1. Introduction

1.1 UNISON is the largest public sector union in the United Kingdom and Europe with over 1.3 million members. Our members work in a range of public services including Health, Local Government, Education and Police services. They are at the front line of caring for the most vulnerable in our society. We are pleased to have the opportunity to respond to this consultation by Nursing and Midwifery Council (NMC).

1.2 We are also in a unique position to respond to these proposals as we cover currently four of the nine healthcare regulators. This gives us an overview of the different ways regulators operate and also enables us to make more informed judgements on which elements work more effectively than others.

1.3 As the largest trade union and the voice of the healthcare team, we are instrumental in influencing policy at regional, national and international level. UNISON has a long history of working with organisations and individuals who work and campaign in the areas of regulation, safeguarding, practise and care.

1.4 Our members are responsible for the delivery of high quality health and social care to the most vulnerable in our society. We have actively sought the views of our nursing and midwifery members who are responsible for the delivery of quality care services. In addition to registered nurses and midwives, UNISON’s consultation included the views of healthcare assistants, assistant practitioners and students in nursing and midwifery as prospective registrants.

1.5 We hope that the NMC will take into account the weight of UNISON’s views as a major stakeholder and representative of the majority of regulated healthcare professionals.

2. Executive Summary

- UNISON does not support the NMC proposed fee increase.
- UNISON believes that a flat rate increase will have a disproportionate impact on new graduates and part time workers.
• Confidence amongst registrants in the NMC is at a low with only 46.1% describing themselves as either Somewhat Confident, Confident or Very Confident in the NMC.
• Government should financially bail out the NMC, 55% of respondents felt.

3. Background

3.1 UNISON was disappointed that in their consultation the NMC sought to ask only two questions, and furthermore that no consideration has been given to proportionate fees based on earnings. In addition to completing the online survey we are also submitting a more detailed formal response. We believe that this was necessary as the limited online format would not have allowed us to properly articulate the views and opinions of the thousands of UNISON members who took the time to express their concern at these proposals.

3.2 In order to formulate our response and encourage active open participation we used a variety of mediums to communicate and discuss the proposals with our members. These included an email sent out to all members of the nursing and midwifery family in July, drawing their attention to the proposals, as well as a detailed online survey to which we received over 6,000 responses.

3.3 Information also has been communicated via our Facebook and Twitter accounts encouraging registrants to participate in this important survey. We shared links to both the NMC consultation as well as our own.

3.4 We are also mindful of the two reports recently published by the Council for Regulatory Healthcare Excellence (CHRE), which exposed significant shortcomings in the NMC; in particular those related to leadership and the ability to effectively perform financial management. Both of these reports have had a significant impact on the confidence in which registrants hold the NMC.

4 UNISON Survey Findings

4.1 The survey was responded to by 6,188 people. Of these, 5,877 (96%) completed the entire survey giving us a high and detailed response rate. The survey included open-ended questions, examples from which are used in the following sections.

4.2 The composition of respondents was made up of nurses (87%), midwives (3.2%), health visitors (0.3%), healthcare assistants (5.5%), students (2.6%) and others not clearly stated (3.0%). The ‘other’ category included registrants whose employment was not as a nurse or midwife.
4.3 Do you support the NMC’s proposed fee increase to £120 per year?

Figure 2: Support for the proposed increase
4.4 98.1% of respondents opposed the proposed fee increase to £120 per annum. Many respondents drew attention to the CHRE report. Even more reminded us of the current financial climate and the impact that current changes are having on healthcare workers and their families.

In context, the NMC is the largest regulator in the world. Currently it registers 670,000 nurses and midwives. It has a guaranteed annual income of £53 million. As an independent organisation it is not expected, like NHS organisations, to make year on year efficiency savings. It should in fact be the healthiest organisation. However this is far from the case.

