Concentrate on clinical education, boards told

THERE SHOULD be more practising clinicians working for nursing’s statutory bodies and fewer educationalists, the review argues.

It wants to see a shift in emphasis, with the statutory bodies concentrating their energies on improving clinical education while higher education colleges are left alone to get the academic quality right.

The introduction of Project 2000 saw a massive transfer of funds from the NHS to higher education.

The four national boards in England, Scotland, Northern Ireland and Wales have worked closely with colleges, advising on professional issues and validating courses.

But some colleges have seen this as 'heavy handed', a frustration which JM Consulting understands. Now that the introductory phase is over, the boards should 'disengage' and concentrate on the 'much more difficult' area of clinical placements and clinical competence.

Jim Port, of JM Consulting, said: 'There's too much emphasis on the number of tutors per nurse and too little emphasis on the sort of things that trained nurses are able to do.'

The report dismisses the idea of a pre-registration year in which student nurses would spend time on the wards.

As one of three options for future structure, the document suggests the boards could be merged with the UKCC.

'It says a unified structure could offer 'a stronger voice to champion the public interest.'

More non-nurses would better protect public

NEW DISCIPLINARY measures should be introduced to prevent the system of self-regulation from falling into disrepute.

The review points out that the current conduct system has failed to handle some cases appropriately, particularly it has neglected to explain important judgements which capture the public interest. It has allowed low level cases to clog up the system and lost the confidence of nurses and the public.

A wider range of sanctions should be available for use against nurses guilty of misconduct. These should include cautions, conditional registration and remedial training or supervised practice.

The review suggests that if employers cannot deal adequately with incompetent nurses, then the regulatory body should step in 'as a last resort'.

'It says there should be more non-nurses on conduct panels who would be better at protecting the public.

The council, the report claims, has too few powers. It cannot demand documents at an early stage. The proceedings are described as 'tortuous' and the required level of conduct is confused. The report questions whether the UKCC has a strategy for conduct standards.

While the reviewers praise the code of conduct for its conciseness, they are inviting comments on whether the UKCC's standards give practitioners clear guidance on how to conduct themselves.

RCN welcomes fraud clampdown

The rising cost of NHS prescriptions is making it increasingly difficult for disadvantaged people to access health care, the RCN has warned.

The College made the comments as it welcomed moves by the government last week to clamp down on prescription fraud, as: 'a step towards ensuring that as much as possible of the available resources for the health services are employed in providing good quality patient care.'

The government’s plans include fixed penalties for people who attempt to avoid paying and local hotlines for staff to report suspected fraud.