

Supporting information from employers

Speakers

Lani, Maribel, Natasha Dare, Lucy Gillespie, Dilla Davis, Kier Dungo

Lucy Gillespie 00:03

So welcome everybody to our webinar series on recruiting, retaining and valuing the social care nursing workforce. Today's session is all about the supporting information from employees. And with us today we have a variety of people who are able to talk about that process. So I'd like to welcome Natasha Dare from the NMC and fellow nursing colleagues from across social care. So, Natasha, would you like to introduce yourself?

Natasha Dare 00:37

Yes, hello, everyone. My name is Natasha Dare. I'm head of regulatory policy at the NMC and I've been working on our English language requirements for some time, so hopefully I'll be able to answer all of your your thorny questions today.

Lucy Gillespie 00:51

Thank you, Natasha. Kier. Would you like to introduce yourself?

Kier Dungo 00:55

Hi, good afternoon, everyone. My name is Kier Dungo. Currently just left the previous organisation where our nurse has gone through the CIF pathway. But I'm now working as a managing director in Gold Care Homes. Thank you.

Lucy Gillespie 01:09

Thank you Kier. Lanie and Maribel.

Maribel 01:11

Hi I'm Maribel Pasqua. I'm the manager of Lani, who went through the SIFE pathway, she's got her pin now

Lani 01:22

Hello, I'm Lani. I'm learning I'm saying, I just got my pin last week, and through the SIFE pathway.

Lucy Gillespie 01:32

Brilliant. So this is really current, isn't it? It's just happened hot off the press. So Dila, please

Dilla Davis 01:38

Hello I'm Dila I'm a lecturer at King's College London, and my colleague and I campaigned for the strength in English language test and for the implementation of the SIFE pathway. Thank you.

Lucy Gillespie 01:53

Thank you Dila. Great to have you all here. So I'm going to hand over to you Natasha, and we'll pop your slides up.

02:00

well, thank you very much for having me here. Today, I'm going to tell you a little bit about how the supporting information for employers new NMC option for telling us about your English language competence works and give you some some of some of our latest data. But how many people have actually managed to use it today, which is very encouraging. So everyone who wants to join our register has to have English language competence, enough to allow them to be able to communicate appropriately in practice. And that means they've got to have English language competence across four language skills, reading, writing, speaking and listening, I say everyone has to show us that they have that English language competence. There are three main types of evidence that we will accept from people applying to join our register. Evidence type one, which is what most people provide us, if you're trained outside the UK is that you pass an English language test that we accept. Another is that you have a pre registration Nursing Midwifery, all nursing associate qualification was taught and examined in English. So of course, everyone who was trained in the UK will have that as their evidence. And then you can also have done at least a year of Nursing Midwifery practice in the majority English speaking country. And all of the evidence that we are looking for from applicants has to be recent, it has to be objective, and it has to be easily checked by us. And that underpins three types of evidence that we accept upfront from applicants. So recently, we started accepting supporting information from employers or SIFE, in addition to two of our evidence types to help people who were struggling to just meet the requirements to show us that their English language competence was sufficient. And the people who can use SIFE to support their application must have been working for at least 12 months in non registered practice in health and social care in the UK, and it's for people who have either been trained in English, but in a non majority English speaking country, so those people will be need solid to provide us evidence of their qualification being taught and examined in English. But science can be the supporting information for them to show that they're speaking and listening skills are up to scratch. And it's also available for people who just missed

our required test scores in one language domain only as long as they've tried to exhaust all of the test combining options that we have available. So it's for people who really are struggling on more than one occasion to meet our English language test score requirements.

Natasha Dare 05:03

And this is a new type of evidence that we'll accept. So we need to be really careful that it is a really quality piece of evidence that we are going to be looking at. Because English language competence is so important for practising safely in the UK. So people must have been practising in the UK in health and social care. So the setting was relevant to the work they're going to be doing when they actually come onto our register for at least 12 months or equivalent, if they've not been working full time. It must come from only one employer, and their line manager must sign a declaration and tell us about examples of their English language proficiency. That line manager must also be an NMC registrant. And that was really helpful because it means that they are working in the studio, that they're doing the same kind of work that the applicant will ultimately be doing and working to the same code. They're really well placed to judge whether the applicant has the right English language skills that we're looking for. We also need it to be countersigned by senior and enrich NMC resident at the same employer. They don't need to be guite so involved with the applicant, but what they're there to do is make sure that there's an objective process that the line manager has followed when they when they're making that declaration. And you can't have any more than two line managers over that 12 month period. So those people really have to get to know you in detail. And you make your application through NMC online as you would put the rest of the information that you give us about your qualification about health and character and our other requirements.

