Response by the Royal College of Nursing
To Nursing and Midwifery Council Consultation:
Competency testing for overseas trained nurses and midwives

General Comments
The Royal College of Nursing welcomes the discussion on future arrangements for processing overseas trained applicants wishing to register with the NMC. We are disappointed that the consultation did not contain an evidenced review of the current system and in particular the Overseas Nurses Programme. However, the use of competency tests, including objective structured clinical examinations (OSCEs) are being used more widely and the RCN is certainly open to a stronger focus on individual competency rather than set learning programmes, which may also be difficult to access.

In addition to knowledge and clinical skills and competences, cultural adaptation, values and communication skills form an important part of a nurse’s fitness to practise. And these are areas that have been highlighted particularly in reviews undertaken elsewhere. So it is important that any assessments or supervised placements also capture these aspects, in addition to tests such as IELTS which capture an academic standard in English.

Clearly the NMC needs to undertake further work to develop both the online written test, the OSCE and identify the potential costs, as well as reviewing other key elements of the programme – in particular supervised practice and wider communication skills to complement the IELTS test or a replacement.

Ultimately patient safety has to be paramount and patients, the public, registrants and others working in our health services need to be confident that the system is robust, accessible, as well as fair and timely for those overseas nurses wishing to practise in the UK. The NMC needs to use this consultation as a starting point for building the confidence of registrants, potential registrants, employers and the public in the broader process.

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Kendle A & Northcote M (2000) The Struggle for Balance in the Use of Quantitative and Qualitative Online Assessment Tasks, University of Western Australia and Edith Cowan University, Australia.
2Nursing Council of New Zealand (2012) Consultation on the Qualifications Prescribed by the Nursing Council of New Zealand for Internationally Qualified Registered Nurses under the Health Practitioners Competence Assurance Act 2003, Analysis of Submissions, New Zealand: NCNZ.
The principles underpinning the test

1. Do you agree or disagree with the principles underpinning the competency test?

Agree

The requirements for entry to the test

2. Do you agree or disagree that overseas trained nurses and midwives must meet the minimum requirements (outlined in paragraph 24) before taking any competence test?

Agree

The RCN agrees that the requirements listed for an application to register should continue, aligning largely with requirements for UK educated applicants. They also need to be sufficiently robust to protect against fraudulent applications.

The RCN agrees that there should continue to be a requirement to have completed a language test. However, once the new competency tests have been introduced a review period should be agreed for relooking at IELTS and the way overall that language ability is assessed throughout the process.

The content and structure of the test

3. Do you agree or disagree that the competency test should address:

   The specific competences contained within the pre-registration nursing education standards (paragraph 26) and midwifery education standards (paragraph 28)

   The essential skills clusters (paragraph 27)

Agree

However, there remain issues about cultural adaptation, values, attitudes and communication which may need to be covered outside the competency test, eg through supervised practice, mandatory requirement on employers’ induction.

4. Having considered the two options for testing the competence of overseas trained nurses and midwives (paragraphs 41–50), do you support:

   Option 1 (2-parts)

   Option 2 (3-parts)

The RCN would support a move to a three part approach.
The first test to be undertaken in an approved test centre overseas is potentially more cost effective and flexible for the applicant and the NMC and provides a useful screening for the next stage in the UK.

We are aware that OSCEs are used already in many health practitioner assessments, including the US NCLEX, with Canada looking at moving to a similar approach\(^3\). The RCN agrees with a move towards such assessments of performance.

But given the importance for nurses not trained in the UK system to demonstrate safe practice, communication and cultural adaptation in a real life setting the RCN believes some form of supervised practice should continue, but with greater guidance and level of consistency.

5. **If you have any suggestions for different approaches for testing the competency of overseas trained nurses and midwives, please outline these below. Please include any reasons or evidence to support your proposal.**

6. **How many attempts should an applicant be offered to enable them to achieve a pass in a part of the test?**

We are aware that the US NCLEX system places a limit on the number of times an applicant can do a test in a year, typically three times, before needing to complete an educational programme to take the test again.

The RCN believes there should be a limit on both the written and the OSCE eg 3 times within the space of a set time period.

7. **Should applicants be able to take part one of the test in designated centres overseas?**

Yes.

There is potential for this approach to allow more flexibility, reduce costs for applicants and NMC, and prevent issues where nurses move to a new country and then cannot gain registration. However, the NMC needs to consider in more detail the costs, security, reliability and validity of assessments.

**Funding of the test**

8. **Do you agree or disagree that the cost of sitting the test should be met by:**

   - The applicant in full?
   - The registrant body (through fees raised by NMC)?

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As a general rule they should be met by the applicant and not borne by current registrants.

However, the RCN would want to see further detail on the costs of such changes and whether these are sustainable within the NMC’s current finances. The NMC would need to demonstrate and justify clearly how any charges to applicants have been calculated. The RCN would expect that employers/recruiters of overseas trained nurses should cover the necessary registration costs.

**Additional comments**

9. *The competency test could be developed for additional registration purposes. Your comments are welcomed on the potential value this might offer the NMC in assuring protection of the public.*

We are aware that the NMC has recently introduced the option of a competency based aptitude test for EU trained nurses not meeting the minimum requirements for automatic recognition. The RCN would want to see this and the proposed new system for overseas applicants implemented and reviewed before any potential extension of this approach.

10. *If you have any further comments to offer relating to the consultation, please do so below.*

There seems to be very limited evidence as to the effectiveness or otherwise of the current ONP system and it is not clear that the NMC has undertaken any extensive review. So whilst the RCN is broadly supportive of moving to a competency based approach with structured performance assessments, it is important that effective evaluation of any new system is built into its development and implementation.

One of the major issues for overseas nurses is adaptation into working culture and practices in health services in the UK. Whilst some form of supervised practice can assist in these issues the RCN would want to see a strong emphasis placed on the responsibilities of individual employers for mandatory induction training for overseas nurses.

**Royal College of Nursing**

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