link to job title, level of practice and educational attainment) who should take the lead on communicating this to the public.  
  
Please rank in order of importance between 1- 5 (with 1 being the most important and 5 being the least important).
- 3.5 Will the framework provide a more flexible approach to skills acquisition to produce a more responsive career structure?
- 3.6 How might existing specialist practitioner qualifications fit into this framework?
- 3.7 Currently the majority of Specialist Community Public Health Nurses qualifications are achieved via fully funded full time programmes of study. How should they be achieved in the future?

## Part 4 – Wider Considerations

- 4.1 If the framework were to be introduced what three things would you change in the initial preparation of nurses?
- 4.2 If the framework were to be introduced what three key things would you need to change in the current approach to the continuing professional development?
- 4.3 Do you think it would be a priority for existing practitioners to be supported to make the transition into the new framework?
- 4.4 Are you aware of any individuals, teams or services who already work in some of the ways described by the framework? If so could you give us a brief description.
- 4.5 Do current workforce planning models support the adoption of the new career framework?
- 4.6 Do you think that nurses now expect to take more personal responsibility for developing their skills?



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