06:40

So the line manager is heavily involved in this process, we need to know who they are, we need to know the dates in which they're like your line manager, we need to know their band as well. And they need to be an NHS band six or non NHS equivalent or above. So there have seen the suitable seniority to be able to do this. And we give line managers examples of the types of skills that they need to have seen practice. And we asked them to confirm that they have seen that type of skill. So we're quite specific. And what we asked line managers to tell us about then the counter signatory again, they need to give us their information, including their pin, they need to be an NHS Band 8 or non NHS equivalent or above. So there'll be almost certainly there'll be senior to the line manager. So they're in a good position to judge what the line manager is telling us. And they've got to tell us that the line manager has used suitable professional judgement, and that the information is accurate and fair and objective. So they're a good a good check on what we've been told by the line manager and by the applicant. So I did want to make you aware that SIFE is not for everyone. You need to have been working in the

UK for 12 months in a health and social care setting. So it's quite specific, isn't for people who are currently practising overseas wanting to move to the UK or who've only just moved here. And we're asking for line managers to have seen substantial evidence of their language skills. So we're giving them examples and saying, we need you to have seen all of these skills in practice. And of course, there's no obligation on line managers or cam signatories to provide safe. So they are we were asking them to use their judgement. And if they don't think someone's English language competence is sufficient, then they shouldn't be providing this. We know that that the setup we have for safe means it's going to be harder for some applicants to use than others were aware of that. That SIFE is a new type of evidence, and we really need it to be robust. So we've put deliberate restrictions on its use. We're going to be monitoring how it's used, and if we could consider expanding it at some point in the future. But we are due to report to our council on how Saif has gone since we introduced it earlier this year in July 2024. Until we've reported to our council on a year's worth of findings, we're not planning to make any changes to it. And we're very happy to answer your questions. But we won't be looking to move away from the setup that I've already described. Because of course, it's really important that the people who come onto our register, are able to provide safe and effective care to people in the UK. And really key to that is your communication skills. You've got to be able to communicate effectively with patients, the public colleagues, your employer, other professionals around you to be able to provide that safe and effective care, we're really mindful of the fact that that's our absolute number one priority as the NMC So, having said that, this has actually been quite widely used as an evidence type which is great. It's nice to know that this is actually suitable and appropriate For a number of applicants out there, and so far, I think this was until October 817 applicants had been able to use this to be able to join our register, which is great. You can see that the the, from the pie chart on the slide that the majority of those people were from India, but the number of countries with applicants who are using this is only expanding over time. So we're seeing that it's applying to people coming from a range of different qualification countries. And so far, the vast majority of people using it have been adult nurses. That's the majority of people who join our register from outside the UK. But even still, it does suggest to us that these are the people who are going to benefit most from this particular option.

10:57

Last thing for me is there is a host of information on the NMC website. And it's absolutely where I direct people if you have questions. In the first instance, we have details of our English language requirements. And more broadly about the other information you need to give us if you want to register with the NMC and that includes a checklist for applicants. So you can go through you can say what you have, in your circumstances to meet all of our requirements. And double check the what you have is what we're looking for. We also provide information for employers because they're so important in the safe process. And we've also set up a test score combining calculator.

So we know that people wins, particularly if you've taken one of our language tests twice. And you want to try to work out whether you have met our scores or not, we know it can be a little bit complicated. So we have a calculator on our website where you can just put your particular scores in. And it will tell you either whether your scores are good to go as they are, or whether they're not and you need to retake the test or whether you would be eligible for SIFE, if your circumstances allow for it. Because if you just miss our score our test scores in one language domain only, then you are eligible to use SIFE, as I say, provided that you've got the practice and the sign off. So that's what our calculator will allow you to work out for yourself. Okay, that's it. From me and my presentation, I'll hand back to colleagues and understand we'll be taking questions at the end in one go.

Lucy Gillespie 12:39

That's great. Natasha, thank you very much for running through that. And so the first thing we're going to do is move to a real life example. And I'd like to invite Lanie and Maribel really to come on to talk about their journey in that experience. So Lanie, do you want to tell us a bit about what brought you to use the SIFE pathway and your experience as a nurse?