A full time nurse or midwife graduating today and working full time will earn a starting salary of £21,176. If we look at 40 year career average of a nurse or a midwife realising a pay band 7, their annual basic salary would be £40,147. However in today’s NHS many band 7 specialist nurse and midwifery posts have been lost to the harsh reality of the economic climate. Others are facing down-banding with a limited period of protection.

The General Medical Council currently regulates 248,287 professionals¹. Their annual registration fee is £420, however the starting salary of a Consultant or General Practitioner are £74,504 and £53,781, respectively. Over the same 40 year period they can expect a significantly higher salary of £100,446 and £81,158. Thus although they pay a higher registration fee, it is a lower percentage of their earnings.

The table below illustrates that nurses and midwives pay more as a percentage of earnings than doctors.

<table>
<thead>
<tr>
<th>Job role new appointment</th>
<th>Average annual salary</th>
<th>Registration fee</th>
<th>Registration fees as a % of annual earnings</th>
</tr>
</thead>
<tbody>
<tr>
<td>Nurse or Midwife</td>
<td>£21,176</td>
<td>£120</td>
<td>0.56%</td>
</tr>
<tr>
<td>Consultant</td>
<td>£74,504</td>
<td>£420</td>
<td>0.56%</td>
</tr>
<tr>
<td>40 Year career average</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Nurse of Midwife band 7</td>
<td>£40,147</td>
<td>£120</td>
<td>0.29%</td>
</tr>
<tr>
<td>Consultant</td>
<td>£100,446</td>
<td>£420</td>
<td>0.41%</td>
</tr>
</tbody>
</table>

4.5 Almost 5000 respondents took the time to give us specific information about the impact the increase would have on them personally. Due to the volume of responses it is impractical to list them all here. We have therefore endeavoured to include examples of the points and themes most commonly repeated.

• “I cannot afford the fee increase. My salary has not increased for several years – however the cost of living has.”

• “I am a single parent already struggling due to loss of child tax credits.”

• “It would be an added burden on me and my family during a difficult financial time of pay freezes lost pensions, etc.”

• “I am already considering a change of career; the fee increase would tip that decision in favour of leaving nursing.”

• “Due to wage freeze and high prices in general it would be unfair for the NMC to try to implement such a high increase when things are tough enough as it is.”

• “I would consider letting go of my registration.”

• “Extra hardship and strain on my family budget. I would find it very hard to find this extra money.”

• “As I am new onto the register and still haven’t secured a job, I would find it difficult to meet the increase while providing for a family.”

• “I have recently reduced my hours from 32 to 24 per week, therefore the month I pay my fees I will find it difficult to manage.”

• “As you are aware, a Nurse’s annual salary is already very little, therefore increasing the amount they need to pay is very unfair.”

• “I will qualify in 4 weeks and am not registered yet, but £120 seems very steep. I would struggle to meet this fee.”

• “Both my wife and I are registered nurses. Our registration fees are due in February and March each year. The proposed increase would be financially untenable adding another £120 to our monthly outgoings for two months instead of £75 which is tough enough on a fixed salary as it is.”

• “In a time of recession it is inappropriate to ask members to pay for the NMC’s inability to manage its own business – I’m not convinced the money would be used effectively.”

• “This will have a big impact financially as I am a newly qualified nurse.”

• “I am already disheartened in the profession that I dedicated myself to for 27 years. This is probably the final nail in the coffin to bail out of nursing altogether.”
• “My pay has been frozen and I am at risk of being sacked and rehired at a lower pay band due to the South West ‘pay cartel’ so I would struggle to pay the increase.”

• “My husband and I are both nurses. Not only has our pay been frozen, we have an increase in the deduction of pension fees from our wages and are expected to work for longer and get less pension at the end. Petrol prices have increased and with no salary increase it has a huge impact on us as we work in the community – and on top of it all we will be expected to pay out £240 pounds a year. Put simply our family simply cannot afford this and one of us may have to stop nursing.”

