



Enabling professionalism 2022

Defining what the contribution of nursing or midwifery 'is' sets out where nurses and midwives and the broader family of nursing and midwifery might be most effectively used in current and future services. The creation of a collective voice to outline the contribution of nursing and midwifery to others, such as policy makers, the media and the public, through the use of stories¹ is intended to strengthen professional identity building confidence and motivation within nursing and midwifery teams.²

If people are to understand where nurses and midwives contribute most value to future services distinct to other professions, the art and science of the professions should be spoken of in a tangible way that has meaning to all³. It is hoped that the construction of a conceptual framework, completed during a refresh of Enabling Professionalism work, should support future generations of nurses and midwives to personal and professional fulfilment through an understanding of purpose and strengthened professional identity.

The framework is constructed under 'defining characteristics',⁴ developed to articulate the breadth of practice through the domains of:



1. a. Descriptors of registration and level of educational achievements. **[Context]**
- b. Descriptors of the varied and changing environments and models of care / practice that nurses and midwives work in, including the potential for leading and co-producing future transformation. **[Context]**



2. Descriptors of what nurses and midwives do as professions for the public when they prescribe and provide care, treatment and services. This includes the contribution of leaders, public health nurses, educators and researchers. **[Mode of Intervention]**



3. The core attributes of nurses and midwives that prepare them to work in a particular way to make their particular contributions. **[Attributes]**



4. The impact of nurses and midwives as regulated professions to the health and wellbeing of populations and society as a whole. **[Professional Impact]**

Using the framework to create a collective voice

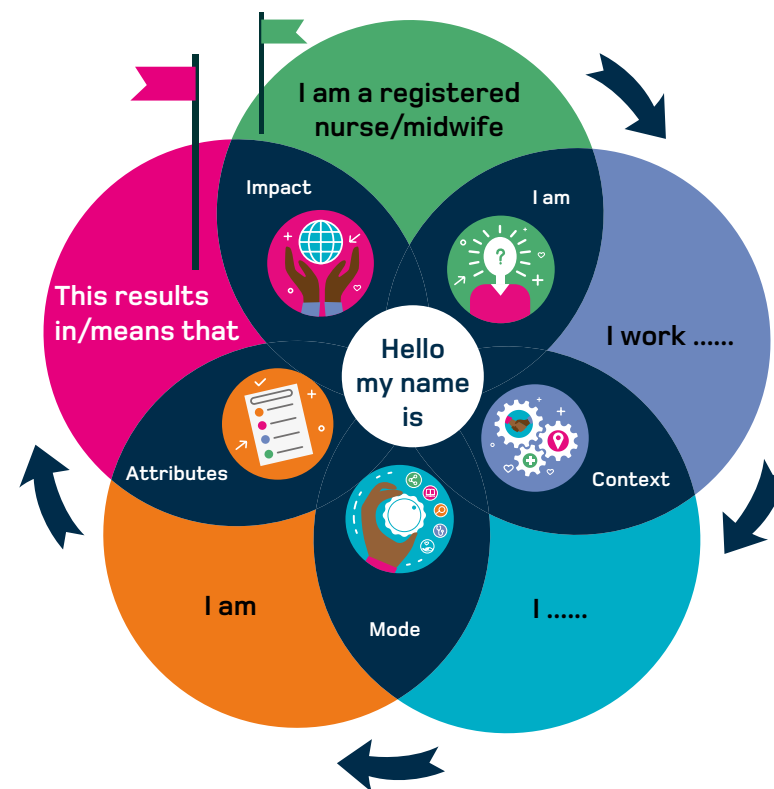
The development of a conceptual framework to define what nursing and midwifery 'is' offers some guidance for the construction of stories, presented by nurses and midwives across the United Kingdom and Ireland, initially in celebration of the extended Year of the Nurse/Midwife and Nursing Now 2020.



Nurses and midwives across the five countries will be able to access the framework and use it to talk about their work - it is hoped that by using a similar format each time, the public and others will begin to hear consistent messaging around the professions and make sense of the breadth of nursing and midwifery careers, including the impact that nurses and midwives have on population health.