13:06

Hi thank you very much for your very clear explanation. And all of those that Natasha did. I had that experience going to NMC websites and looking for the requirements. And also I received some emails about the SIFE long time ago that it will be implemented later on in summer, something like that. But that time I didn't do the OSCE yet. Then I studied the OSCE then I tried to assess it was not easy, because I'm waiting for the safe to be implemented there, but the website, NMC website, and sometimes I call their office, they're really, really helpful of what to do. And my SSR online. They're really helpful to guide me on what to do step by step and just fulfil the fill their requirements and they will, they will agree to you.

Lucy Gillespie 14:19

Right, thank you and your experience previously. So what is you know, what's your experience of being a nurse?

Lani 14:27

Okay, I work more than two years in nursing home and in emergency hospital. And so, I meet a lot of patients, and I think I have the capacity to communicate properly with them, because that's the number one thing you need to do. Because we are dealing life, you know, if we don't, we don't understand them. How can we deal with everybody? Yeah, great.

Lucy Gillespie 15:02

So Maribel, you are Lani's line manager and therefore you've supported this pathway. How has that experience been for you?

Maribel 15:14

It was really great because it was my first time as well, so it it's kind of thing but like, what I do with other my, with my other staff here, so we've supported her by giving her supernumerary hours just to be doing Nurses Week, I gave her the support. And then, of course, everything after that, make sure we are completing complete while completing her competencies. We do observation, she's communicating with residents and relatives. And, and aside from that, I have provided her with clinical training. I made sure that she's really equipped to be a nurse.

Lucy Gillespie 16:01

And and how long have you been out of practice as a nurse Lani

16:11

not too long, because I needed the pin before I practice as a nurse

Lucy Gillespie 16:20

Because I guess for there are lots of people as well, who's perhaps been on this journey for a long time, and may wonder what that support might look like from their employers as well. So I think, you know, Maribel there what you explain that support is perhaps what people need to be thinking about, because for some people who've been out of practice for a long time, they will need some support to, to, you know, build those confidence in their confidence and skills. So can I bring Kier into the conversation because you were the counter signatory? And if I'm right,

Kier Dungo 16:55

yes, that's correct. Lucy. I was Maribel's line manager at the time during the SIFE pathway for learning. So, yeah, when when he was first brought to my attention, I was sceptical. I said, Really, does it exist? I never knew that so. So before I sign it off with as counter signatory I have to read first, what are the caveats? Did Lani fulfil all those requirements? So? And then Maribel presented me with a form. And I wasn't really, really sure. So I said, Let me see. Lani, then on practice. So I have to observe her as well, just to feel just for my reassurance that Lonnie could really fulfil their dreams of being a registered nurse. So yeah, it was it was quite straightforward. Because after the discussion with Maribel, how Lani has fulfilled the requirements on the form, how she has proven that she could communicate well with the external stakeholders, the service users, her colleagues, as well. And we even sat her during clinical governance meetings, just to discuss and go through that. So So yeah, so that's what we have gone through with Lani.

Lucy Gillespie 18:14

Right? And how long has the process taken from beginning to end?

18:20

Maribel would be the one to to answer. When did we start with Lani?

Maribel 18:26

Actually, from the beginning, from when she was about to she when she was taking her exam? He immediately gave her the chance to learn from the floor. person in charge, which is, like I said, so it's, anyway, the support I gave her it's more than 100% because

Kier Dungo 18:48

she heard her exams in line.

Lucy Gillespie 18:53

Okay. So Is that so? Can you work out how long that process took? Roughly?

Maribel 19:02

Yeah, she's saying more than one year because Yeah. Like you said, Okay.

Lani 19:11

Let's see if you know, And the time when I started to do those trainings, it's

Lucy Gillespie 19:19

yes, it's relatively new. Great. Well, congratulations. You know, on getting your pin and now working like now as a registered nurse with the NMC and so we're going to move over to dealer now and go if we can get Dilla's presentation up these days a and bring dealer onto the screen. Over to you Dilla.

