NHS
Kernow
Clinical Commissioning Group

Nursing, midwifery and nurse associate revalidation policy

Date approved: 6 May 2022

This policy was adopted by NHS Cornwall and Isles of Scilly Integrated Care Board (ICB) on 1 July 2022.

We are working to change the branding on our policies and to make sure they are accessible.

We intend to complete this work by 1 April 2023. While this work is underway, all references to NHS Kernow, the CCG and related structures should be taken to relate to the ICB.

This policy may not be suitable for users of assistive technology. If you use assistive technology (such as a screen reader) and need a version of this document in a more accessible format, please email ciosicb.corporategovernance@nhs.net. Please tell us what format you need. It will help us if you say what assistive technology you use.

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1. Introduction

Revalidation is the process that allows nurses, midwives and nurse associates to maintain their registration with the nursing midwifery council, (NMC). All nurses, midwives and nurse associates need to meet a range of requirements designed to demonstrate how the registrant practices to the standards which are outlined in the NMC Code of Practice.

Revalidation is required every 3 years in order for nurses to maintain their registration and continue to practise as a nurse.

The NMC have set out the requirements of revalidation which can be found online at: http://revalidation.nmc.org.uk/. They are also detailed below:

- minimum 450 practice hours over 3 years since last registration
- minimum 35 hours of CPD since last registration which can be informal or formal and any new incidences of learning contribute
- 20 hours of the 35 CPD hours required must be participatory
- 5 pieces of practice related feedback since last registration. Feedback can be verbal or written
- 5 written reflective accounts written since last registration
- evidence of a reflective discussion with another NMC registrant
- declaration of health and character
- declaration of professional Indemnity arrangements
- confirmation by a third party that the registrant meets requirements, this is known as the confirmer

2. Policies referred to in this document

- Disciplinary policy
- External learning policy
- Performance policy

These can be found in the document library or on IRIS

3. Purpose

This policy aims to ensure that NHS Kernow Clinical Commissioning Group (NHS Kernow) meets its obligations as an employer to provide support to our nurses as they go through the revalidation process. The policy also aims to give managers a framework that highlights the support available to ensure that nurses are competent to provide safe and effective care.

This policy applies to all registered nurses, midwives and nurse associates employed by NHS Kernow who are required to maintain a professional registration as a contractual

part of their employment. The policy also applies to registered nurses working on temporary or ad hoc contracts.

The policy may also apply to those who are not contractually required to maintain registration with the NMC but rely on their skills, knowledge and experience of being a registered nurse. This could include roles in nursing management, policy and education, who wish to maintain their registration with the NMC.

Nurses who have multiple employers including NHS Kernow can elect to follow the process outlined in this policy to demonstrate the requirements of revalidation, alternatively they can elect to revalidate via a different employers' procedure. NHS Kernow will endeavour to support their revalidation through enabling evidence to support the requirements of revalidation.

4. Definitions

Electronic staff record (ESR)

The NHS ESR provides an integrated People and Organisational Development (POD) and payroll system to NHS organisations.

Document library

The document library provides access to the governed and ratified document types such as policies, protocols, guidelines, reports and strategies. We also store our patient information leaflets and posters and a number of internal documents such as staff survey results, staff engagement work and internal newsletters here. Internal documents cannot be seen by members of the public.

5. Responsibilities

Line managers

Line manager will support nurses and nurse associates to be able to revalidate and the process of revalidation.

Chief nursing officer

The Chief Nurse at NHS Kernow is responsible for the development and implementation of this policy.

Line managers (confirmers)

All line managers of nurses, midwives and nurse associates must ensure that they are aware of this policy and the requirements of them to facilitate reflective discussions if

NMC registered or support a nurse to find an NMC registrant to facilitate the reflective discussions. The NMC strongly recommend that nurses, midwives and nurse associates obtain confirmation from their line manager wherever possible, however it is not mandatory that you use your line manager as your confirmer. Line managers do not have to be an NMC-registered nurse or midwife, however, the NMC advise that wherever possible, your confirmer is an NMC-registered nurse, midwife or nurse associate.

Confirmers are also responsible for providing confirmation to the NMC that a nurse has met all the requirements of revalidation with the exception of health and character and professional indemnity arrangements.

POD

The POD team will oversee the revalidation process, manage any disputes and provide reports on revalidation from data held on ESR. POD will monitor the number of nurses revalidating, number of referrals, number of nurses who do not revalidate and ensure that the appropriate support is given to all individuals involved when there is a failure to re-register and revalidate.