4.5 UNISON also does not believe that the NMC have demonstrated an appropriate business case with detailed financial information to justify such an increase. Whilst there is no doubt that referrals to fitness to practise have increased, we remain unconvinced at this stage that all other options have been exhausted. We also do not believe that there is a clear, transparent financial trail to justify almost doubling the fees. We believe that our arguments are strongly supported by others and were demonstrated with the angry which created the consultations announcement.

Since 2008 the NMC has been under close scrutiny, yet despite this the true impact of the culture and management was not unearthed until recently in the CHRE report. Despite having dedicated staff whose ideas could have made a difference, a culture existed which neither encouraged nor acted on ideas. The very regulator whose responsibility is public protection let down the people it seeks to protect and those who provide the care. We acknowledge and recognise the significant work which has been undertaken under the stewardship of the current acting Chief Executive and previous interim Chair. However despite their best efforts many of the changes will take time to achieve any significant impact.

4.6 As a result of the current situation, coupled with the financial plight of our members in very difficult and harsh economic times, UNISON cannot support the proposed fee increase. We will do all within our power to assist the NMC in alternate ways to achieve the other changes it wishes to see, but until such times as it has the public confidence of registrants it is inappropriate to make changes to their registration fees.

4.7 In addition to this key question UNISON asked related questions including whether registrants would support a smaller fee increase. In its consultation, the NMC sought to argue that if the fee had risen proportionately in line with inflation in the years since the last increase, the current registration fee would be £86. We asked our members’ views on a smaller increase.

Figure 3: Would you support a smaller increase?
4.8 61% of respondents do not support any increase at this time, which reinforces the strength of opinion behind responses to question one.

4.9 UNISON also sought to gauge future years’ increases, as asked by the NMC in their third question. UNISON members do not support an annual fee increase (46.2%). Had the NMC acted in early years and taken more seriously the impact of costs by increased referrals to fitness to practise, the reaction of registrants may have been different; as a smaller proportion of respondents (41.4%) indicated that might support an annual fee increase. However the NMC failed to act at this point, instead choosing to rely on reserves without any clear plan to plug the widening funding gap. We believe these factors explain clearly our member’s objection to annual fee increases.

Figure 4: Would you support an annual increase for inflation in future years?

4.10 Almost doubling registration fees would have a disproportionate impact on part-time workers – the majority of whom are women. The NMC failed to consult on this aspect, and thus it is difficult to gauge from the NMC consultation’s questions how the NMC expects to properly assess the impact of any change in line with the Equalities Act 2010. UNISON recognises that
for both newly qualified and part-time workers the impact of finding additional funds will have as significant impact. Our subscription fees are also proportionate based on earnings – ie the more you earn the more you pay. This method helps to ensure our membership fees remain low for our lowest earning members.

Figure 5: Should the NMC fees be proportionate to earnings so as not to disadvantage part time workers or more junior members of the nursing team?

4.11 Given the recent criticism of the NMC, we wanted to assess registrants’ confidence in the organisation to see what impact this might have on their opinions. Sadly only 13.3% of respondents stated that they were Confident or Very Confident.

Figure 6: Registrants’ confidence in the NMC’s ability to perform its regulatory functions

4.12 The NMC has been under special measures since 2008 and as a result subject to closer scrutiny than other regulators. Given this, we asked whether respondents felt that the Government should step in. After all public protection is surely everyone’s responsibility. Registrants rightly feel that they should not carry the burden of others’ mistakes.
4.13 Respondents felt overwhelmingly that the Government should step in and offer the NMC financial support. Many stated that registrants should not have to carry the burden of their regulator’s failings, and that if the Government can bail out the banks they should also support the NMC.

4.14 There can really be no further chances for the NMC if we are to retain self-regulation. To date our members have supported them as a regulator despite previous difficulties and heavy criticism rightly being laid before them. However for the first time those views are starting to falter, as seen in figure 8 below. As we advance in multi-professional practise and care delivery we felt it was appropriate to ask their views on the impact on regulation. However we front ended this question to retain parity with the medical profession, something nurses and midwives have always felt strongly about; the results are therefore more striking. Just over half supported a separate regulator for nurses and midwives. The remainder either supported a move towards multi-professional regulation or were unsure either way.