Dilla Davis 19:47

Thank you. It's just a very short presentation on some of the testimonies that we received on our Facebook page. So yeah, okay. So, this the first applicant, the applicant started in May and in November completed full registration through the SIFE pathway. Some of the reflection from that applicant is that he foresaw the process as long and tedious. So whenever he the applicant put in the information he made sure that it was very accurate. Also, the highlight here is supportive managers. So, when Maribel said I gave 100% support to Lani, that's important that relationship is there for someone to complete the survey pathway. Also, here it says each case is unique and NMC examines each and every case to make sure we act on qualified optional according to the NMC guidelines. So, whoever the testimonials that we received, always give emphasis on that that the NMC is very proactive and looking at how how, how

what's the what how credible they would be as a professional. So, that's why the process takes quite quite long sometimes and sometimes it is tedious for those waiting for the pin hear from the person past the OSCE July 21 And when when the pin issue today it is November 2023. So almost two years and this is because the person worked part time

22:10

and here the applicant says that with all the anxiety for that waiting game, it is worth it the getting your pin number is worth it. This person this person received the pin number within a year, September 2022 The personnel arrived. But this person was very focused he wanted the person wanted to get the pin number. Started the NMC registration completed the OSCE everything and then the NMC asked a very important question, Did you complete twelve month here in UK? And the person did ask us? How should we, how should this person answer to the NMC and we said you have to be very, very careful not careful you should be you should make sure that you complete all the criteria required to complete the CFA pathway. So as soon as the person completed the 12 months being in UK, the person answered NMC yes completed 12 months the SIFE form was submitted by the manager and he had gone to pin number and started working as as a registered nurse from October 1 onwards. So one year September to September, received the pin number and then moved on to band five but 12 months. So what the applicant says is transparency, proper submission, seeking guidance. So if you are in doubt, just email an MC and check out whether it is okay to provide this kind of a form or this kind of an information. And they would let you know. Yeah, so that's that. So those are the testimonies proper submission, current information would wait patiently knowing that it is a long and tedious process. Some of the differences between the language test and SIFE pathway. Natasha didn't mention that they want an objective kind of an evidence, language test our objective, but these they are not authentic. When I say it is not authentic, it does not exist in a clinical context where the real communication should occur, it is done on the exam conditions and interview pathway. You have that adaptation time to adopt to the cultural nuances of the language, because it is not just language proficiency that is assessed in a clinical context. It is how You communicate how well how compassionate you can be? How could you break bad news to the patient? How do you welcome a patient to the to the ward? How do you transfer a patient? Those kinds of kinds of language proficiency is required. And this is assessed in the clinical context. And I think that's it. That's it from me. So, one thing is we have a Facebook, a closed Facebook page with around 5000. Participants, not participants, members, and the they are unregistered practitioners walking towards the nmcp number through the Syfy pathway. So we do provide periodic webinars through the face, throw teams, given or communicating with him the updates and answering the questions as well. Yeah, that's it.

Thank you, dilla. That's great. Thank you for sharing that. And I think, you know, obviously, there's large numbers of this happening, have, you know, with nurses, and lots of those we know are in NHS settings. But we do have those examples of where it's been done in social care. So our first question is from Anna, in our audience, and Anna works in a small independent nursing home. And obviously, we don't have agenda for change banding in social care. So some of that definition gets a little bit lost. And also, how do they use the sippy pathway if they haven't got those senior registered nurses in their organisation?

Natasha Dare 26:54

Yeah, certainly. So yeah, we are well used to dealing with non NHS staff. So there's no problem like that. But we tend to advise people is to have a look on the agenda, change website, look at the description. And then if someone's able to tell us that their role fits the same description, then that's that's no problem. So there's no barrier like that. But we are looking for someone who has band aid as the camp signatory. Just because we do want someone who is an NMC registrant man who is suitably senior to have overseen the process. I am aware that's a barrier for some people. And as I say, it may be something that we consider in the future, we may consider whether we would allow someone from a different regulated profession to be able to be involved. But for now, we haven't even had this in place for a year. And it's a new type of evidence for us. So as you might imagine, we want to be keeping a really close eye on who's using it, and what the outcome of that is. And so I think we need just, we need to be almost more conservative than if it were, if it were amending something we've been doing for a while that would be different. This is the first time we've accepted this. So we do need to be careful. So I'm aware, it's not for everyone. But of course, the we, this isn't reducing the routes for anyone. If you can pass the opposite, often the most straightforward thing is to use all the support material available, and we signpost to lots of free support material for the two language tests that we accept. I know some people struggle to pass tests, but keep bashing away at it use all support material available, take practice tests, and of course, time spent working in the UK will improve your English anyway. So then you might find that the time that you spent working, hoping to use Saif that same time working will actually help you to pass a language test anyway, if Saif isn't available for you and your particular setting.