Nurses

Nurses, midwives and nurse associates within NHS Kernow are required to follow the processes laid out in this policy and to ensure they meet their contractual requirements by maintaining their registration where this is a requirement of their role. It is the responsibility of the registrant to be aware of the NMC revalidation requirements and conditions and complete them accordingly.

6. Approach to NHS Kernow revalidation

NHS Kernow is committed to supporting nurses employed by them as they go through the revalidation process. NHS Kernow will provide structures to support nurses to achieve and demonstrate the requirements of revalidation.

It is a contractual requirement for individuals employed by NHS Kernow who are required to be a registered nurse, to maintain their registration. Failure to do so may result in NHS Kernow invoking its disciplinary policy in respect of failure to maintain registration. This may result in dismissal. Consideration will also be given to reporting the incident through the relevant risk and assurance process.

Maintaining NMC registration is the professional responsibility of the individual NMC registrant and not the organisation which employs them. Therefore, providing they maintain registration with the NMC a nurse can choose to achieve the requirements of revalidation through alternative processes not outlined in this policy.

NHS Kernow will only be able to provide evidence to support revalidation relating to work a colleague has undertaken with the organisation.

7. Procedure

All nurses will be required by the NMC to sign up to NMC online in order to submit their notification of practice (NOP).

NHS Kernow POD team will keep a database of all nurses employed. 60 days before a nurses' revalidation date the NMC will contact nurses to inform them of their pending revalidation. ESR will send notifications to the colleague at 12, 6 and 4 months prior to their revalidation date. POD will use ESR and contact the nurses' line manager and the identified most senior nurse in their team to inform them of pending revalidation. The line manager should then meet with the registrant to check all their NMC revalidations are complete.

Extensions to submit an application for revalidation can only be made by the registrant themselves and the NMC will not usually consider requests for extensions as registrants should have met the requirements for revalidation during the 3 years prior to the renewal of their registration. Revalidation can only be delayed under exceptional circumstances. NHS Kernow cannot make applications on behalf of registrants for extensions or exceptional circumstances. Should a registrant feel they may be eligible for an extension or have exceptional circumstances they should contact the NMC as far in advance of their revalidation date as possible. Further information can be found http://revalidation.nmc.org.uk/welcome-to-revalidation

8. Requirements of revalidation

The NMC requirements for revalidation are clearly set out and referenced in the introduction of the Nurse revalidation policy and further referenced in Appendix 1.

Demonstrating the revalidation requirements

Full guidance on the NMC evidence requirements and templates can be found at the NMC website. http://revalidation.nmc.org.uk/welcome-to-revalidation

It is the responsibility of the NMC registrant to collect and provide evidence of meeting the revalidation requirements, including conversations to discuss reflections and the confirmation interview, not the employing organisation.

Gathering evidence

Part of the NMC requirements of the revalidation process is that nurses, midwives and nurse associates gather physical evidence. A method of doing this is through creating a portfolio which allows nurses to keep evidence in one place, the NMC provides a

template for this. Using a portfolio to keep their evidence in one place makes it more accessible to share with their identified confirmer.

Evidence for the following revalidation requirements should be recorded in the portfolio:

Practice hours

A template is available from the NMC to record practice hours.

Practice hours do not necessarily mean hours spent in face-to-face clinical practice and can be hours worked where the colleague relies on their skills, knowledge and experience of being a registered nurse. This could include roles in nursing management, policy and education.

NHS Kernow can support revalidation by providing evidence of practice hours in the following ways:

- time sheets and/or ESR Record
- job descriptions and specifications

Continuing professional development (CPD)

CPD can involve any activity that is enabling registrants to learn anything new professionally, therefore this can range from formal training courses, an informal conversation where you learn new information, keeping up with relevant publications and research. A template is available from the NMC to record CPD and further information can be found on the NMC website which provides more detail into the various CPD activities that contribute. Registrants are required to maintain accurate and verifiable records of their CPD activities which can include but is not exhaustive: the method, a description of the topic, dates undertaken, hours, including if this was participatory, which parts of the NMC Code the CPD relates to, and evidence of having undertaken the CPD activity.

It is also their professional responsibility to complete the CPD requirements and any requests for time off for study will need to be discussed with their line manager and be at the line manager's discretion.

NHS Kernow can support revalidation by providing evidence of CPD in the following ways:

- certificates of completion of participatory and computer based/ e-learning courses
- ESR training and development records
- consideration to commissioning training events to support the CPD revalidation

Practice related feedback

Feedback can be written or verbal, formal or informal, positive or constructive.

