Appendix A – Process for Referral to Regulatory Bodies from the Trust.

Concern raised/Incident reported. Escalation to datix if appropriate. Escalation to Senior Clinical Team and Safeguarding if indicated



Chief Nurse* to be informed at earliest opportunity. Log of referrals updated by Chief Nurse*/Chief Nurse's Executive Assistant. Decision made by Chief Nurse* as to whether issue can be resolved at Trust level



Following approval from the Chief Nurse* – REFERRAL TO THE REGULATOR to be completed by the Deputy Chief Nurse/Divisional Director of Nursing/Head of Midwifery/Head of Service to send letter to staff member informing them of the regulator referral Cc: Chief Nurse*/HR Advisory Team.

A copy of the online form must be retained and shared with the Deputy Chief Nurse (With Professional body referrals in their portfolio) and the Chief Nurse's Executive Assistant by email to wah-tr.nmcatwaht@nhs.net for addition to the Log of Referrals. Support plan to be identified



Information and supporting evidence to be collated by the Head of Nursing/Head of Midwifery/Lead AHP endorsed by the Chief Nurse* Requested Information for the regulator with supporting evidence will then be completed by the Head of Nursing/Head of Midwifery/ Lead AHP and endorsed by the Chief Nurse*



Any subsequent requests for Information/Statements requested from the regulator must be coordinated by the Chief Nurses Executive Assistant, checked for accuracy from the Divisional Director of Nursing/Head of Midwifery/Head of Service and reviewed by the Chief Nurse* before submission to the regulator

Appendix B Process for Referral received from the NMC

Letter of notification received from the NMC



Chief Nurse* and Site Deputy Chief Nurse/Director of Midwifery to be informed at earliest opportunity. Safeguarding team to be notified as appropriate. Deputy Chief Nurse to liaise immediately with relevant Divisional Director of Nursing/Head of Midwifery.



Requested information from the NMC with supporting evidence reviewed by the Head of Nursing/Head of Midwifery endorsed by the Chief Nurse* before being submitted from the Chief Nurses Executive Assistant securely



Head of Nursing/Head of Midwifery will send letter to staff member informing them of referral received from the NMC Cc: Chief Nurse and Employee relations Manager. Support plan to be identified



Monthly HCPC/NMC discussion with Senior team and HR Advisory Team at NWAG. Designated Deputy Chief Nurse – monthly calls with NMC to ensure alignment Designated Deputy Chief Nurse – Ensures database accurate and up to date



Chief Nurse* reports quarterly to QGC and Board.



Monthly NMC Discussion at NWAG to ensure database updates are timely and accurate



Any subsequent requests for Information/Statements requested from the NMC must be coordinated by the Chief Nurses Executive Assistant, checked for accuracy from the Divisional Director of Nursing/Head of Midwifery/Head of Service and reviewed by the Chief Nurse* before submission to the NMC



Database to be reviewed monthly and updated by Designated Deputy Chief Nurse to ensure all communication is updated Deputy Chief Nurse to update database further following Monthly liaison with NMC

All correspondence received into the trust to be sent to the Chief Nurse's Executive Assistant to be added and stored with the database

Appendix C Process for referral received from the HCPC

Letter of notification received into the Trust from the HCPC



Chief Nurse and Deputy Chief Nurse/Lead AHP to be informed at earliest opportunity. Safeguarding team to be notified as appropriate



Requested information by the HCPC with supporting evidence reviewed by the Lead AHP endorsed by the Chief Nurse* before being submitted from the Chief Nurses Executive Assistant securely



Head of Service/Lead AHP will send letter to staff member informing them of referral received from the HCPC Cc: Chief Nurse and Employee relations Manger. Support plan to be identified



Any subsequent requests for information/statements requested from the HCPC must be coordinated by the Chief Nurses PA, checked for accuracy from the Head of service/Lead AHP and reviewed by the Chief Nurse* before submission to the HCPC



Monthly NMC Discussion at NWAG to ensure database updates are timely and accurate



Database to be reviewed monthly and updated by Designated Deputy Chief Nurse to ensure all communication is updated

All correspondence received into the trust to be sent to the Chief Nurse's Executive Assistants to be added and stored with the database