Lucy Gillespie 28:58

Thank you, Natasha. Kier, I wonder if your from your perspective and obviously volunteering to do that role. What did you kind of find that process quite easy? Or or, you know, matching up to the band aid agenda for change? How was that? Yeah,

Kier Dungo 29:16

because we set our own salaries in private social care. So what I did was just to check it on the I was just gonna send it on the chart, the agenda for change through NHS

employers, and then you can see the the equivalent there in terms of banding. But I think it's easily met if we're only requiring band six, because if it's a nursing home, it's easy because we have unit managers clinical leads or deputy managers or clinical requirements with CQC. So there should be someone senior clinical, who could be the signatory or the line manager of the necess

Lucy Gillespie 29:57

I guess in some of the smaller In independent homes, you know, that's sometimes that's all one person. And that can be a challenge. But I mean, Natasha, is there a way that people can connect with the NMC to explore some of that? Is that useful to the NMC as well?

Natasha Dare 30:16

I mean, we're happy to look at people's individual circumstances. But I would be over promising. If I said that I think that there's an easy way for very small independent care homes to be able to do this at this point in time. And I don't want to say that it's something that we'll be able to solve

Lucy Gillespie 30:36

with a phone call. Yeah, I appreciate that. And Anna has popped in there, which is something that I was thinking about was, you know, our community nursing teams often work very closely with with some of the smaller care home settings as being kind of suggested to oversee. And so it's perhaps something that we can pick up at a much later date once once some of this has been explored. Care. Did you want to come back in on that?

Kier Dungo 30:59

Yeah, because I think one of the major challenges that I can see for, for for a safe pathway to be effective in social care is there is this because sometimes nursing homes like private independent ones, they would have a non clinical manager in post, which is accepted as long as there is someone senior clinically. So for for providers, for smaller providers, it might be a challenge, even if they want to. And then we are probably going to end up with people wanting to leave the social care because they were looking for that pathway who could support them in terms of having a clinical line manager and a congress signatory who's who's clinically registered as well. And we want to encourage people to work in social care. So absolutely, we'd like to keep them.

Lucy Gillespie 31:47

Yes, I think it's, you know, it's exploring those things, isn't it and seeing what we can do to support people and again, if this pathway isn't the only pathway to registration, it's it is another option, and it's trying to, to make that as equitable as possible, and certainly what that's what we're committed to doing and I know the NMC are working very hard

on that. And I have a question from Deloitte for Diller. If that's okay, and, and I wondered if you could explore with the audience. Some of the people working in social care settings, what kind of challenges are that we, we see when it comes to accessing the SIF pathway?

32:30

One is key. I just mentioned that we want scarers in social care. So if they are all going through the safe pathway to get NMC registration as nurses, there is a deficiency of carers in social care they could be. So some of the employers in social care around will link to support them, not because of the lack of language proficiency because there is a movement, and they wouldn't love like that. And I understand that. That is one. The other layer is there is a lack of NMC registrants in clinical in the social care, as Kier already mentioned, and the third is there is a kind of lack or scarcity of nursing tasks that the nurses can showcase about the language proficiency. So they might need to in a social care, but it's what I understand. So the number of instances where they would be they could easily showcase your language competency is quite low in the social care. So they are quite reluctant to sign off their SIFE.

Lucy Gillespie 33:56

Yeah, I think I think it's very dependent on setting in place and people isn't it? And you know, when I think of some of the amazing nurses and care workers working in domiciliary care services, it's very isolated nurses are themselves working in quite autonomous role. So sometimes the link up and the connection to support people can see more disparate,

34:19

just to clarify, when you say you are assessing the language competency, it is on two domains into the safe pathway. And Natasha can correct me if I am wrong, it is the speaking and listening because reading and writing as already has through the ER nurse training which should be an English only then they are eligible for the safe pathway. So these are speaking and listening. So what are the tasks the nurse is going to showcase you?

Lucy Gillespie 34:50

I can see Natasha has got a hands raised

34:51

so thank you. Yeah, that's correct. If you want to use trained in English, then then you cyber support that if you've just missed one of our test scores And then your line manager will be asked to provide examples from the one language domain in which you've just missed the test score. So for those people, it could be any one of the four of them.

Lucy Gillespie 35:09

Right, thank you. And the question now for Lani, what would you say to other nurses working in social care about this pathway? What would you recommend to them? What's your advice to them?