Practice related feedback does not necessarily mean direct feedback from service users or carers. It can also be feedback on practise from colleagues such as other healthcare professionals or, complaints, team performance reports, root cause analysis investigations and other serious incident investigations or appraisal feedback.

It is recommended that you keep a note of your feedback and the NMC provide a formal template for this which can be found here: Practice-related feedback - The Nursing and Midwifery Council (nmc.org.uk). All feedback must be recorded in a way that no information identifying an individual is used or recorded.

Written reflective accounts

A template for recording five written reflective accounts has been developed by the NMC and this form is mandatory.

Reflective accounts must be recorded in a way that no information identifying an individual is used or recorded.

Reflection accounts can be about practice related feedback, CPD or any other event experienced during your practice as a nurse.

Reflection accounts can include emails or a written record following a verbal conversation.

Reflective discussion

Reflective discussions must be with another registrant who is on the same part of the register, for example a nurse and a nurse or midwife and a midwife. This discussion can take place prior to or during your confirmation interview.

A template to record your reflective discussion and for the registrant with whom you have your reflective discussion to complete their details can be on the NMC website and this form is mandatory.

Health and character and professional indemnity arrangements

It is wholly the responsibility of the registrant to confirm to the NMC that they are of good health and character and that they have professional indemnity arrangements. These aspects of revalidation are not included in third party confirmation.

All nurses employed by NHS Kernow, are provided with professional indemnity arrangements as part of their employment whilst they practice according to the NMC Code of Practice and within their sphere of competence.

For those workers engaged on an ad hoc basis, this only applies to hours worked for NHS Kernow and not those worked elsewhere or for agencies.

The NMC does not require further evidence of these areas of revalidation, and this does not replace fitness to practice.

Confirmation

In order to revalidate, nurses and nurse associates will need to provide confirmation to a confirmer that they have evidence which will meet all the requirements of revalidation with the exception of health and character and professional indemnity arrangements, see above.

The NMC outline that confirmers do not need to be another registrant. Registrants have the opportunity to decide who is best placed to provide their confirmation. The NMC advocates that, where possible, and for ease, your confirmer should be your line manager, NHS Kernow supports this. Confirmers are required to review the factual evidence that has been provided to them by the registrant to support revalidation outlined above and to confirm to the NMC that they registrant has met those requirements. The NMC has information on their website for confirmers.

The NMC has provided a confirmation form and this form is mandatory.

Nurses, midwives and nurse associates are not required to send all their evidence of revalidation; however, they may be asked on occasion to provide further verification. The evidence of revalidation is checked by the confirmer, checked at the above appointment and nurses and nurse associates must provide a declaration that they have met the requirements. This contributes to part of the electronic declaration form which is included as part of the confirmation interview.

The NMC will contact nurses directly to let them know how to provide their declaration electronically.

NHS Kernow and the NMC

The NMC may contact NHS Kernow to request further evidence and information to verify the declarations that a nurse has made as part of their revalidation application. This will be part of a selected audit sample and not because there are concerns about the nurse.

NHS Kernow will share all appropriate information requested by the NMC as part of revalidation and inform the colleague. Concerns regarding the sharing of information should be directed in first instance to the information governance lead.

Disputes and non-compliance

Where a dispute arises over revalidation confirmation this will be referred by the line manager to NHS Kernow's chief nurse and the relevant People and OD Partner. Revalidation is not a substitute or replacement for fitness to practise and any issues of competence should not be identified through revalidation processes but through effective line management including 1 to 1's and clinical supervision, with reference to the performance policy as appropriate.

Registrants that are on maternity leave should be supported by their line managers to meet their revalidation deadline through the use of their keeping in touch days.

Should a registrant make a false declaration during the revalidation process this will be addressed through NHS Kernow's disciplinary policy

Should a registrant fail to revalidate this may result in the nurse, midwife and nurse associate being requested to take unpaid/paid leave or redeployed to undertake alternative work until their registration is renewed. The opportunity to take annual leave will be dependent on their annual leave entitlement left at that time. If the member of staff is redeployed, they will be paid at the rate for the job in which they have been redeployed into, which is typically the lowest point of a Band 4 pending confirmation of their registration. If the nurse and nurse associate does not complete the revalidation within the timescale agreed with their line manager this may result in disciplinary action. It will be the responsibility of the line manager to seek advice from the relevant People and OD Partner prior to conducting investigation into the events leading up to the non-renewal of registration and revalidation. Following this investigation, line managers, with input from the People and OD Partner where applicable, are responsible for considering whether any action under the NHS Kernow's Disciplinary Policy and Procedure should be taken. This is not likely to exceed 2 weeks. Redeployment and unpaid leave, if applicable, will remain until there has been investigation into the reasoning for the lapse in registration, whereby in exceptional circumstances, a period of annual leave may be agreed.