Construct of the Framework

The concepts arranged within the framework are organised in an order below, but can be used in any order deemed useful to the audience:



Prompt Sentences

After a nurse or midwife introduces him or herself, each part of the framework should be worked through providing further detail. Prompts have been provided as an example of what a nurse or midwife might say in each section to guide the development of each story:

Prompts for Context:

I am:

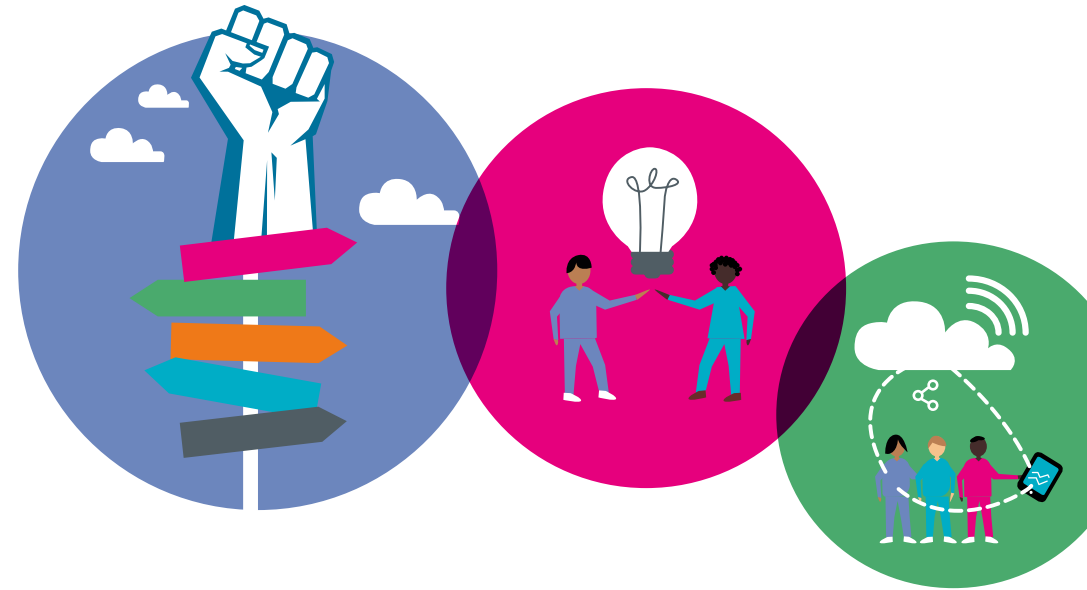
- A registered nurse/ midwife
- Educated to [insert level of academic achievement]

I work in:

- type of environment e.g. government, regional organisation, education, research, hospital based, community based, schools, care homes, day centres, prisons etc.

I work in partnership with:

- stakeholder group e.g. children, families, adults, pregnant women, student nurses, student midwives, researchers, policy makers, ministers, educators, regulators, civil servants, multi-professional health and social care partners, etc.
- people with increasingly complex conditions [provide example]
- people with associated conditions of ageing such as dementia and Long Term Conditions [provide example]
- people, families, carers, communities and significant others [provide example]
- health and social care leaders and policy makers



Prompts for Mode of Intervention:

I:

- connect with the person, building a relationship to understand need
- assess, diagnose, prescribe, treat, educate and advocate for and with people
- evaluate plans of care
- use evidence to guide decision making
- work with other professions whilst acting independently (autonomy)
- supervise, lead and manage teams, organisations, policy and strategy decisions
- carry out clinical interventions including advanced interventions
- use leadership knowledge and behaviours
- promote improvement in health and wellbeing at population, national and community levels
- educate others
- carry out research
- enable safe environments



I am knowledgeable/expert in:

- building trusting relationships with people to minimise distress
- when and how to facilitate difficult and challenging conversations [include example e.g. end of life care, changes in lifestyle, raising concerns of safety]
- screening for appropriate referral/signposting to other services
- risk assessment to promote safety, health and wellbeing
- interpretation of results and findings of screening, diagnostic tests and risk assessments
- recognising and anticipating deviation to support accurate decision making
- safety and quality improvement
- leading and coordinating care across other professions
- a broad range of research methodologies
- techniques to teach and engage future nurses and midwives
- mentoring future multi-professional leaders
- global impacts of the wider family of nursing and midwifery to lead and advise policy decisions



