will bring greater standardisation; the same point could be made for all pre-registration training, on which ONP is based, she says.

She is also concerned about the consultation: ‘The outcomes didn’t look at one way over the other. There were conflicting opinions. I’m interested to know what informed that decision.’

The consultation ran from August 2013 and focused on ten questions. A report on the outcomes published in January this year shows that respondents ‘divided equally’ between keeping or scrapping supervised placements. It states: ‘Overseas respondents did not tend to support a period of supervised practice, but UK respondents comment that supervised practice enables competency to be fully and appropriately tested.’

Additionally, Ms Bain worries about governance in the private nursing-home sector, which she says is ‘not as robust as within the NHS’. The care-home sector in Scotland in particular is trying to recruit overseas nurses, she adds.

This anxiety over non-NHS care is shared by community nurse and RCN learning representative for Wales Elizabeth Rees. While Ms Rees thinks that larger NHS providers could offer a ‘suitable grounding’ to new arrivals, she is ‘more worried about those who end up in small nursing homes’.

She says: ‘If you’re in a small nursing home, who will give you the additional support you need for some of the cultural bridges you’ll need to cross?’

However, director of nursing and people at Camden and Islington NHS Foundation Trust Claire Johnston can see the regulator’s logic: ‘The NMC has listened to concerns about standards, the management of workload and being systematic. I can see that this is a genuine and much-needed attempt to standardise the quality of overseas nurses who want to work in the UK.’

Anita Pati is a freelance journalist

Find out more

To read Changes to Overseas Registration: For Applicants Educated outside the European Union and European Economic Area, go to tinyurl.com/pyomw73

Analysis

Why are there still so few advanced nurse practitioners worldwide?

An International Council of Nurses conference this year focused on advanced nursing practice. Nick Lipley reports

This summer, Helsinki hosted the eighth International Council of Nurses conference dedicated to advanced nursing practice.

Nurses from 40 countries around the globe convened for the International Nurse Practitioners and Advanced Practice Nursing Network conference, which, according to this year’s title, focused on ‘expanding access and improving healthcare outcomes’.

The three-day conference featured hundreds of oral and written presentations, including posters testifying to how advanced nurse practitioners (ANPs) are improving patient care. Network chair Anna Green, a critical care nurse practitioner from Melbourne, Victoria, for example, presented on liaison rounding for the deteriorating patient, while Sheffield Hallam University professor in health and social care research Ann McDonnell spoke about evaluating the effect of ANPs in acute-care settings.

Despite this evidence supporting how ANPs improve care, they still represent a tiny proportion of all nursing posts. According to figures presented by director of the Canadian Centre for Advanced Practice Nursing Research at McMaster University, Hamilton, Ontario, Denise Bryant-Lukosius, ANPs make up about 6% of nursing posts in the US; elsewhere, this figure is about 1% or less.

Director of the Center for Clinical Research and Scholarship at Rush University Medical Center, Chicago IL, Ruth Kleinpell says: ‘Although the numbers of advanced practice registered nurses (APRNs) are increasing, several barriers exist that impact the development of additional roles, including misunderstanding about the role and scope of practice and state practice acts which limit full prescriptive authority and independent practice.

‘Some healthcare providers view the APRN role as a physician replacement model or perceive that APRNs seek independent practice in order to practise as a medical practitioner.’

Unknown role

Director and dean of the Wenckebach Institute of the University Medical Centre, Groningen, Netherlands, Petrie Roodbol, attributes several reasons to the small number of nurse practitioners worldwide. ‘It is a relatively unknown role for nurses and a master’s is required. There are still countries which offer solely vocational training programmes to become a nurse. Starting a master’s programme for advanced nursing practice is only useful when there are bachelor-educated nurses and there is a legally recognised function as a nurse practitioner.’

University of Turku head of the nursing science department and Hospital District of Southwest Finland nurse director Helena Leino-Kilpi says managers do not understand how they can save money by establishing these positions. ‘Nurse managers have not suggested these positions when they make plans for the future. And politicians do not know enough about them, yet they have the power to formulate government budgets.

‘The main reason for not having more clinical nurse specialists and ANPs is the lack of knowledge of the outcomes of these positions. This, then, is partly due to nurse managers, nurse educators and nurses themselves.’