

Council

Governance: Additional amendments to the Standing Orders and Scheme of Delegation

Action: For decision.

Issue: Proposes additional amendments to the Standing Orders and Scheme of Delegation relating to Council membership.

Core regulatory function: Supporting functions.

Strategic priority: Fit for the future organisation.

Annexe: The following annexe is attached to this paper:

- Annexe 1: proposed additional amendments to the Standing Orders and Scheme of delegation.

Decision required: The Council is asked to approve the additional amendments to the Standing Orders and Scheme of Delegation set out at **annexe 1** (paragraph 11).

Further information: If you require clarification about any point in the paper or would like further information, please contact the author or the director named below.

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- Context:**
- 1 This paper proposes further amendments to the Standing Orders and Scheme of Delegation in addition to those already proposed at Item 9.1 (NMC/20/39).
 - 2 The Standing Orders and Scheme of Delegation are a key element of the Council's governance framework and reflect the requirements of the Nursing and Midwifery Order 2001 and associated legislation. The Standing Orders and Scheme of Delegation set out the Council's powers and responsibilities; govern the conduct of Council business; and specify which matters are reserved to the Council and which are delegated to the Chair of Council, Committees or the Chief Executive and Registrar.
 - 3 The Council is invited to consider amendments to the Standing Orders to reflect more clearly its expectations in relation to Council membership.

- Four country factors:**
- 4 Applies across all four countries.

Discussion: Amendments to Council Standing Orders and Scheme of Delegation

- 5 Under the Nursing and Midwifery (Constitution) Order 2008 (as amended), the maximum number of Council members is 12, of whom 6 must be current registrants and six must be lay members. There must be one member from each of the four countries.
- 6 Council members are appointed by the Privy Council. The Council is responsible for conducting the selection processes and for making recommendations to the Privy Council for appointment.
- 7 The role of the Council is one of strategic oversight, governance and accountability and Council members are therefore appointed in terms of the experience, expertise, skills, and knowledge they bring, not as representatives of any particular community or constituency.
- 8 The Council recognises the importance of ensuring that it has the right expertise and voices around the table to enable it to fulfil its role effectively. It shares the disappointment expressed by the midwifery community that we were not able to identify someone with midwifery expertise who was suitable to recommend for appointment as a member of Council.
- 9 The proposed amendments to the Standing Orders at **annexe 1**, confirm the Council's expectation that membership should reflect both persons with midwifery expertise and nursing expertise and an appropriate mix of skills and background. The amendments also reflect the Council's commitment to increasing its own diversity given

the benefits this will bring to its work.

- 10 If approved, the criteria will inform all future selection and appointment processes, including the forthcoming recruitment for a Scotland registrant member which will commence shortly, the focus of which will be on securing suitable midwifery expertise.
- 11 **Recommendation: The Council is asked to approve the additional amendments to the Standing Orders set out at annexe 1.**

Midwifery implications:

- 12 The proposed amendments seek to reflect the expectation that Council membership will include midwifery expertise.

Public protection implications:

- 13 The Council's overarching statutory duty to protect the public is reflected in the Standing Orders and Scheme of Delegation.

Resource implications:

- 14 There are no specific resource implications arising from these changes.

Equality and diversity implications:

- 15 The proposed amendments reflect the Council's commitment to increasing its own diversity given the benefits this will bring to its work.
- 16 We undertake a full equality impact assessment before each selection process to ensure it complies with the Equality Act 2010 and does not discriminate against or impact adversely on any protected group. Where we identify a potential negative impact we take steps to mitigate the impact.

Stakeholder engagement:

- 17 Not applicable.

Risk implications:

- 18 The Standing Orders and Scheme of Delegation are a fundamental element of the Council's governance framework and should be kept up-to-date.

Legal implications:

- 19 Article 12, Schedule 1 of the Nursing and Midwifery Order 2001 gives the Council power to determine its Standing Orders and Scheme of Delegation. The Standing Orders are compliant with the Council's powers and responsibilities in the Order.

3 The Council

3.1 Objectives and Powers of the Council and scheme of delegation

3.1.1 The objectives and powers of the Council are set out in the Order.

3.1.2 The matters reserved to the Council, and the responsibilities delegated to the Chair and to the Chief Executive and Registrar, are set out in the scheme of delegation adopted by the Council from time to time (Annexe 1). The responsibilities delegated to committees are set out in the terms of reference (Annexe 2) adopted by the Council from time to time.

3.2 The Chair and members of the Council

3.2.1 In accordance with the Order and the Constitution Order,

(a) the Council consists of six registrant and six lay members. The Council must include at least one member from each of England, Northern Ireland, Scotland, and Wales who lives or works wholly or mainly in that country;

(b) the Chair and members of the Council are appointed, and their terms of office determined, by the Privy Council.

Proposed addition

3.2.2 Subject to 3.2.1, in setting any selection criteria for new Council members, the Council will seek to ensure that at any given time:

(i) the membership of the Council reflects a mix of background, knowledge and skills;

(ii) the membership of the Council reflects the diversity of the public that it serves; and

(iii) registrant membership of the Council includes both persons a) with nursing expertise and b) with midwifery expertise.