Figure 8: Like doctors, do you believe that a separate regulator should always be maintained for nurses and midwives?
4.15 Just over half of respondents (55.6%) wanted to maintain a separate regulator for nurses and midwives. This figure is significant against a historical context where UNISON members traditionally felt very strongly in favour of keeping their own regulator. The response to this question further demonstrates the lack of faith that nurses and midwives have in the NMC at present.

4.16 Finally, we included in our survey a free text box asking respondents if they had anything else to add. Here is a sampling of the types of responses we received the most of:

- “Please do not increase the fees as this would devastate a lot of us.”
- “Whilst there is never a good time to raise fees, now is simply a wrong time to even contemplate it.”
- “Protect the nurses as well as the public or you won’t have any nurses doing the job.”
- “If it makes it safer for patients I am all in favour of an increase, but not such a large increase at the one time.”
- “I could earn more working at McDonald’s and they would not charge me to work there.”

4.17 We investigated the claim behind the final comment and found that the starting salary of a full time Trainee Business Manager at McDonald’s in the UK can expect to receive a starting salary of £21,500 – almost £200 more than a new graduate midwife or nurse. A Business Manager can expect after three years training to run their own store and receive a salary package of £45,000. The training period has some similarities but the sad reality is that nursing and midwifery is still not valued sufficiently in the UK. In the past nurses and midwives were lured away into other parts of the profession or overseas. However if we look at the salary, employment package & training opportunities offered by McDonalds – our future competition could come from a very different source.

5. General information

5.1 The following details the composition of the respondents.

Figure 9: Union membership

91% of respondent were UNISON members. 4.3% were members of another trade union. Almost 4% were members of a professional association, and less than 2% of respondents were not members of any trade or professional association.

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2 McDonalds UK recruitment information – [www.mcdonalds.co.uk](http://www.mcdonalds.co.uk), August 2012
Figure 10: Country

74.8% of respondents live in England, 17.4% in Scotland, 4.3% in Northern Ireland and 3.5% live in Wales.

Figure 11: Gender

80% of respondents were female and 20% were male.
Figure 12: Gender Identity

In line with UNISON’s equality monitoring we asked if the respondents’ gender was different to the sex they were assigned at birth. Just under 5% indicated it was different. Fewer than 500 respondents declined to answer this question.

Figure 13: Disability

95.3% of respondents stated that they had no disability. 436 of respondents declined to answer this question.

Figure 14: Ethnicity

77.1% of respondents described their ethnicity as White British, while 7% described their ethnicity as Black and 3.6% as Asian. 416 respondents declined to answer this question.
Figure 15: Age

Less than 4% of respondents were under the age of 27. 15% under the age of 30. 50.5% were aged between 36 – 50. 35% between 51 – 66 years of age. 0.2% were over the age of 67.

6. Conclusions

6.1 UNISON members overwhelmingly do not support any increase to the NMC registration fee. There are significant expressions of anger amongst registrants both in relation to the previous (mis)management of the NMC and also in relation to the impact that the proposed registration fee increase will have on registrants.

6.2 To date, the NMC have not managed their finances with due diligence. This has led to registrants having little confidence in the NMC’s financial assessment and their ability to address the current financial short fall.
6.3 UNISON members believe that public protection is everyone’s business and 52% of registrants believe that Government should step in and bail the NMC out. Parallels were made between this situation and the bail out of bankers.

6.4 Only 45% of respondents indicate that they have any confidence in the NMC. This includes those who stated were Somewhat Confident, Confident and Very Confident in the NMC.

6.5 UNISON members support a proportionate level of registration fee based on earnings. We believe a fixed rate irrespective of earnings could have a disproportionate impact on new graduates and part time workers.

6.6 Confidence in self regulation is being tested as a result of the NMCs failings with only 55% continuing to support nurses and midwives having their own regulator.