9. Implementation plans and monitoring effectiveness

The policy will be reviewed by staff voice and the unions. The policy will be ratified formally by the unions and following this, all colleagues will be informed that a new policy is available on IRIS.

Training will be incorporated into the relevant existing management training to ensure line managers are clear in what their role is in the process and what they are responsible for.

POD will monitor revalidation.

10. Update and review

This policy will be reviewed by the POD team on a regular basis to ensure it remains compliant the NMC requirements for nurse revalidation. The policy will be reviewed every 3 years.

Appendix 1: Revalidation steps

Awareness of requirements

All Nurses and Line Manager to be aware of the NMC requirements for revalidation:

- minimum 450 practice hours over 3 years since last registration.
- minimum 35 hours of CPD since last registration
- 20 hours of the 35 CPD hours required must be participatory
- 5 pieces of practice related feedback since last registration. Feedback can be verbal or written
- 5 written reflective accounts written since last registration
- evidence of a reflective discussion with another NMC registrant
- declaration of health and character
- declaration of professional Indemnity arrangements
- confirmation by a third party that the registrant meets requirements, this is known as the confirmer

Process

1. NMC Revalidation activity completed prior to 60-day notice of revalidation.
2. Nurse receives 60 days' notice of revalidation from the NMC.
3. ESR will send notifications to the colleague at 12, 6 and 4 months prior to their revalidation date.
4. Line manager to meet with registrant to check that all their NMC revalidation requirements are complete and their reflective discussion, with a fellow registrant, is booked in or completed. Line manager also ensures there is discussion on revalidation and registering as part of yearly appraisal.
5. Revalidation is then complete for 3 years. In addition, each year a nurse, midwife and nurse associate need to be aware of their responsibility and the requirement to submit an annual payment to the NMC to maintain registration status.

Appendix 2 - Equality impact assessment

An equality impact assessment is used to establish how a policy or similar document may impact on individuals, communities, or equality groups to identify and minimise or remove any disproportionate impact. A full impact assessment should be undertaken for policies, strategies, procedures, or projects which are anticipated to have an impact on members of the public. Read guidance on how to complete this document.

Name of policy or service to be assessed: Nursing, midwifery and nurse associate revalidation policy
Department or section: POD
Date of assessment: April 2022
Person(s) responsible for the assessment: Gabi Ruck, people and organisational development
Is this a new or existing policy? Existing

Aims, objectives and purpose of the policy

Describe the aims, objectives, and purpose of the policy.
To provide staff with guidance on the subject of nurse, midwife +and nurse associate revalidation and to ensure everyone understands their own responsibility for undertaking and remaining up to date with their NMC registration. The policy also aims to ensure that NHS Kernow Clinical Commissioning Group (NHS Kernow) meets its obligations as an employer to provide support to our nurses as they go through the revalidation process. The policy also aims to give managers a framework that highlights the support available to ensure that nurses are competent to provide safe and effective care.

Who is intended to benefit from this policy, and in what way?
It is intended that all colleagues of NHS Kernow, the NHS system and wider community will benefit from this policy for the following reasons:

- Nurses to stay up to date with their professional development and skills to therefore aid safe, efficient and evidence-based practice
- Boosts the professional development activities of nurses and midwives
- Increases the awareness of the code and the standards of expectations
- Develops self-reflection and continuous improvement
- Makes a positive difference in the career performance appraisal
- Affirms work ethic and professionalism

- Fosters mutual shared learning for the betterment

What outcomes are wanted from this policy?
Clear and consistent process and a good understand of nurse revalidation.

What factors or forces could contribute or detract from the outcomes?
Failure to consistently apply the principles of the policy.

Who are the main stakeholders in relation to the policy?
Colleagues, trade union representatives and management.

Who implements the policy, and who is responsible for the policy?
Managers implement with POD support.

Differential impacts

Does this have a positive or negative impact on people who have a black, Asian and minority ethnic (BAME) background? How will any negative impact be mitigated?
There will be no negative impacts on this group providing the policy is applied consistently.

Does this have a positive or negative impact on people who identify as male, female or intersex? How will any negative impact be mitigated?
The majority of nurses in NHS Kernow are female, therefore this policy has a positive impact for women in ensuring a clear, consistent process is available and understood. There will be no negative impacts on this group providing the policy is applied consistently.