Prompts for Attributes:

I am Accountable
[Practise effectively]

- Problem solving
- Able to make clinical decisions
- Able to challenge
- Reflective
- Evidence informed

I am a leader [Promote professionalism and trust]

- Autonomous
- A coordinator
- Trustworthy
- Innovative
- System thinking
- Strategic



I am an advocate
[Prioritise people]

- Emotionally intelligent
- Resilient
- Impartial
- Compassionate

I am competent
[Preserve safety]

- Technically competent
- Critically thinking
- Professionally curious
- Always learning and developing throughout my career



Stem sentences for Professional Impact:

This means that I:

- Provide treatment to people, families and communities
- Prevent illness [specific example]
- Enable people to engage in self-care and recovery [specific example]
- Promote the independence of people [specific example]
- Support people to optimise healthy choices and live well [specific example]
- Support people to partner in their care and service arrangements [specific example]
- Support women and families towards a safe transition to parenthood [specific example]
- Support people through adversity/ reverse adversity in the lives of people [specific example]

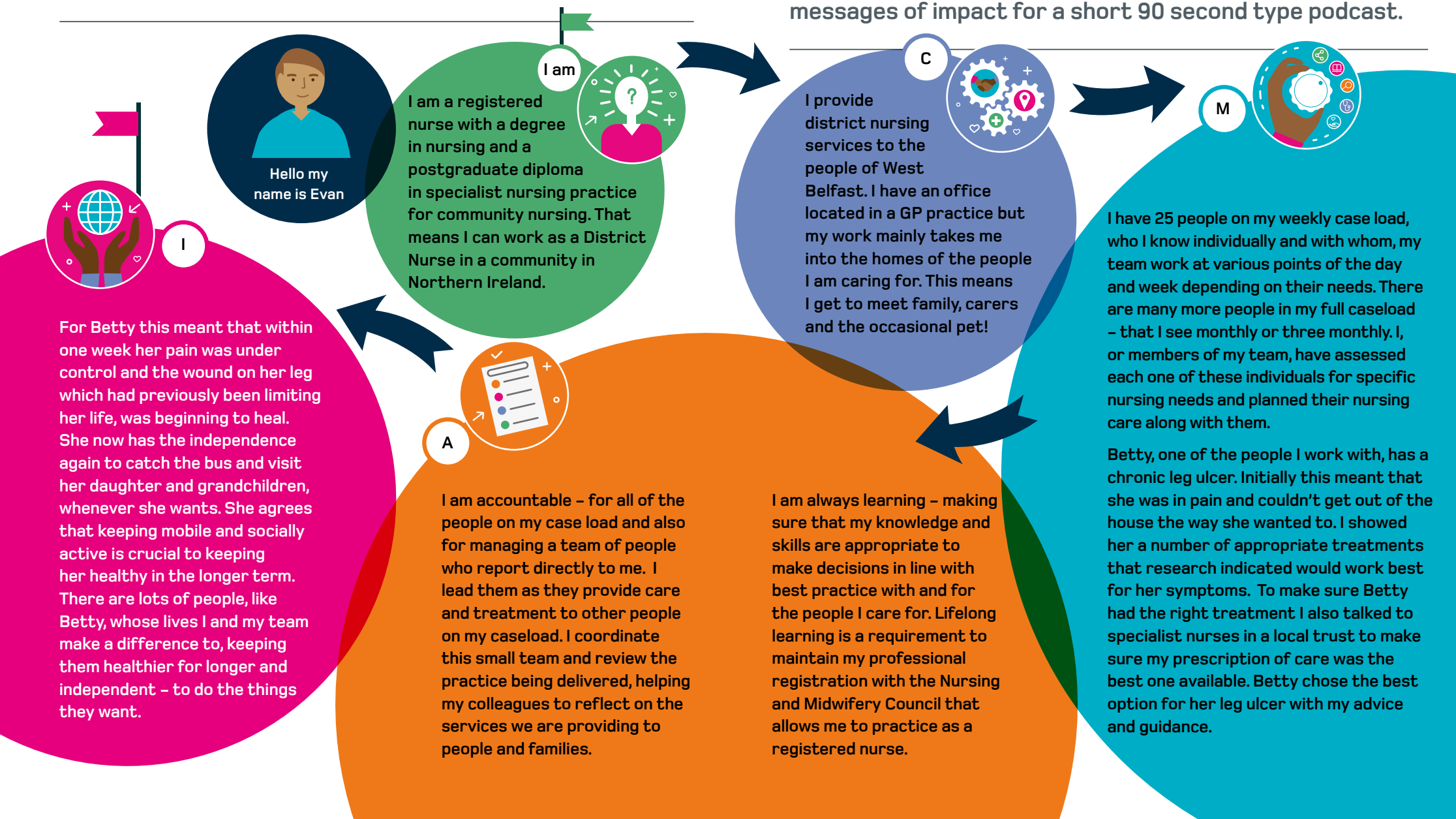


- Encourage and support equitable care and services across populations [specific example]
- Reduce inequalities and improve safety in maternity care
- Address health inequalities [specific example]
- Shape policy [specific example]
- Shape practice [specific example]
- Shape education [specific example]
- Produce new knowledge [specific research example]
- Educate and develop new generations of nurses and midwives [specific example]
- Initiate, lead, guide and direct innovation, change and service transformations [specific example]

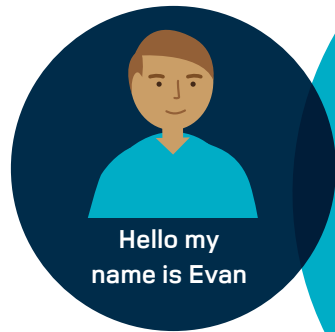


To use the framework, prompts should be selected from each section of the framework. Individuals can use as many or as few as they feel necessary to describe their work.

The worked examples at page 7 and page 8 are intended to assist in the construction of stories demonstrating how the framework is used. Page 8 particularly picks out messages of impact for a short 90 second type podcast.