Lani 35:28

Um, my advice is that, try to get the English language first. Get the score, that the that is required. And then the rest will follow quickly, I think is the OSCE and the CBT.

Lucy Gillespie 35:49

Okay, and Maribel from your perspective, as an employer, what are the benefits of supporting our internationally educated nurses through to NMC registration?

Maribel 36:02

Yeah, the benefits of, as we all know, we are, we have homes that are really lacking of nurses. So it will be start from what we have, and train them and support them going through the site decide, then it will be easy for everybody. And we don't struggle and we don't use agency nurses.

Lucy Gillespie 36:27

Yeah, supporting our workforce, really valuing the knowledge and skills that are internationally educated nurses. And what what's what social care, you know, does well is give people that platform to really be autonomous and really person centred, what advice do you give to nurses who are starting this pathway

Dilla Davis 36:49

and then build a relationship with your employers with your line manager, that is Cardinal because it is a mutual relationship, it is a give and take relationship. And that will and with that comes the rest of the opportunities, I think, to showcase the language competency, because when they both are working together, like malleable, said, when you're fully supporting somebody, you will think about ideas, how the person can showcase their language competence, competency or communication skills. However restricted the setting can be or the context can be, because the thing is to support keep the patient or base at the centre, or when you're assessing from the employer spot, will this candidate will this applicant be safe for the patient because of the language competency? If they find at any time that they are not safe? Please don't sign this form. Because if you keep the patient at the centre, I think that that gives the answer to it. But at the same time when you are not signing a form, you should have irrationally why you are not signing it off. It shouldn't be because there is no vacancy in social care for this nurse, not such arbitrary reasons it should be really accountable reasons for for the

applicant, please follow the process NMC is very clear. And all the information is there. If in doubt, please communicate with the NMC I think that's it.

Lucy Gillespie 38:31

Yeah. Right. And it's actually we've got a question in the chat. And I think from your presentation, you may have gone over this. But just to reiterate. So somebody's asking that since that clinical kind of side and management of this is so important. Can smaller social care organisations send the applicants for placements in the NHS to get this kind of proof? I think I know what you're gonna say, but I'm gonna let you do the talking.

Natasha Dare 39:03

Sorry, can you just Can you unpack that? I

Lucy Gillespie 39:05

think the question is, could nurses who are wanting to go use the SIFE pathway, go on placement in the NHS to get the supporting information returned to social care?

Natasha Dare 39:18

Well, as long as they meet our requirements, so the placement would have to be 12 months long, and they'd have to have a line manager and the placement and account signatory you'd sign them off the point at which someone joins our register. If they are competent to work in social care, then we'd be delighted for them to work in social care. But I suspect the question is more about whether a short placement would do it. And it's that's not enough. It's not what we're looking for. It's got to be 12 months with one employer with no more than two line managers.

Lucy Gillespie 39:47

And I think what you're looking for his people to really get to know you problem and understand communication. Exactly,

Natasha Dare 39:52

exactly. And it kind of expanding on that point. A question we sometimes get is where the people who are Doing bank or bank staff are able to use Cypher, they are, but not from their bank manager. What we are looking for is the line manager in the place where they're doing the actual practice to be signing them off. So we're not concerned about who someone's employer is as and where they're getting their paycheck from, or we're concerned about is exactly as you say, is the line manager who is wanting to provide safe the person who is overseeing what they are doing in a health and social care setting over that 12 month period. And as dilla said, very nicely, when you put the patient at the centre of that, you can see why that's what we're looking for.

Lucy Gillespie 40:38

Yeah, yeah. And in social care, we talk very much about the people and the person because patients, you know, this is people living in their own homes. So it's it's recognising that that language as well. So dilla.

Dilla Davis 40:53

Just Just to add to Natasha's point, we NMC requires six months of language demonstration period. So if the placement is read one line manager is six months full time, at least, that language demonstration period, it should be.

Natasha Dare 41:13

Um, the the length of the whole language demonstration period is 12 months, but will allow up to two line managers. So at least one of those line managers has to have been their manager for six months to cover that 12 month period, so that they can they're really getting to know that person in depth.

Lucy Gillespie 41:31

Right. So thank you all for contributing to the conversation today. It's been really great to have your perspectives and hopefully, people have had a bit of an opportunity to learn more about the supporting information from employers pathway.