What is the positive or negative differential impact on people from the perspective of disability? How will any negative impact be mitigated?
There may be some impairments that make it difficult for nurses to undertake certain CPD or interaction to complete revalidation or occasions where colleagues are on long term sick. We will always consider requests for adjustments to remove or reduce any disadvantages faced as far as possible.

Does this have a positive or negative impact on people who identify as heterosexual, lesbian, gay, bisexual, pansexual or asexual? How will any negative impact be mitigated?
There will be no negative impacts on this group providing the policy is applied consistently.

What is the positive or negative differential impact on people from the perspective of age? How will any negative impact be mitigated?
There will be no negative impacts on this group providing the policy is applied consistently.

What is the positive or negative differential impact on people from the perspective of religion or belief? How will any negative impact be mitigated?
There will be no negative impacts on this group providing the policy is applied consistently.

What is the positive or negative differential impact on people from the perspective of marriage and civil partnership? This is particularly relevant for employment policies. How will any negative impact be mitigated?
There will be no negative impacts on this group providing the policy is applied consistently.

Does this have a positive or negative impact on people who identify as trans or transgender, non-binary, or gender fluid? How will any negative impact be mitigated?
There will be no negative impacts on this group providing the policy is applied consistently.

Does this have a positive or negative impact on people who are pregnant, breast-feeding mothers, or those on maternity leave? How will any negative impact be mitigated?
There will be no negative impacts on this group providing the policy is applied consistently.

Are they any other identified groups? How will any negative impact be mitigated?
There are no other identified groups who might be negatively impacted.

Human rights values

How have the core human rights values of fairness, respect, equality, dignity, and autonomy been considered in the formulation of this policy, service, or strategy?

Fairness is linked with the core values of equality and autonomy, in ensuring that the decision-making process is free from discrimination and that the person is involved in the decision-making process.

Which of the human rights articles does this document impact?

☐ To life
☐ Not to be tortured or treated in an inhuman or degrading way
☐ To liberty and security
☐ To a fair trial
☐ To respect for home and family life, and correspondence
☐ To freedom of thought, conscience, and religion
☐ To freedom of expression
☐ To freedom of assembly and association
☐ To marry and found a family
☒ Not to be discriminated against in relation to the enjoyment of any of the rights contained in the European Convention
☐ To peaceful enjoyment of possessions

What existing evidence (either presumed or otherwise) do you have for this?
This policy complies with the Equality Act 2010.

How will you ensure that those responsible for implementing the policy are aware of the human rights implications and equipped to deal with them?
Ensuring that managers are aware of the policy and that POD is consulted where appropriate. Also through providing mandatory equality, diversity and human rights training, and the availability of the human rights statement and guidance document which is available at: HumanRightsStatementAndGuidance.pdf (cornwall.nhs.uk)

Public Sector Social Value Act 2012

NHS Kernow is committed and obliged to fulfil the requirements of the Public Sector Social Value Act 2012. This Act requires the organisations to consider how services commissioned or procured might improve the economic, social, and environmental wellbeing of an area.

Please describe how this will support and contribute to the local system, wider system, and community.
This policy ensures that nurses within NHS Kernow know how to meet their contractual requirements by maintaining their registration where this is a requirement of their role, therefore benefitting NHS Kernow, the NHS system and wider community.

Describe how the policy contributes towards eliminating discrimination, harassment, and victimisation.
This policy provides a framework for fairly and consistently ensuring all applicable colleagues undertake Nurse revalidation.
Describe how the policy contributes towards advancing equality of opportunity.
This policy provides a framework for fairly and consistently ensuring all applicable colleagues undertake Nurse revalidation.
Describe how the policy contributes towards promoting good relations between people with protected characteristics.
This policy provides a framework for fairly and consistently ensuring all applicable colleagues undertake Nurse revalidation.
If the differential impacts identified are positive, explain how this policy is legitimate positive action and will improve outcomes, services and or the working environment for that group of people.
Not applicable.

Explain what amendments have been made to the policy or mitigating actions have been taken, and when they were made.
The policy has been changed to ensure it meets accessibility requirements.

If the negative impacts identified have been unable to be mitigated through amendment to the policy or other mitigating actions, explain what your next steps are using the following equality impact assessment action plan.
Not applicable

Signed (completing officer):
Gabi Ruck
Date: April 2022
Signed (head of department or section):
Emma Goudge
Date: 25.05.2022