Shortened Re-ordered Version:



M

I, or members of my team, assess each person for specific nursing needs and plan nursing care in partnership – like Betty, one of the people I work with, who has a chronic leg ulcer. She was in pain and couldn't get out of the house the way she wanted to. I showed her treatments that research showed would work best for her symptoms. Betty chose the best option for her leg ulcer.

I

I For Betty this meant that within one week her pain was under control and the wound on her leg which had previously been limiting her life, was beginning to heal. She now has the independence again to catch the bus and visit her daughter and grandchildren, whenever she wants.

C

My work mainly takes me into the homes of the people I am caring for. This means I get to meet family, carers and the occasional pet!

A

I manage a team of people and review the practice being delivered, helping my colleagues to reflect on the services we are providing to people and families. I am always learning – making sure that my knowledge and skills are appropriate to make decisions in line with best practice with and for the people I care for. Lifelong learning is a requirement to maintain my professional registration with the Nursing and Midwifery Council that allows me to practice as a registered nurse.

I am

I am a registered nurse with a degree in nursing and a postgraduate diploma in specialist nursing practice for community nursing. That means I can work as a District Nurse in a community in Northern Ireland.



References

- 1 Wadsworth, P., Colorafi, K. and Shearer, N. (2017). Using Narratives to Enhance Nursing Practice and Leadership: What Makes a Good Nurse? *Teaching and Learning in Nursing*. 12: 28 – 31.
- 2 Traynor, M. and Buus, N. (2016). Professional identity in nursing: UK students' explanations for poor standards of care. *Social Science and Medicine*. 166: 186 – 194.
- 3 Barrett, E.A.M. (2017). Again, What is Nursing Science? *Nursing Science Quarterly*. 30(2): 129 – 133.
- 4 Royal College of Nursing. (2014). *Defining Nursing*. London, RCN. P3.

The original work of: *Enabling Professionalism in nursing and midwifery practice* can be found at:
www.nmc.org.uk/professionalism

